FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 65 00067719 3 COMMITTEE NAME **OFFICE USE ONLY** Texans for Kelly Hancock SPAC Date Received **ELECTRONICALLY FILED** 07/14/2023 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 4908 Dory Court Date Hand-delivered or Date Postmarked Change of Address North Richland Hills, TX 76180 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Robert A. NAME NICKNAME LAST **SUFFIX** Harrison STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 4908 Dory Court STREET **ADDRESS** (Residence or Business) North Richland Hills, TX 76180 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 4908 Dory Court MAILING **ADDRESS** North Richland Hills, TX 76180 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (817) 832-0411 PHONE REPORT January 15 30th day before election Exceeded modified reporting limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election X July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Year Month Day Year Month Day COVERED **THROUGH** 06/30/2023 01/01/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 03/02/2027 General Special

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Version V3.5.1.3ac88bc0

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME		:	13 Filer ID	(Ethics Commission Filers)
Texans for Kelly Hanco	ck SPAC		00067719	
14 COMMITTEE		CANDIDATE / OFFICEHOLDER NAME		
PURPOSE		The Honorable Kelly Hancock		
(Attach lists on plain paper to complete this	Candidate			
report if necessary.)	X Officeholder	OFFICE SOUGHT (candidate) / OFFICE HELD	(officeholder)	
		State Senator		
SUPPORT				
(Candidate or Measure)		BALLOT IDENTIFICATION / #		ION DATE
OPPOSE			Month	Day Year
(Candidate or Measure)	_			
X ASSIST	Measure	DESCRIPTION		
(Officeholder)		BESCHI HON		
15 CONTRIBUTION TOTALS		NTRIBUTIONS OF \$50 OR LESS (OTHER THAN EES OF LOANS, OR CONTRIBUTIONS MADE	PLEDGES,	
TOTALS	ELECTRONICALLY), U			\$ \$0.00
	2. TOTAL POLITICAL O	CONTRIBUTIONS		
		ES, LOANS, OR GUARANTEES OF LOANS)		\$ \$60,682.50
	(6=			
EXPENDITURE	3. TOTAL UNITEMIZED P	OLITICAL EXPENDITURES		
TOTALS				\$ \$2,143.36
	4. TOTAL POLITICAL I	EVDENDITI IDES		
	- TOTAL POLITICAL I	EXPERIENCES		\$ \$168,789.66
CONTRIBUTION BALANCE	5. TOTAL POLITICAL COI REPORTING PERIOD	NTRIBUTIONS MAINTAINED AS OF THE LAST I	DAY OF THE	4 4 007 400 50
BALANCE	REPORTING PERIOD			\$ \$4,007,129.52
OUTSTANDING	6. TOTAL PRINCIPAL AM	OUNT OF ALL OUTSTANDING LOANS AS OF T	HE LAST	
LOAN TOTALS	DAY OF THE REPORT		112 2701	\$ \$0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of perju		
		and correct and includes all information Title 15, Election Code.	required to be	reported by me under
			A. Harrison	
AFFIX NOTARY	STAMP / SEAL ABOVE	Signature of Can	ipaign Treasur	er
Owner to seed out or with a di	hafana na harda aa'd		! _ 4L _	de
		, th ch, witness my hand and seal of office.	is the	day
01	_, 20, to certify with	ch, whiless my hand and seal of office.		
Cignoture of officer -	ministoring acth	nted name of officer administering and	Title of eff:-	or administaring actic
Signature of officer ad	ministening oath Pri	nted name of officer administering oath	Tiue of office	er administering oath

FORM SPAC **SPECIFIC-PURPOSE COMMITTEE REPORT: ADDENDUM PURPOSE** Page 3 of 65 (Ethics Commission Filers) 12 COMMITTEE NAME 13 Filer ID Texans for Kelly Hancock SPAC 00067719 14 COMMITTEE CANDIDATE / OFFICE HOLDER NAME **PURPOSE** The Honorable Kelly Hancock (Attach lists on plain CANDIDATE paper to complete this report if necessary.) OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) OFFICE HOLDER State Senator SUPPORT (Candidate or Measure) **BALLOT IDENTIFICATION ELECTION DATE** MONTH DAY YEAR OPPOSE MEASURE (Candidate or Measure) DESCRIPTION **ASSIST** (Officeholders only)

SUBTOTALS - SPAC

FORM SPAC COVER SHEET PG 3 4 of 65

40.00							
17 COMMIT	EE NAME	18 Filer ID	(Ethi	cs Commission Filers)			
Texans f	or Kelly Hancock SPAC	00067719					
19 SCHEDUI NAME OF		SUBTOTAL AMOUNT					
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	60,202.50			
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	480.00			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$				
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$				
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$				
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$				
7.	SCHEDULE E: LOANS		\$				
8. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	168,789.66			
9.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
10.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$				
11.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$				
12.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$				
14. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	57,869.40			
			•				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/9 Rpt: 5/65	
2	FILER NAME Texans for K	Celly Hancock SPAC		3	Filer ID (Ethics Commission 00067719	on Filers)
4	Date 06/22/2023	5 Full name of contributor out-of-state PAC (ID#:_ Association of Fire and Casualty Companies in 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
_	<u> </u>	Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 06/22/2023	Full name of contributor out-of-state PAC (ID#:_ Beer Alliance of Texas Political Action Committee Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/29/2023	Full name of contributor out-of-state PAC (ID#:_ Blackridge Group Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions			
	T inicipal occu	pation 7 300 title (See Instructions)	Employer (See Instructions	,		
	Date 06/26/2023	Full name of contributor out-of-state PAC (ID#:_ Burckle, Robert (Mr.) Contributor address; City; State; Zip Code Southlake, TX 76092)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/22/2023	Full name of contributor out-of-state PAC (ID#:_ Cammack & Strong P.C. Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDULE A1	
	The Instruc	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 2/9 Rpt: 6/65	=
2	FILER NAME Texans for K	elly Hancock SPAC			3	Filer ID (Ethics Commission Filers) 00067719	
4	Date 06/30/2023	 Full name of contributor out-of-state PAC (ID#:_Clark, Michael (Mr.) Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$) \$1,000.00	-
8	Principal occu Retired	Colleyville, TX 76034 pation / Job title (See Instructions)	9	Employer (See Instructions Retired	<u> </u> s)		_
	Date 06/30/2023	Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$) \$1,000.00	=
	Principal occu VP Governm	Lampasas, TX 76550 pation / Job title (See Instructions) ent Affairs		Employer (See Instructions Smart Start Inc	<u> </u> s)		_
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Defend Texas Liberty PAC Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$5,000.00	=
	Principal occu	Willow Park, TX 76087 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		_
	Date 06/23/2023	Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$17.50	-
	Principal occu	Euless, TX 76039 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		_
	Date 06/26/2023	Full name of contributor out-of-state PAC (ID#:_Filewood, Janis (Mrs.) Contributor address; City; State; Zip Code Bedford, TX 76021				Amount of Contribution (\$) \$50.00	-
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>. </u>		_
			1				_

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/9 Rpt: 7/65	
2	FILER NAME Texans for K	Kelly Hancock SPAC		3	Filer ID (Ethics Commission 00067719	on Filers)
4	Date 06/30/2023	5 Full name of contributor out-of-state PAC (ID#:_ Hancock, Melody (Mrs.) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00
_		Hurst, TX 76054				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Hanson, Mark (Dr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Dringinal occu	Arlington, TX 76012 pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	pation 7 300 title (See Instructions)	Retired	,		
	Date 06/29/2023	Full name of contributor out-of-state PAC (ID#:_ Head Jr., Albon (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
		Fort Worth, TX 76102				
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Jackson Walker LLP)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Henry, Matthew (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75218			Amount of Contribution (\$)	\$2,500.00
	•	pation / Job title (See Instructions) General Counsel	Employer (See Instructions Oncor)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Heuman, Joseph (Lt.) Contributor address; City; State; Zip Code Bedford, TX 76021			Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 4/9 Rpt: 8/65	
2	FILER NAME Texans for K	elly Hancock SPAC			3	Filer ID (Ethics Commission 00067719	on Filers)
4	Date 06/30/2023	5 Full name of contributor [Hill, John (Mr.)6 Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)	7	Amount of Contribution (\$)	\$5,000.00
8	Principal occu	Houston, TX 77002	<u> </u>	Employer (See Instructions	.)		
0	CEO	pation / Job title (See Instructions)	9	Employer (See Instructions Calpine)		
	Date 06/27/2023	Full name of contributor [Jones, Justin (Mr.) Contributor address; City; Sta				Amount of Contribution (\$)	\$100.00
	Principal occu	Southlake, TX 76092 pation / Job title (See Instructions)		Employer (See Instructions	()		
		,			,		
	Date 06/29/2023	Full name of contributor [Jury, Donald (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$250.00
		Fort Worth, TX 76117					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 06/30/2023	Full name of contributor [King, Daryl (Mr.) Contributor address; City; Sta North Richland Hills, TX 76	te; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	()		
	Date 06/30/2023	Full name of contributor Mach, Steven (Mr.) Contributor address; City; Sta Houston, TX 77219	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu VP Finance	pation / Job title (See Instructions)		Employer (See Instructions Mach Industrial Group L			
				·			

