

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM **JC/OH**
COVER SHEET PG 1

| | | | | | |
|---|--|---|--|--|--|
| The JC/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00042268 | 2 Total pages filed: 25 | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR The Honorable | FIRST Mary | MI | OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/07/2023 | |
| | NICKNAME Missy | LAST Medary | SUFFIX | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 2492 Corpus Christi, TX 78401 | | ZIP CODE | Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged | |
| | MS / MRS / MR Mrs. | | FIRST Katy Kiser | MI | |
| | NICKNAME | | LAST McNeal | SUFFIX | |
| | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2714 Wagonwheel Drive Dallas, TX 75006 | | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE (361) | PHONE NUMBER 658-5351 | EXTENSION | | |
| 8 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR) | | | | |
| 9 PERIOD COVERED | Month Day Year 01/01/2023 | | THROUGH | Month Day Year 06/30/2023 | |
| 10 ELECTION | ELECTION DATE Month Day Year 03/05/2024 | | ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | | |
| 11 OFFICE | OFFICE HELD (if any) District Judge District 347 Nueces | | 12 OFFICE SOUGHT (if known) | | |

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 25

13 C / OH NAME Medary, Mary (The Honorable) **14** Filer ID (Ethics Commission Filers)
00042268

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

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

| | | | |
|-------------------------------|--|----|------------|
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 34,895.20 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 5,625.14 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 103,622.32 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 0.00 |

17 AFFIDAVIT

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

The Honorable Mary Medary

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - JC/OH

| | |
|--|---|
| 18 FILER NAME Medary, Mary (The Honorable) | 19 Filer ID (Ethics Commission Filers) 00042268 |
|--|---|