	MONET	ARY POLITICAL CON	ITRIBUTION	S		SCHEDU	LE A1
	The Instru	ction Guide explains how to co	omplete this form	1.	1	Total pages Schedule A1: Sch: 5/9 Rpt: 9/65	
2	FILER NAME Texans for K	elly Hancock SPAC			3	Filer ID (Ethics Commissi 00067719	on Filers)
4	Date 06/29/2023	Martineau, David (Mr.)	nt-of-state PAC (ID#: p Code		7	Amount of Contribution (\$)	\$50.00
		Dallas, TX 75225	· · · · · · · · · · · · · · · · · · ·				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions))		
	Date 06/26/2023	Mercer, Audley (Mr.) Contributor address; City; State; Zip	p Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	Bedford, TX 76022 pation / Job title (See Instructions)		Employer (See Instructions)		
	Retired	,		Retired			
	Date 06/30/2023	Full name of contributor our Montesa, Sandra (Ms.) Contributor address; City; State; Zip	it-of-state PAC (ID#: p Code)		Amount of Contribution (\$)	\$20.00
		Harker Heights, TX 76548					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/30/2023	Full name of contributor our Moynihan, Patrick (Mr.) Contributor address; City; State; Zip Grapevine, TX 76051)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions))		
	Date 06/26/2023	Nye Jr., Erle (Mr.))		Amount of Contribution (\$)	\$15,000.00
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions) Oncor Electric Delivery (LLC	
			I				

	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 6/9 Rpt: 10/65
2	FILER NAME Texans for K	elly Hancock SPAC		3 Filer ID (Ethics Commission Filers) 00067719
4	Date 06/30/2023	 Full name of contributor		7 Amount of Contribution (\$) \$100.00
8	Principal occu VP	North Richland Hills, TX 76182 pation / Job title (See Instructions)	9 Employer (See Instructions	
	Date 06/22/2023	Full name of contributor out-of-state PAC (ID#:_Rove, Karen (Mrs.) Contributor address; City; State; Zip Code Austin, TX 78703		Amount of Contribution (\$) \$5,000.00
	Principal occu Lobbyist	pation / Job title (See Instructions)	Employer (See Instructions ISI Consulting)
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_Rutter, Donna (Ms.) Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$100.00
	Principal occu	Fort Worth, TX 76135 pation / Job title (See Instructions)	Employer (See Instructions)
	СРА	,	Donna R Rutter CPA	,
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#: Ryan, Jason (Mr.) Contributor address; City; State; Zip Code Houston, TX 77021)	Amount of Contribution (\$) \$2,500.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions CenterPoint Energy)
	Date 06/25/2023	Full name of contributor out-of-state PAC (ID#:_Sargent, John (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021		Amount of Contribution (\$) \$200.00
	Principal occu Dispatcher	pation / Job title (See Instructions)	Employer (See Instructions American Airlines)

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/9 Rpt: 11/65	
2	FILER NAME Texans for K	elly Hancock SPAC		3	Filer ID (Ethics Commission 00067719	on Filers)
4	Date 06/29/2023	 Full name of contributor out-of-state PAC (ID#:_Smith, David (Mr.) Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$50.00
_	Deinainal assu	North Richland Hills, TX 76117	O Frankrija (Caa kastrustia ra			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 06/29/2023	Full name of contributor out-of-state PAC (ID#: Stewart, Scott (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Deinsinal assu	Fort Worth, TX 76107	Franks var (Caa kaatu atiana			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/22/2023	Full name of contributor out-of-state PAC (ID#: Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/22/2023	Full name of contributor out-of-state PAC (ID#:_ Texas Association of Health Plans PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/22/2023	Full name of contributor out-of-state PAC (ID#:_ Texas Medical Association Political Action Comm Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
		I				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	.E А1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/9 Rpt: 12/65		
2	FILER NAME Texans for K	Kelly Hancock SPAC		3	Filer ID (Ethics Commission 00067719	on Filers)	
4	Date 06/30/2023	Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00	
_		Austin, TX 78705					
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Webb Jr., Walter (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00	
	Principal occu	Dallas, TX 75216 upation / Job title (See Instructions)	Employer (See Instructions)			
	Date 06/22/2023	Full name of contributor out-of-state PAC (ID#:_ Weekley, Richard (Mr.) Contributor address; City; State; Zip Code Houston, TX 77027)		Amount of Contribution (\$)	\$2,500.00	
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Weekley Properties)			
	Date 06/22/2023	Full name of contributor out-of-state PAC (ID#:_ Wholesale Beer Distributors of Texas PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00	
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)			
	Date 06/29/2023	Full name of contributor out-of-state PAC (ID#:_ Wortham, Gary (Mr.) Contributor address; City; State; Zip Code North Richland Hills, TX 76180			Amount of Contribution (\$)	\$500.00	
	Principal occu Chairman	ipation / Job title (See Instructions)	Employer (See Instructions Southwestern Services)			

TARY POLITICAL CONTRIBU	SCHEDULE A1	
action Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 9/9 Rpt: 13/65
E Kelly Hancock SPAC		3 Filer ID (Ethics Commission Filers) 00067719
 Full name of contributor	C (ID#:)	7 Amount of Contribution (\$) \$35.0
Round Rock, TX 78681		
upation / Job title (See Instructions)	9 Employer (See Instruction	ns)
	tection Guide explains how to complete Kelly Hancock SPAC Full name of contributor out-of-state PA Yarling, Richard (Mr.) Contributor address; City; State; Zip Code Round Rock, TX 78681	Kelly Hancock SPAC 5 Full name of contributor out-of-state PAC (ID#:) Yarling, Richard (Mr.) 6 Contributor address; City; State; Zip Code Round Rock, TX 78681

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

T I I	ation Octide combine broads accombine this f		1 Total pages Schedule A2:
The Instruction Guide explains how to complete this form.			Sch: 1/1 Rpt: 14/65
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Texans for I	Kelly Hancock SPAC		00067719
4	-		
TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution
01/19/2023	Clay, Ryan (Mr.)		contribution (\$) description \$350.00 Food, beverage, and
	7 Contributor address; City; State; Zip Code		facility fees related to
			December 2022 campaign
			i fundraiser; billed in Jan
	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule T.
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	· · · · · · · · · · · · · · · · · · ·
Principal		Texas Star Alliance	e
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 contributo	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	s a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:	1	Amount of In-kind contribution
06/27/2023	Hillco Political Action Committee		contribution (\$) description
00/21/2020	Contributor address; City; State; Zip Code		\$130.00 Hosting of Campaign
	Contributor address, City, State, Zip Code		fundraising event held at the Austin Club on June
			127, 2023
	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	
	,		, ,
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
0011411241010	principal eccapation (Centre)		((0.0002.0
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Contributor 3	employer/law limit (i ort ooblonte)	Law IIIII of Contribute	or a spouse (ii arry) (i or (doblowie)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
ii continuator	s a clind, law lith of parent(s) (if any) (FOR 30DICIAL)		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising 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 complete	te this form.
1	. •	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Ļ	Sch: 1/49 Rpt: 15/65	Texans for Kelly Hancock SPAC	00067719
4	Date 01/21/2023	5 Payee name AT&T	
_	Amount (\$)	7 Payee address; City; State; Zip Code	
ľ	\$83.14	P.O. Box 6463	
	Ψ00.1.1	1 .e. 56x 6 .ee	
		Carol Stream, IL 60197	
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.
	LAFLINDITORL		Check if Austin, TX, officeholder living expense
			Campaign telecommunications
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		2
F	Date	Payee name	
	02/10/2023	AT&T	
Г	Amount (\$)	Payee address; City; State; Zip Code	
	\$82.80	P.O. Box 6463	
		Carol Stream, IL 60197	
Г	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 Campaign telecommunications
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	03/20/2023	AT&T	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$82.80	P.O. Box 6463	
		Carol Stream, IL 60197	
	PURPOSE OF	, ,	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense	Check if dustin, TX, officeholder living expense
			Campaign telecommunications
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experientare to benefit C/OI	<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

	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: 2/49 Rpt: 16/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	04/19/2023	AT&T
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$82.45	P.O. Box 6463
		Carol Stream, IL 60197
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
		Campaign telecommunications
		Campaigh 61655mmamdations
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Power name
	05/19/2023	Payee name AT&T
	Amount (\$)	Payee address; City; State; Zip Code
	\$82.45	P.O. Box 6463
		Carol Stream, IL 60197
	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
		Campaign telecommunications
	Opening the ONE Wife disease	On didn't lot for a bald on a superior of the same of
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	•	
	Date	Payee name
	06/20/2023	AT&T
	Amount (\$)	Payee address; City; State; Zip Code
	\$82.45	P.O. Box 6463
		Carol Stream, IL 60197
	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
		Campaign telecommunications
	Complete CMI V if direct	Condidate/Officeholder name Office cought
	Complete ONLY if direct expenditure to benefit C/OH	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 -

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: 3/49 Rpt: 17/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	06/05/2023	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	1200 12th Ave
		Suite 1200
		Seattle, WA 98144
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Gift card for Officeholder's intern
_	Complete ONLY if direct	Condidate/Office holder name Office pought
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	06/25/2023	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.10	P.O. Box 84314
		Baton Rouge, LA 70884
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Campaign credit card processing fee
		Campaigh credit card processing ree
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/27/2023	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.20	P.O. Box 84314
	Ψ4.20	F.O. BOX 04314
		Peter Peure I A 70004
		Baton Rouge, LA 70884
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign credit card processing fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbur

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

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)
1	Sch: 4/49 Rpt: 18/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	06/29/2023	Anedot
6	Amount (\$) \$10.05	7 Payee address; City; State; Zip Code P.O. Box 84314
		Baton Rouge, LA 70884
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign credit card processing fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/30/2023	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$97.80	P.O. Box 84314
		Baton Rouge, LA 70884
	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
		Campaign credit card processing fee
		Campaign creat data processing tee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/30/2023	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$106.80	P.O. Box 84314
		Baton Rouge, LA 70884
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	ACCOUNTING/Balliking Check if Austin, TX, officeholder living expense
		Campaign credit card processing fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 5/49 Rpt: 19/65 Texans for Kelly Hancock SPAC 00067719 4 Date Payee name 03/20/2023 Anthropologie 6 Amount (\$) Payee address; City; State; Zip Code \$150.00 266 Grand Ave #3-D Southlake, TX 76092 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Gift card for Officeholder's staff member Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/22/2023 **Austin Proper** Amount (\$) Payee address; City; State; Zip Code \$405.42 600 West 2nd Street Ausitn, TX 78701 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Officeholder's staff appreciation dinner Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/31/2023 Bywaters, Jacob (Mr.) Amount (\$) Payee address: City: State; Zip Code \$5,569.46 4201 City Point Drive Apt 2109 North Richland Hills, TX 76180 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign staff salary Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Coi	mmittee	Gift/Awards/Memo	•		Wages	s/Contract Labor			l Out of Dis ER (enter a	strict category not listed a	lbove)
_		1		The Instruction	oulue expiali	IIS HOW TO CO	mpie	ete tilis iOIIII.	1-			/=·· -	
1	Total pages Schedule F1:	2							3			(Ethics Commis	sion Filers)
	Sch: 6/49 Rpt: 20/65		Texans for	Kelly Hancoo	k SPAC					000	67719		
4	Date	5	Payee name										
L	02/28/2023	L	Bywaters, J	acob (Mr.)									
6	Amount (\$)	7	Payee addre	ss; City;	Sta	ate; Zip Co	ode						
	\$1,762.42		4201 City P	oint Drive									
			Apt 2109										
			North Richla	and Hills, TX	76180								
8	PURPOSE	(a)	Category (5)	ee Categories listed	at the top of this	schedule)	(b)	Description					
	OF EXPENDITURE			ages/Contrac				:	outsi	ide of T	exas. Com	plete Schedule T.	
	EXPENDITURE			-				Check if Austin				g expense	
								Campaign sta	aff :	salar	У		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	9	Office sou	ıght				Office he	eld	
L													
	Date		Payee name										
	03/31/2023		Bywaters, J	acob (Mr.)									
	Amount (\$)		Payee addre	ss; City;	Sta	ate; Zip Co	ode						
	\$1,762.42		4201 City P	oint Drive									
			Apt 2109										
			-	and Hills, TX	76180								
	PURPOSE	(a)	Category (9)	ee Categories listed	l at the top of this	schedule)	(b)	Description					
	OF	ĺ <i>′</i>		ages/Contrac		concure)	Ĭ ,	_	outsi	ide of T	exas. Com	plete Schedule T.	
	EXPENDITURE			-				Check if Austin				g expense	
								Campaign sta	aff :	salar	У		
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	9	Office sou	ıght				Office he	eld	
		_											
	Date		Payee name										
	04/30/2023		Bywaters, J	acob (Mr.)									
	Amount (\$)		Payee addre	ss; City;	Sta	ate; Zip Co	ode						
	\$1,762.42		4201 City P	oint Drive									
			Apt 2109										
			North Richla	and Hills, TX	76180								
	PURPOSE	(a)	Category (Si	ee Categories listed	at the top of this	schedule)	(b)	Description					
	OF EXPENDITURE			ages/Contrac				Check if travel				plete Schedule T.	
	LAPENDITURE							Check if Austin				g expense	
								Campaign sta	aff :	salar	У		
							<u> </u>						
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	9	Office sou	ıght				Office he	eld	
	pondition to bonom 0/01	•											

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Cabadula F1:	
1	Total pages Schedule F1: Sch: 7/49 Rpt: 21/65	2 FILER NAME Texans for Kelly Hancock SPAC 3 Filer ID (Ethics Commission Filers) 00067719
4	Date	5 Payee name
	05/31/2023	Bywaters, Jacob (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,762.42	4201 City Point Drive
		Apt 2109
		North Richland Hills, TX 76180
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Campaign staff salary
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
H	Date	Payee name
	04/03/2023	CVS
	Amount (\$)	Payee address; City; State; Zip Code
	\$534.88	100 E Southlake Blvd
	φοσ-1.00	100 E Goddinake Biva
		Southlake, TX 76092
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gift cards for Officeholder's staff members
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/12/2023	Capitol Gift Shop
	Amount (\$)	Payee address; City; State; Zip Code
	\$45.47	112 East 11th
		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
		Supplies for Officeholder's Capitol office
		Supplies for Smoothstate 3 Suprior office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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	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: 8/49 Rpt: 22/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	05/25/2023	Capitol Gift Shop
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$415.68	112 East 11th
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
		Cifto for Office holder living expense
		Gifts for Officeholder's staff members
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
_	Data	
	Date	Payee name
	01/03/2023	Catch Digital Strategy
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,573.99	2714 Washington Street
		Suite 163
		Greenville, TX 75401
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense Political Advertising
		Political Advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davisa nama
	02/26/2023	Payee name Catch Digital Strategy
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,575.47	2714 Washington Street
		Suite 163
		Greenville, TX 75401
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political advertising
		1 Ontion davertising
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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: Sch: 9/49 Rpt: 23/65	2 FILER NAME Texans for Kelly Hancock SPAC 3 Filer ID (Ethics Commission Filers) 00067719
4	Date 03/07/2023	5 Payee name Catch Digital Strategy
6	Amount (\$) \$1,031.86	7 Payee address; City; State; Zip Code 2714 Washington Street Suite 163 Greenville, TX 75401
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political advertising
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 04/10/2023	Payee name Catch Digital Strategy
	Amount (\$) \$1,077.68	Payee address; City; State; Zip Code 2714 Washington Street Suite 163 Greenville, TX 75401
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political advertising
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 06/05/2023	Payee name Catch Digital Strategy
	Amount (\$) \$1,076.94	Payee address; City; State; Zip Code 2714 Washington Street Suite 163 Greenville, TX 75401
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political advertising
	Complete ONLY 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 -