| 20 SCHEDULE SUBTOTALS | | SUBTOTAL AMOUNT |
|------------------------------|---|-----------------|
| NAME OF SCHEDULE | | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) | \$ 34,895.20 |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) | \$ |
| 4. | <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) | \$ |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 5,625.14 |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 1/17 Rpt: 4/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 05/25/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adler, Chris and Matt <hr/> 6 Contributor address; City; State; Zip Code corpus christi, TX 78414 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Retired/ | | 9 Contributor's Job Title N/A |
| 10 Contributor's employer/law firm N/A | | 11 Law firm of contributor's spouse (if any) N/A |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/02/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almond, Steve and Suzanne <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Homemaker and Doctor | | Contributor's Job Title Doctor |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/02/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson Lehrman Barre and Maraist L.L.P. <hr/> Contributor address; City; State; Zip Code corpus christi, TX 78404 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 2/17 Rpt: 5/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 05/25/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonilla and Chapa | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code corpus christi, TX 78405 | |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/30/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Browne, Lindsay | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Eric | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78415 | |
| Contributor's Principal Occupation Car Dealship | | Contributor's Job Title Owner |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 3/17 Rpt: 6/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 06/02/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrigan and Anderson <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77027 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/02/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapa, Paul <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78414 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Linebarger | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Condit, Bradford <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | Amount of Contribution (\$) \$75.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 4/17 Rpt: 7/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 05/25/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coover and Coover | 7 Amount of Contribution (\$) \$200.00 |
| | 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) English, Monte | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gale Law Group | Amount of Contribution (\$) \$750.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78403 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 5/17 Rpt: 8/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 06/02/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Amador | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78405 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Self | | 11 Law firm of contributor's spouse (if any) N/A |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/02/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, John | Amount of Contribution (\$) \$300.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | |
| Contributor's Principal Occupation attorney | | Contributor's Job Title attorney |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/02/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Gloria | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78415 | |
| Contributor's Principal Occupation Business Owner | | Contributor's Job Title Business Owner |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 6/17 Rpt: 9/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 05/25/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoblit Darling Ralls Hernandez and Hudlow <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunsaker, Jerry and Kellee <hr/> Contributor address; City; State; Zip Code corpus christi, TX 78411 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation dentist | | Contributor's Job Title Dentist |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huseman Law Firm PLLC <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 7/17 Rpt: 10/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 06/02/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Joel <hr/> 6 Contributor address; City; State; Zip Code Odem, TX 78370 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Self | | 11 Law firm of contributor's spouse (if any) N/A |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/02/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemanski, Scott <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/02/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leon, Rob <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Leon Law | | Law firm of contributor's spouse (if any) Leon Law |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 8/17 Rpt: 11/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 06/02/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair and Sampson | 7 Amount of Contribution (\$) \$1,500.00 |
| | 6 Contributor address; City; State; Zip Code Austin, TX 78760 | |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/02/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald and Adkins | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78411 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccomb, Joe | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78415 | |
| Contributor's Principal Occupation Businessman | | Contributor's Job Title Owner |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 9/17 Rpt: 12/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 05/25/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Pruet | 7 Amount of Contribution (\$) \$200.00 |
| 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78414 | | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Self | | 11 Law firm of contributor's spouse (if any) N/A |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Roy | Amount of Contribution (\$) \$1,000.00 |
| Contributor address; City; State; Zip Code Corpus Christi, TX 78412 | | |
| Contributor's Principal Occupation Vet | | Contributor's Job Title Vet |
| Contributor's employer/law firm Southside Animal Clinic | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/02/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Motaghi, Moe | Amount of Contribution (\$) \$1,000.00 |
| Contributor address; City; State; Zip Code Corpus Christi, TX 78408 | | |
| Contributor's Principal Occupation Businessman | | Contributor's Job Title owner |
| Contributor's employer/law firm self | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 10/17 Rpt: 13/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 05/25/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Robert <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78469 | 7 Amount of Contribution (\$) \$2,500.00 |
| 8 Contributor's Principal Occupation Businessman | | 9 Contributor's Job Title Businessman |
| 10 Contributor's employer/law firm Self | | 11 Law firm of contributor's spouse (if any) N/A |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/30/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quevado, Alejandra <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78550 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation N/A | | Contributor's Job Title Businesswomen |
| Contributor's employer/law firm N/A | | Law firm of contributor's spouse (if any) Law office of Dan Sanchez |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rangel, Jorge <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 11/17 Rpt: 14/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 05/25/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reddy, Vishnu and Veena (Dr.) | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78414 | |
| 8 Contributor's Principal Occupation Doctor | | 9 Contributor's Job Title Doctor |
| 10 Contributor's employer/law firm Self | | 11 Law firm of contributor's spouse (if any) N/A |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/30/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, Lydia | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Harlingen, TX 78550 | |
| Contributor's Principal Occupation N/A | | Contributor's Job Title N/A |
| Contributor's employer/law firm N/A | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanjines, Irma | Amount of Contribution (\$) \$750.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78413 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 12/17 Rpt: 15/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 06/02/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schauer, Don <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78404 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation attorney | | 9 Contributor's Job Title Corpus Christi |
| 10 Contributor's employer/law firm Simank and Schauer | | 11 Law firm of contributor's spouse (if any) N/A |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/02/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Mike <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78469 | Amount of Contribution (\$) \$1,250.00 |
| Contributor's Principal Occupation Constructors | | Contributor's Job Title Owner |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/02/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simank, Ron <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411 | Amount of Contribution (\$) \$150.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Simank and Schaeur | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 13/17 Rpt: 16/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 05/25/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teel, Travis <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78411 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's Principal Occupation Realtor | | 9 Contributor's Job Title Realtor |
| 10 Contributor's employer/law firm Self | | 11 Law firm of contributor's spouse (if any) N/A |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thau, William <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78414 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/30/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Ray <hr/> Contributor address; City; State; Zip Code McAllen, TX 78504 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 14/17 Rpt: 17/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 06/28/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Adalita <hr/> 6 Contributor address; City; State; Zip Code Harlingen, TX 78552 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation Homemaker | | 9 Contributor's Job Title N/A |
| 10 Contributor's employer/law firm N/A | | 11 Law firm of contributor's spouse (if any) N/A |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/02/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walling, MK <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation Media | | Contributor's Job Title Owner |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/02/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Cason and Manning <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 15/17 Rpt: 18/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 06/02/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westergren, Mike <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78404 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Self | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/02/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wigington Rumley Dunn & Blair LLP <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Jason <hr/> Contributor address; City; State; Zip Code corpus christi, TX 78401 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 16/17 Rpt: 19/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 05/25/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zahn, Charlie <hr/> 6 Contributor address; City; State; Zip Code port aransas, TX 78373 | 7 Amount of Contribution (\$) \$200.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Self | | 11 Law firm of contributor's spouse (if any) N/A |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) braselton, Fred and Vanessa <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78413 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Businessman | | Contributor's Job Title Businessman |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 06/28/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) clancy, James (Mr.) <hr/> Contributor address; City; State; Zip Code Portland, TX 78374 | Amount of Contribution (\$) \$420.20 |
| Contributor's Principal Occupation Lawyer | | Contributor's Job Title Lawyer |
| Contributor's employer/law firm Branscomb PC | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |
| (Empty space for additional information) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 17/17 Rpt: 20/25 |
| 2 FILER NAME Medary, Mary (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 06/30/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) medina, Bianca <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78404 | 7 Amount of Contribution (\$) \$1,500.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Self | | 11 Law firm of contributor's spouse (if any) N/A |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 05/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) rodriguez, Mike and Debbie <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78404 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title attorney |
| Contributor's employer/law firm Rodriguez and Moretzsohn | | Law firm of contributor's spouse (if any) N/A |
| If contributor is a child, law firm of parent(s) (if any) | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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 explains how to complete this form.