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	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: 10/49 Rpt: 24/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	06/05/2023	Catch Digital Strategy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,031.86	2714 Washington Street
		Suite 163
		Greenville, TX 75401
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense Political advertising
		Political advertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
,	expenditure to benefit C/Ol	
	Date	Payee name
	04/24/2023	Clayton Spangler Photographic Design
	Amount (\$)	Payee address; City; State; Zip Code
	\$399.00	235 Point Lick Drive
		Charleston, WV 25306
	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
		2023 Texas Senate panoramic photo for district
		office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/11/2023	Corporate High Rise Cleaning
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	P.O. Box 341091
		Austin, TX 78734
	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.
	-	 X Check if Austin, TX, officeholder living expense Cleaning of Officeholder's Austin apartment
		Cleaning of Officerolder's Austin apartment
_	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 Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Mages/Contract Labor

	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: 11/49 Rpt: 25/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	02/03/2023	Corporate High Rise Cleaning
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	P.O. Box 341091
		Austin, TX 78734
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
		\[\times \times \text{Check if Austin, TX, officeholder living expense} \] Cleaning of Officeholder's Austin apartment
		Globaling of Chicomologic Pridotal aparament
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/02/2023	Corporate High Rise Cleaning
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	P.O. Box 341091
	Ψ200.00	1.0. 50% 041001
		Austin, TX 78734
	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 ☐ Cleaning of Officeholder's' Austin apartment
		Cleaning of Officerolder's Austin apartment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	04/01/2023	Corporate High Rise Cleaning
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	P.O. Box 341091
		Austin, TX 78734
	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
		\[\text{\ti}\text{\texi{\text{\texi
		Siedning of Officerolder 3 Adolff apartment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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/Officeholder/Political Committee Credit Card Payment			Legal Services The Instruction Guide explain		Vages	/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAMI	 E				3	Filer ID	(Ethics Commission Filers)	
	Sch: 12/49 Rpt: 26/65	l	Kelly Hancock SPAC					00067719		
4	Date	5 Payee name	!							
	05/02/2023	Corporate I	High Rise Cleaning							
6	Amount (\$)	7 Payee addre	ess; City; Sta	ate; Zip Co	de					
	\$300.00	P.O. Box 3	41091							
		Austin, TX	78734							
8	PURPOSE	(a) Category (S	See Categories listed at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE	Office Over	rhead/Rental Expense			느		de of Texas. Com		
						_		officeholder living	ustin apartment	
						Clearing or C	,,,,	cilolaci 3 Al	σοιπ αραπιπεπι	
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	ght			Office he	eld	_
	expenditure to benefit C/OI	H								
	Date	Payee name	· !							
	06/01/2023	Corporate I	High Rise Cleaning							
	Amount (\$)	Payee addre	ess; City; Sta	ate; Zip Co	de					
	\$300.00	P.O. Box 3	41091							
		Austin, TX	78734							
	PURPOSE OF	(a) Category (S	See Categories listed at the top of this	schedule)	(b)	Description				
	EXPENDITURE	Office Over	rhead/Rental Expense			=		de of Texas. Comp		
						_		officeholder living	ustin apartment	
						Cicaring of C	,,,,,	cholder 37 to	astin apartment	
	Complete ONLY if direct		iceholder name	Office sou	ght			Office he	eld	_
	expenditure to benefit C/OI									
	Date	Payee name								
	02/27/2023	Dallas Cou	nty Republican Party							
	Amount (\$)	Payee addre	ess; City; Sta	ate; Zip Co	de					
	\$1,000.00	11617 N C	entral Expressway							
		Suite 240								
		Dallas, TX	75243							
	PURPOSE	(a) Category (s	See Categories listed at the top of this	schedule)	(b)	Description				
	OF	Event Expe		Jonedaic)	, ,		outsi	de of Texas. Com	olete Schedule T.	
	EXPENDITURE					ш		officeholder living	•	
									tend Dallas GOP	
						Reagan Day	eve	51 IL		
	Complete ONLY if direct		iceholder name	Office sou	ght			Office he	eld	
L	expenditure to benefit C/O									

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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: 13/49 Rpt: 27/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	01/06/2023	Dropbox Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$12.78	1800 Owens Street
		San Francisco, CA 94158
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign data management
		Campaigh data management
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
-	Date	Dougo nama
		Payee name
	02/07/2023	Dropbox Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.78	1800 Owens Street
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Compaign data management
		Campaign data management
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	03/07/2023	Dropbox Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.78	1800 Owens Street
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign data management
		Campaigh data management
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage E

Consulting Expense Food/Beverage E

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		ttee L	egal Services	·		ages	/Contract Labor		OTHER (enter	a category not liste	d above)
				he Instruction G	uide explains h	ow to cor	nple	ete this form.				
1	Total pages Schedule F1:	2 FIL	LER NAME						3	Filer ID	(Ethics Comn	nission Filers)
	Sch: 14/49 Rpt: 28/65	Te	exans for K	elly Hancock S	SPAC					00067719		
4	Date	5 Pa	yee name									
	04/07/2023	Dr	opbox Inc									
6	Amount (\$)	7 Pa	yee address	; City;	State;	Zip Cod	de					
	\$12.78	18	00 Owens	Street								
		Sa	an Francisc	o, CA 94158								
8	PURPOSE	(a) Ca	ategory (See	Categories listed at t	the top of this sche	dule)	(b)	Description				
	OF EXPENDITURE	Fe	ees					=			mplete Schedule T.	
	LXI LINDITORE							_		officeholder livir		
								Campaign da	ita i	manageme	nt	
9	Complete ONLY if direct expenditure to benefit C/OH		ididate/Office	eholder name	Of	ffice souç	ght			Office h	neld	
	Date	Pa	yee name									
	05/08/2023	Dr	opbox Inc									
	Amount (\$)	Pa	yee address	s; City;	State;	Zip Cod	de					
	\$12.78	18	300 Owens	Street								
		Sa	an Francisc	o, CA 94158								
	PURPOSE	(a) Ca	ategory (See	Categories listed at t	he top of this sche	dule)	(b)	Description				
	OF EXPENDITURE	ı	ees					<u></u>			mplete Schedule T.	
								—		officeholder livir		
								Campaign da	ıla i	nanageme	TIL	
	Complete ONLY if direct	Con	didata/Office	shalder name		ffice cour	nh+			Office h	and a	
	Complete ONLY if direct expenditure to benefit C/O		ididate/Office	eholder name	Oi	ffice souç	JIII			Office i	ieiu	
_		ī										
	Date	l	yee name									
	05/12/2023	Dr	opbox Inc									
	Amount (\$)	l	yee address		State;	Zip Coo	de					
	\$12.78	18	300 Owens	Street								
		Sa	an Francisc	o, CA 94158								
	PURPOSE	(a) Ca	ategory (See	Categories listed at t	the top of this sched	dule)	(b)	Description				
	OF EXPENDITURE	Fe	ees								mplete Schedule T.	
								Campaign da				
								Campaign ua	ua I	nanayente	TIL.	
\vdash	Complete ONLY if direct	Can	ndidate/Office	eholder name	Of	ffice soug	tdr			Office h	neld	
	expenditure to benefit C/O		iaiuai e /Oiiill	SHOWER HAIRE	Oi	อบนโ	grit			Office I	iciu	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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
Leal 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: 15/49 Rpt: 29/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	06/07/2023	Dropbox Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$12.78	1800 Owens Street
		San Francisco, CA 94158
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign data management
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	Complete ONLY if direct expenditure to benefit C/Ol	
⊨	D-4-	
	Date	Payee name
L	06/10/2023	Dropbox Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.78	1800 Owens Street
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense
		Campaign data management
┡	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
┡		
	Date	Payee name
	06/30/2023	Dyer, James (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,268.32	1212 East Harris
		Brownfield , TX 79316
	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
		Campaign staff salary
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		

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

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: 16/49 Rpt: 30/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	05/31/2023	Grant Miller Photography
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$510.40	5115 Oak Shadow Court
		Dallas, TX 75287
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Photos for Campaign use
		Thotas for Campaign asc
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
⊨	Data	
	Date	Payee name
	01/06/2023	H.E.B. Foods
	Amount (\$)	Payee address; City; State; Zip Code
	\$226.63	2701 East 7th Street
		Austin, TX 78702
	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
		Supplies for Officeholder's Austin Capital office
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	D .	
	Date	Payee name
	01/17/2023	H.E.B. Foods
	Amount (\$)	Payee address; City; State; Zip Code
	\$129.31	2701 East 7th Street
		Austin, TX 78702
	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
		Supplies for Officeholder's Austin Capital office
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

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/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: 17/49 Rpt: 31/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	01/25/2023	H.E.B. Foods
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$201.99	2701 East 7th Street
		Austin, TX 78702
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 Supplies for Officeholder's Austin Capital office
		Supplies for Officeriolider 37 tustin Suprice office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	02/13/2023	H.E.B. Foods
	Amount (\$)	Payee address; City; State; Zip Code
	\$140.92	2701 East 7th Street
	φ140.92	2701 East 7th Sheet
		A (1 TV T0T00
		Austin, TX 78702
	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
		Supplies for Officeholder's Austin Capital office
		Cappines for Cineditional City additional Capital Cined
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	02/15/2023	H.E.B. Foods
	Amount (\$)	Payee address; City; State; Zip Code
	\$80.96	2701 East 7th Street
		Austin, TX 78702
	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 Supplies for Officeholder's Austin Capital office
		Supplies for Officeriolider's Austin Capital Office
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/49 Rpt: 32/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	02/23/2023	H.E.B. Foods
6	Amount (\$) \$204.54	7 Payee address; City; State; Zip Code 2701 East 7th Street
		Austin, TX 78702
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 Supplies for Officeholder's Austin Capital office
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/01/2023	H.E.B. Foods
	Amount (\$) \$106.16	Payee address; City; State; Zip Code 2701 East 7th Street
		Austin, TX 78702
	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 Supplies for Officeholder's Austin Capital office
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/06/2023	H.E.B. Foods
	Amount (\$) \$198.25	Payee address; City; State; Zip Code 2701 East 7th Street
		Austin, TX 78702
	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 Supplies for Officeholder's Austin Capital office
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Office helder (Political Committee

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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	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: 19/49 Rpt: 33/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	03/13/2023	H.E.B. Foods
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$314.98	2701 East 7th Street
		Austin, TX 78702
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
		Supplies for Officeholder's Austin Capital office
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/25/2023	H.E.B. Foods
	Amount (\$)	Payee address; City; State; Zip Code
	\$220.71	2701 East 7th Street
		Austin, TX 78702
	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
		Supplies for Officeholder's Austin Capital office
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
⊨	Date	Davies same
	04/11/2023	Payee name H.E.B. Foods
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$279.64	2701 East 7th Street
		Austin, TX 78702
I	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
		Supplies for Officeholder's Austin capital office
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		

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 complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	,
	Sch: 20/49 Rpt: 34/65	Texans for Kelly Hancock SPAC 00067719	
4	Date	5 Payee name	_
	04/18/2023	H.E.B. Foods	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$258.31	2701 East 7th Street	
		Austin, TX 78702	
8	PURPOSE		_
ľ	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.	
l	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Supplies for Officeholder's Austin capital office	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	_
	04/24/2023	H.E.B. Foods	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$56.80	2701 East 7th Street	
		Austin, TX 78702	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Supplies for Officeholder's Austin Capital office	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experience to borionic Grou		
	Date	Payee name	
	05/02/2023	H.E.B. Foods	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$70.10	2701 East 7th Street	
		Austin, TX 78702	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Office Overhead/Rental Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Supplies for Officeholder's Austin Capital office	
	Complete ONII V if allow	Constitute / Office helder name Office country	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	

SCHEDULE F1

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

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

ense Travel in Dist ense Travel Out of ges/Contract Labor OTHER (ente

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wage The Instruction Guide explains how to comp	es/Contract Labor OTHER (enter a category not listed above) lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 21/49 Rpt: 35/65	Texans for Kelly Hancock SPAC	00067719
4	Date	5 Payee name	
	05/03/2023	H.E.B. Foods	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$259.30	2701 East 7th Street	
		Austin, TX 78702	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	<u>Description</u>
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Supplies for Officeholder's Austin Capital office
			Supplies for Officeriolder's Adstiff Capital office
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	Office held
_	Complete ONLY if direct expenditure to benefit C/O		. Office field
	Date	Payee name	
	05/20/2023	H.E.B. Foods	
Г	Amount (\$)	Payee address; City; State; Zip Code	
	\$157.92	2701 East 7th Street	
		Austin, TX 78702	
	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 Supplies for Officeholder's Austin Capital office
			Supplies for Officeriolder 37 tastiff Supritar office
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sough	Office held
	expenditure to benefit C/O		. Office field
⊨			
	Date	Payee name	
L	05/30/2023	H.E.B. Foods	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$156.24	2701 East 7th Street	
		Austin, TX 78702	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	Description
	OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Supplies for Officeholder's Austin Capital office
L			
Γ	Complete ONLY if direct	Candidate/Officeholder name Office sough	Office held
	expenditure to benefit C/O	H	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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: 22/49 Rpt: 36/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	06/12/2023	H.E.B. Foods
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$146.38	2701 East 7th Street
		Austin, TX 78702
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 Supplies for Officeholder's Austin capital office
		Supplies for Officeriolaer 3 / lastin suplica office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	06/13/2023	H.E.B. Foods
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$56.08	2701 East 7th Street
		Austin, TX 78702
	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
		Water for Officeholder's Austin capital office
		The state of the s
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	04/12/2023	HEB Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$175.00	P.O. Box 969
		Bedford, TX 76095
	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 Annual dues for Officeholder
		Allitudi dues foi Officeriolaei
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
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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	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: 23/49 Rpt: 37/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	01/20/2023	Home Goods
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$305.19	4810 SW Loop 820
		Fort Worth, TX 76109
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 Supplies for Officeholder's District Office
		Supplies for Silicensider's Bisariet Silice
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
Г	Date	Payee name
	01/31/2023	Jackson, Catherine (Mrs.)
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$11,179.36	1237 Gato del Sol Ave
		Austin, TX 78737
	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
		Campaign staff salary
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	01/03/2023	Keel Systems LLC
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$416.50	23812 Tres Coronas
		Spicewood, TX 78669
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign data management
		Campaign data management
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
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ı		

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	
-	Total pages Cabadula F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Total pages Schedule F1: Sch: 24/49 Rpt: 38/65	2 FILER NAME Texans for Kelly Hancock SPAC 3 Filer ID (Ethics Commission Filers) 00067719
4	Date	5 Payee name
	02/04/2023	Keel Systems LLC
6	Amount (\$) \$416.50	7 Payee address; City; State; Zip Code 23812 Tres Coronas Spicewood, TX 78669
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign data management
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/02/2023	Keel Systems LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$416.50	23812 Tres Coronas
		Spicewood, TX 78669
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign data management
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/01/2023	Keel Systems LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$416.50	23812 Tres Coronas
		Spicewood, TX 78669
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	-	Campaign data management
		Campaign data management
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising 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 Salarice Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 25/49 Rpt: 39/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	05/20/2023	Keel Systems LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$416.50	23812 Tres Coronas
		Spicewood, TX 78669
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign data management
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/01/2023	Keel Systems LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$416.50	23812 Tres Coronas
		Spicewood, TX 78669
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign data management
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/30/2023	Lonesome Dove
	Amount (\$)	Payee address; City; State; Zip Code
	\$401.25	123 West 6th Street
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign finance committee meeting to discuss
		future fundraising efforts
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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	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: 26/49 Rpt: 40/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	05/02/2023	Lonesome Dove
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$177.88	123 West 6th Street
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food & Beverage for meeting to discuss campaign
		business
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/13/2023	Milk & Honey Spa
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	100A Guadalupe Street
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gift card for Officeholder's staff
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/17/2023	Milk & Honey Spa
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	100A Guadalupe Street
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
		Cift could far Office holder living expense
		Gift card for Officeholder's staff member
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