| | | | | | |
|----------|---|---|--|---------------|---|
| 1 | Total pages Schedule F1: Sch: 1/5 Rpt: 21/25 | 2 | FILER NAME Medary, Mary (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00042268 |
| 4 | Date 01/24/2023 | 5 | Payee name American Solutions for Business | | |
| 6 | Amount (\$) \$585.12 | 7 | Payee address; City; State; Zip Code 4801 Baldwin Blvd Corpus Christi, TX 78408 | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign envelopes | | |
| 9 | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 06/09/2023 | | Payee name Aramark | | |
| | Amount (\$) \$268.00 | | Payee address; City; State; Zip Code 734 E Port Avenue Corpus Christi, TX 78401 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hooks event. | | |
| | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 02/11/2023 | | Payee name Barefoot Mardi Gras | | |
| | Amount (\$) \$65.00 | | Payee address; City; State; Zip Code 14493 padre island drive A356 Corpus Christi, TX 78418 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parade Entry | | |
| | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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 explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: Sch: 2/5 Rpt: 22/25 | 2 FILER NAME Medary, Mary (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 04/21/2023 | 5 Payee name CCBA | |
| 6 Amount (\$) \$100.00 | 7 Payee address; City; State; Zip Code 555 N. Carancahua street Suite 260 Corpus Christi, TX 78401 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailing labels |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/28/2023 | Payee name CCPOA | |
| Amount (\$) \$300.00 | Payee address; City; State; Zip Code 3122 Leopard Street Corpus Christi, TX 78408 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CCPOA Fishing Tournament |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/01/2023 | Payee name Joan Pucciarello | |
| Amount (\$) \$750.00 | Payee address; City; State; Zip Code Unknown Corpus Christi, TX 78418 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Catering for kickoff party. |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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 explains how to complete this form.

| | | | | | |
|----------|---|---|--|---------------|---|
| 1 | Total pages Schedule F1: Sch: 3/5 Rpt: 23/25 | 2 | FILER NAME Medary, Mary (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00042268 |
| 4 | Date 01/24/2023 | 5 | Payee name Medary, Missy | | |
| 6 | Amount (\$) \$1,039.00 | 7 | Payee address; City; State; Zip Code 901 Leopard Corpus Christi, TX 78401 | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Repayment for online Koozie order. | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Repayment for online Koozie order. | | |
| 9 | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 04/15/2023 | | Payee name Miras | | |
| | Amount (\$) \$108.20 | | Payee address; City; State; Zip Code 6006 Ayers Corpus Christi, TX 78415 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jackets and Shirts | | |
| | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 04/21/2023 | | Payee name NC SOA | | |
| | Amount (\$) \$200.00 | | Payee address; City; State; Zip Code 3122 Leopard Street Corpus Christi, TX 78408 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sheriff's Officer's event. | | |
| | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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 explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 4/5 Rpt: 24/25 | 2 FILER NAME Medary, Mary (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00042268 |
| 4 Date 06/01/2023 | 5 Payee name Pace, Travis | |
| 6 Amount (\$) \$200.00 | 7 Payee address; City; State; Zip Code N/A Corpus Christi, TX 78401 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/19/2023 | Payee name Padre Island Business Association | |
| Amount (\$) \$1,000.00 | Payee address; City; State; Zip Code 14493 Padre Island Drive Corpus Christi, TX 78418 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fishing tournament Sponsorship |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/07/2023 | Payee name Sam's Club | |
| Amount (\$) \$266.54 | Payee address; City; State; Zip Code 4833 SPID Corpus Christi, TX 78411 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mardi Gras Parade |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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 explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 5/5 Rpt: 25/25 | 2 FILER NAME Medary, Mary (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00042268 |
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| 4 Date 04/15/2023 | 5 Payee name Sam's Club |
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| 6 Amount (\$) \$281.28 | 7 Payee address; City; State; Zip Code 4833 SPID Corpus Christi, TX 78411 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CCPOA Event Sponsorship |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 01/23/2023 | Payee name USPS |
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|-------------------------|--|
| Amount (\$) \$210.00 | Payee address; City; State; Zip Code 1345 Crecent drive Corpus Christi, TX 78414 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense P.O. Box rental renewal |
|-------------------------------|---|---|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/03/2023 | Payee name USPS |
|--------------------|--------------------|

| | |
|-------------------------|--|
| Amount (\$) \$252.00 | Payee address; City; State; Zip Code 1345 Crecent drive Corpus Christi, TX 78414 |
|-------------------------|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps for the mailouts. |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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