Printing Expense Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 27/49 Rpt: 41/65 Texans for Kelly Hancock SPAC 00067719 4 Date Payee name 03/13/2023 Milk & Honey Spa 6 Amount (\$) Payee address; State; Zip Code \$150.00 100A Guadalupe Street Austin, TX 78701 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Gift card for Officeholder's staff member Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/19/2023 Milk & Honey Spa Amount (\$) Payee address; City; State; Zip Code \$150.00 100A Guadalupe Street Austin, TX 78701 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Officeholder's donation of door prize to Legislative Ladies Club Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/25/2023 Milk & Honey Spa Amount (\$) Payee address: City; State; Zip Code \$1,400.00 100A Guadalupe Street Austin, TX 78701 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Gift cards for Officeholder's staff members Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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:	
	Sch: 28/49 Rpt: 42/65	Texans for Kelly Hancock SPAC 00067719
4	Date 04/28/2023	5 Payee name
_		Nopales 7. Power address: City: State: 7ip Code
٥	Amount (\$) \$424.65	7 Payee address; City; State; Zip Code 8212 Barton Creek Drive
	Ţ . <u>_</u> 33	
		Austin, TX 78735
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food & Beverage for meeting to discuss campaign
		business
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-
	Date	Payee name
	03/20/2023	Nordstrom
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	1101 Melborne
		#4000
L		Hurst, TX 76053
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Gift card for Officeholder's staff member
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
F	Date	Payee name
	06/06/2023	Northeast Tarrant Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.00	5001 Denton Hwy
		Haltom City, TX 76117
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (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
		Officeholder's annual dues
	Complete ON II V if alice	Condidate/Officeholder name Office county
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 29/49 Rpt: 43/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	04/28/2023	Omni Barton Creek Resort
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,594.86	8212 Barton Club Drive
		Austin, TX 78735
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Officeholder constituents' lodging for Texas
		Governor for a Day event
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiantare to benefit of or	
	Date	Payee name
	01/31/2023	Paychex Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$292.55	8605 Freeport Parkway
		Suite 100
		Irving, TX 75063
	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.
		Campaign payroll services
		Campaign payron services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/28/2023	Paychex Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$145.75	8605 Freeport Parkway
		Suite 100
		Irving, TX 75063
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LAPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign payroll services
	Complete ONLY if alice at	Candidate/Officebalder name Office accept
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

The straining Expense Event Expense Event Expense Loan Repayment/Reimbur Community Com

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

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: 30/49 Rpt: 44/65	Texans for Kelly Hancock SPAC 00067719	
4	Date	5 Payee name	
	03/31/2023	Paychex Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$145.75	8605 Freeport Parkway	
		Suite 100	
		Irving, TX 75063	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Campaign payroll services	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	04/30/2023	Paychex Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$161.74	8605 Freeport Parkway	
		Suite 100	
		Irving, TX 75063	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxes, Complete Schedule T	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign payroll services	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	05/31/2023	Paychex Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$145.75	8605 Freeport Parkway	
		Suite 100	
		Irving, TX 75063	
	PURPOSE		_
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Pental Expanse (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	
		Campaign payroll services	
	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 C

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
OTHER (orbits a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	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: 31/49 Rpt: 45/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	06/30/2023	Paychex Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$154.51	8605 Freeport Parkway
		Suite 100
		Irving, TX 75063
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.
		Campaign payroll service
		Campaigh payroll service
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/17/2023	Pottery Barn
	Amount (\$)	Payee address; City; State; Zip Code
	\$375.63	1440 Civic Place
		Southlake, TX 76092
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gifts for Officeholder's Austin Capital office staff
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/10/2023	Randall's
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	2025 W. Ben White Blvd.
		Austin, TX 78704
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
		Check if Austin, TX, officeholder living expense Gift cards for Officeholder's staff
		Silt Calus for Officeriolider's stall
-	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 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: Sch: 32/49 Rpt: 46/65	2 FILER NAME Texans for Kelly Hancock SPAC 3 Filer ID (Ethics Commission Filers) 00067719
4	Date 01/20/2023	5 Payee name Reach Strategies LLC
6	Amount (\$) \$6,000.00	7 Payee address; City; State; Zip Code P.O. Box 91282
		Austin, TX 78709
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign communications consulting services
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 02/23/2023	Payee name Reach Strategies LLC
	Amount (\$) \$6,000.00	Payee address; City; State; Zip Code P.O. Box 91282
		Austin, TX 78709
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign communication consulting services
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 03/20/2023	Payee name Reach Strategies LLC
	Amount (\$) \$6,000.00	Payee address; City; State; Zip Code P.O. Box 91282
		Austin, TX 78709
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign communication consulting services
	Complete ONLY if direct expenditure to benefit C/O	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 C

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

	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: 33/49 Rpt: 47/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	05/03/2023	Reach Strategies LLC
6	Amount (\$) \$6,000.00	7 Payee address; City; State; Zip Code P.O. Box 91282
		Austin, TX 78709
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign communication consulting services
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/01/2023	Reach Strategies LLC
	Amount (\$) \$6,000.00	Payee address; City; State; Zip Code P.O. Box 91282
		Austin, TX 78709
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign communication consulting services
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/31/2023	Ruiz, Hallie (Ms.)
	Amount (\$) \$461.75	Payee address; City; State; Zip Code 1108 Nueces Street Apartment 507 Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign staff salary
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office 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

	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: 34/49 Rpt: 48/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	02/28/2023	Ruiz, Hallie (Ms.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$461.75	1108 Nueces Street
		Apartment 507
		Austin, TX 78701
_	DUDDOCE	
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
		Campaign staff salary
		Sampaigh stail salary
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
H	Date	Payee name
	03/31/2023	Ruiz, Hallie (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	` ,	
	\$461.75	1108 Nueces Street
		Apartment 507
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign staff salary
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/30/2023	Ruiz, Hallie (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$461.75	1108 Nueces Street
	Φ401.75	
		Apartment 507
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign staff salary
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

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

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

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 names Schodule F1:	· · · · · · · · · · · · · · · · · · ·
Ĺ	Total pages Schedule F1: Sch: 35/49 Rpt: 49/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	05/31/2023	Ruiz, Hallie (Ms.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$461.75	1108 Nueces Street
		Apartment 507
		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 Austin, TX, officeholder living expense Campaign staff salary
		Campaigh stan salary
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	06/30/2023	Ruiz, Hallie (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$461.75	1108 Nueces Street
		Apartment 507
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign staff salary
	Complete ONLY if direct	Condidate/Officeholder name Office pought Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/14/2023	Schlotzky's
	Amount (\$)	Payee address; City; State; Zip Code
	\$544.08	8900 South Congress Ave
		Suite 200
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Officeholders's purchase of Senate Finance
		Committee lunch for staff members
	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 Committee

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 36/49 Rpt: 50/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	05/31/2023	Southlake Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	1501 Corporate Circle
		Southlake, TX 76092
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Officeholder's annual dues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/12/2023	Southwestern Exposition & Livestock
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	P.O. Box 150
	42,000.00	1101.50% 100
		Fort Worth, TX 76101
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		auction participants
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/25/2023	State Farm Insurance
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.58	2977 Precinct Line Road
	Ψ3.30	2011 1 Teomor Eme read
		Hurst, TX 76053
	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.
	EXI ENDITORE	X Check if Austin, TX, officeholder living expense
		Insurance for Officeholder's Austin apartment
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 37/49 Rpt: 51/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	02/24/2023	State Farm Insurance
6	Amount (\$) \$9.58	7 Payee address; City; State; Zip Code 2977 Precinct Line Road
		Hurst, TX 76053
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
		x Check if Austin, TX, officeholder living expense Insurance for Officeholder's Austin apartment
		insurance for officeriolaer 37 astin apartment
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/28/2023	State Farm Insurance
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.58	2977 Precinct Line Road
		Hurst, TX 76053
	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
		Insurance for Officeholder's Austin apartment
		insurance for officeriolider 57 docum aparament
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/25/2023	State Farm Insurance
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.58	2977 Precinct Line Road
		Hurst, TX 76053
	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 Insurance for Officeholder's Austin apartment
		insurance for Officeriolider's Austin apartment
	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 Committee

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	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: 38/49 Rpt: 52/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	05/24/2023	State Farm Insurance
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$9.58	2977 Precinct Line Road
		Hurst, TX 76053
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 Insurance for Officeholder's Austin apartment
		insulance for Officendiaer's Austin apartition
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Date	Davies same
		Payee name
	06/27/2023	State Farm Insurance
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.58	2977 Precinct Line Road
		Hurst, TX 76053
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		 X Check if Austin, TX, officeholder living expense Insurance for Officeholder's Austin apartment
		insurance for Officendider's Austin apartitient
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	Davies same
	Date 02/07/2023	Payee name Texas Conservative Coalition Research Insitute
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	P.O. Box 2659
		Austin, TX 78768
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Officeholder's biannual membership dues
		Officeriolder's blantidal membership dues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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 Salaries (Contract Labor,

	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: 39/49 Rpt: 53/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	05/03/2023	Texas Ethics Commission
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	P.O. Box 12070
	I	
		Austin, TX 78711
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	l	Filing fee for corrected 8-day report
	I	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/03/2023	Texas Ethics Commission
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	P.O. Box 12070
	I	
		Austin, TX 78711
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	l	Filing fee for delayed financial statement
	I	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
H	Date	Payee name
	01/17/2023	Texas Federation of Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	13740 N Hwy 183
	ψουο.σο	Suite J4
	l	
		Austin, TX 78750
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions / Donations Made Ry Contributions / Donations Made Ry
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	1	Officeholder's sponsorship of Legislative Day event
	l	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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		mittee I	_egal Services	·		/ages	/Contract Labor		OTHER (enter a	a category not listed above)	
				The Instruction G	uide explains r	now to col	mpie	ete this form.	_			
1	Total pages Schedule F1:	l	FILER NAME						3	Filer ID	(Ethics Commission Filer	rs)
	Sch: 40/49 Rpt: 54/65			Celly Hancock S	SPAC					00067719		
4	Date	5 F	Payee name									
	04/19/2023		Texas Feder	ation of Repub	olican Wome	en						
6	Amount (\$)	7 F	Payee addres	s; City;	State;	Zip Co	de					
	\$10,000.00] 1	13740 N Hw	y 183								
			Suite J4									
		/	Austin, TX 7	8750								
8	PURPOSE	(a) (Category (Se	e Categories listed at t	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE			s/Donations Ma		,		Check if travel	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITORE	(Candidate/O	fficeholder/Pol	itical Commi	ittee		_		officeholder living		
								Officeholder's	s sp	onsorship (of Annual Convention	I
9	Complete ONLY if direct expenditure to benefit C/OH		andidate/Offic	eholder name	0	office sou	ght			Office h	eld	
	experience to benefit of or											
	Date	F	Payee name									
	01/11/2023		Texas Senat	te Ladies								
	Amount (\$)	F	Payee addres	s; City;	State;	Zip Co	de					
	\$1,950.00	(Capitol Station	on								
		/	Austin, TX 7	8711								
	PURPOSE	(a) (Category (Se	e Categories listed at t	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE	E	Event Expen	ise				=			nplete Schedule T.	
								ш		officeholder living		
								Officeriolders	5 16	exas Senale	e Ladies gala tickets	
_	Commiste ONLY if dispost		on didata (Offic	- h - l d - v		\tti======	la 4			Office h	ald	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Offic	eholder name	O	office sou	gnt			Office h	eia	
	Date	ı	Payee name									
	06/30/2023		Texas Young	g Republican F	oundation							
	Amount (\$)	F	Payee addres	s; City;	State;	Zip Co	de					
	\$1,000.00	2	2604 Bright I	Rock Lane								
			Conroe, TX	77304								
	PURPOSE	(a) (Category (See	e Categories listed at t	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE			s/Donations Ma				ш			nplete Schedule T.	
		(Candidate/O	fficeholder/Pol	itical Commi	ittee		_		officeholder living		
								National Con			Young Republicans	
	Complete ONLY if direct		andidata/Offic	oholdor nama		office as:	abt			Office h	old	
	Complete ONLY if direct expenditure to benefit C/O		anuluate/OITIC	eholder name	O	office sou	ynı			Office n	eiu	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com 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: 41/49 Rpt: 55/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	01/04/2023	The Bowie
6	Amount (\$) \$4,895.53	7 Payee address; City; State; Zip Code 311 Bowie Street
8	PURPOSE	Austin, TX 78703
°	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 Rent for Officeholder's Austin apartment
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
,	expenditure to benefit C/OI	
	Date	Payee name
	02/23/2023	The Bowie
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,892.70	311 Bowie Street
		Austin, TX 78703
	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. Ty Check if Austin, TX, officeholder living expense
		X Check if Austin, TX, officeholder living expense Rent for Officeholder's Austin apartment
		None to Competition of Audum aparament
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/02/2023	The Bowie
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,899.46	311 Bowie Street
		Austin, TX 78703
	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 Rent for Officeholder's Austin apartment
		Nent for Smeeriolder 3 / down apartment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

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/Officeholder/Politica Credit Card Payment	Committee Legal Services The Instruction Guide exp		cte this form.	OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 42/49 Rpt: 56/65	Texans for Kelly Hancock SPAC			00067719	
4	Date	Payee name		•		
	04/03/2023	The Bowie				
6	Amount (\$) \$4,988.92	Payee address; City; 311 Bowie Street Austin, TX 78703	State; Zip Code			
Ļ	DUDDOCE		100			
8	PURPOSE OF EXPENDITURE	A) Category (See Categories listed at the top of the Office Overhead/Rental Expense)	his schedule) (b)	Description Check if travel outsi Check if Austin, TX, Rent for Officeho	officeholder living	expense
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name	Office sought		Office he	eld
	Date	Payee name				
	05/03/2023	The Bowie				
	Amount (\$)	Payee address; City;	State; Zip Code			
	\$4,945.53	311 Bowie Street				
		Austin, TX 78703				
	PURPOSE OF EXPENDITURE	a) Category (See Categories listed at the top of the Office Overhead/Rental Expense	his schedule) (b)	Description Check if travel outsi Check if Austin, TX, Rent for Officeho	officeholder living	expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought		Office he	eld
	Date	Payee name				
	06/01/2023	The Bowie				
	Amount (\$)	Payee address; City;	State; Zip Code			
	\$4,769.16	311 Bowie Street				
		Austin, TX 78703				
	PURPOSE OF EXPENDITURE	a) Category (See Categories listed at the top of to Office Overhead/Rental Expense	his schedule) (b)	Description Check if travel outsi Check if Austin, TX, Rent for Officeho	officeholder living	expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought		Office he	eld

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:	
	Sch: 43/49 Rpt: 57/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name The Common Crown
Ļ	06/01/2023	The Grammer Group
6	Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code P.O. Box 161152
	ψο,000.00	1.0. Box 101132
		Austin, TX 78716
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign finance consulting services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/01/2023	The Herries Group LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	3 Cottondale Road
		The Hills, TX 78738
	PURPOSE	1
	OF	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign finance consulting services
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	02/10/2023	Thomas Graphics, Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$6,038.86	P.O. Box 14226
		Austin, TX 78714
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
		1
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign advertising
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign advertising Candidate/Officeholder name Office sought Office held
	OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign advertising Candidate/Officeholder name Office sought Office held
	OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign advertising 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 Comi

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: 44/49 Rpt: 58/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	03/02/2023	United States Postal Service/NRH
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$216.00	6051 Davis Blvd
		North Richand Hills, TX 76180
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
		Post Office Box rent for Campaign
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	the state of the s
_	Date	Davido namo
	03/02/2023	Payee name United States Postal Service/NRH
	Amount (\$)	Payee address; City; State; Zip Code
	\$37.80	6051 Davis Blvd
		North Richand Hills, TX 76180
	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 Stamps for Campaign
		Stamps for Campaign
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-		
	Date	Payee name
	01/31/2023	United States Treasury
	Amount (\$)	Payee address; City; State; Zip Code
	\$7,831.76	P.O. Box 1214
		Charlotte, NC 28201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign staff payroll taxes
	0 1 0 0 1 1 1 1	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
		·

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction	Guide explair	s how to d	complete	this form.

		The instruction Guide explains now to comple	ete this form.
1	1 0	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 45/49 Rpt: 59/65	Texans for Kelly Hancock SPAC	00067719
4	Date	5 Payee name	
Ļ	02/28/2023	United States Treasury	
6	Amount (\$) \$477.83	7 Payee address; City; State; Zip Code P.O. Box 1214	
	Φ477.03	P.O. BUX 1214	
		Charlotte, NC 28201	
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
			Campaign staff payroll taxes
			, , , , , , , , , , , , , , , , , , ,
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
F	Date	Payee name	
	03/31/2023	United States Treasury	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$471.63	P.O. Box 1214	
L		Charlotte, NC 28201	
	PURPOSE OF	, -	Description
	EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Campaign payroll taxes
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	04/04/2023	United States Treasury	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$7,150.00	P.O. Box 1214	
		Objections NO 20204	
L		Charlotte, NC 28201	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Office Overflead/Refital Expense	Check if Austin, TX, officeholder living expense
			2022 Federal Income tax for SPAC
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
\vdash	,		

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: Sch: 46/49 Rpt: 60/65	2 FILER NAME Texans for Kelly Hancock SPAC 3 Filer ID (Ethics Commission Filers) 00067719
4	Date 04/30/2023	5 Payee name United States Treasury
6	Amount (\$) \$471.23	7 Payee address; City; State; Zip Code P.O. Box 1214
		Charlotte, NC 28201
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 05/31/2023	Payee name United States Treasury
	Amount (\$) \$471.23	Payee address; City; State; Zip Code P.O. Box 1214
		Charlotte, NC 28201
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 06/29/2023	Payee name United States Treasury
	Amount (\$) \$331.05	Payee address; City; State; Zip Code P.O. Box 1214
		Charlotte, NC 28201
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
	Complete ONLY 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 Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	·		/ages	/Contract Labor		OTHER (enter	a category not listed above)	
				The Instruction G	uide explains h	ow to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 47/49 Rpt: 61/65		Texans for k	Kelly Hancock S	SPAC					00067719		
4	Date	5	Payee name									
	01/17/2023		Whole Food	s Market								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$100.00		525 N Lama	ır Blvd								
			Austin, TX 7	8703								
8	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	dule)	(b)	Description				
OF EXPENDITURE								outsi	utside of Texas. Complete Schedule T.			
Check if Austin, TX, officehol												
								Gift card for C	Offic	ceholder's s	staff member	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	ceholder name	Of	ffice sou	ght			Office h	eld	
	experiantare to benefit or of											
	Date		Payee name									
	05/30/2023		Whole Food	s Market								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$225.92		525 N Lama	ır Blvd								
			Austin, TX 7	8703								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	dule)	(b)	Description				
	OF EXPENDITURE			Memorials Exp				<u></u>			nplete Schedule T.	
	LXI LINDITORL							_		officeholder livin		
								GITT cards for	On	ricenoiaer's	staff members	
	0 1 0 0 1 1 1 1	L	- "			···				0,50		
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH												
	Date		Payee name									
	01/17/2023		Zoom Video	Communication	ons Inc							
Amount (\$) Payee address; City; State; Zip Code												
	\$15.99		55 Almaden	Blvd								
			6th Floor									
			San Jose, C	A 95113								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Fees								nplete Schedule T.	
	LAFENDITORE							_		officeholder livin		
								Officeholder's	S VI	deo confere	encing fee	
						•						
	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Offic	ceholder name	Of	ffice sou	ght			Office h	eld	

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 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: 48/49 Rpt: 62/65	Texans for Kelly Hancock SPAC 00067719					
4	Date	5 Payee name					
	02/16/2023	Zoom Video Communications Inc					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$15.99	55 Almaden Blvd					
		6th Floor					
		San Jose, CA 95113					
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.					
		Check if Austin, TX, officeholder living expense Officeholder's video conferencing fee					
		Chiceholder 3 video conterencing fee					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	-1					
	Date	Payee name					
	03/16/2023	Zoom Video Communications Inc					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$15.99	55 Almaden Blvd					
		6th Floor					
		San Jose, CA 95113					
	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.					
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense					
		Officeholder's video conferencing fee					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OH						
	Date	Payee name					
	04/17/2023	Zoom Video Communications Inc					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$17.06	55 Almaden Blvd					
		6th Floor					
		San Jose, CA 95113					
	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					
		Officeholder's video conferencing fee					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OH						
ı							

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 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: 49/49 Rpt: 63/65	Texans for Kelly Hancock SPAC 00067719
4	Date	5 Payee name
	05/18/2023	Zoom Video Communications Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$17.06	55 Almaden Blvd
		6th Floor
		San Jose, CA 95113
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.
		Check if Austin, TX, officeholder living expense Officeholder's video conferencing fee
		Officeriolder's video conferencing fee
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/17/2023	Zoom Video Communications Inc
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$17.06	55 Almaden Blvd
		6th Floor
		San Jose, CA 95113
	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 Fee for Officeholder's video conferencing
		ree for Officeriolider's video conferencing
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H
┝		
L		

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	ages Schedule K: /2 Rpt: 64/65				
2	FILER NAME			O (Ethics Commission Filers)		
	Texans for K	Celly Hancock SPAC	719			
4	Date 01/31/2023	 Name of person from whom amount is received Independent Bank Address of person from whom amount is received; City; State; Zip Code 	8 Amount (\$)	\$10,028.45		
		McKinney, TX 75070				
		7 Purpose for which amount is received Check if po	olitica	al cont	ribution returned to	filer
		Interest Income				
	Date	Name of person from whom amount is received			Amount (\$)	
	02/28/2023	Independent Bank				\$9,810.77
		Address of person from whom amount is received; City; State; Zip Code			1	
		McKinney, TX 75070				
		<u> </u>	olitica	al cont	ribution returned to	filer
		Interest income				
	Date	Name of person from whom amount is received			Amount (\$)	
	03/31/2023	Independent Bank				\$11,114.82
		Address of person from whom amount is received; City; State; Zip Code				
		McKinney, TX 75070				
			olitica	al cont	l ribution returned to	filer
		Interest Income	011110	ar oone		
-	Date	Name of person from whom amount is received			Amount (\$)	
	04/30/2023	Independent Bank			, (4)	\$6,688.38
		Address of person from whom amount is received; City; State; Zip Code				, -,
		McKinney, TX 75070				
		_ ·	olitica	al cont	ribution returned to	filer
		Interest income				
	Date	Name of person from whom amount is received			Amount (\$)	
	05/31/2023 Independent Bank					\$463.14
	Address of person from whom amount is received; City; State; Zip Code					
		Makingay TV 75070				
		McKinney, TX 75070	11.7		<u> </u>	C.I.
			olitica	al cont	ribution returned to	tiler
		Interest Income				

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: 2/2 Rpt: 65/65 2 FILER NAME Filer ID (Ethics Commission Filers) Texans for Kelly Hancock SPAC 00067719 8 Amount (\$) Date 5 Name of person from whom amount is received 06/30/2023 Independent Bank \$448.77 6 Address of person from whom amount is received; City; State; Zip Code McKinney, TX 75070 Purpose for which amount is received Check if political contribution returned to filer Interest income Date Name of person from whom amount is received Amount (\$) 06/30/2023 Independent Bank \$19,315.07 Address of person from whom amount is received; City; State; Zip Code McKinney, TX 75070 Purpose for which amount is received Check if political contribution returned to filer Interest Income Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.3ac88bc0