FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00065318 38 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Scott K. NAME Date Received **ELECTRONICALLY FILED** 07/14/2023 NICKNAME LAST **SUFFIX** Field CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 405 Martin Luther King Jr. St. MAILING Receipt # Amount **ADDRESS** Change of Address Georgetown, TX 78626 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Scott K. NAME NICKNAME LAST **SUFFIX** Field **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 405 Martin Luther King Jr. St. **ADDRESS** (Residence or Business) Georgetown, TX 78626 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 943-3620 **PHONE** REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2023 06/30/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE

GO TO PAGE 2

District Judge District 480

District Judge District 480 Williamson

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 38

13 C / OH NAME	Field, Scott K. (The F	lonorable)	14 Filer ID 00065318	(Ethics Comm	ission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditions. These expenditures may have been made without distributed officeholders are required to report this information.	the candidate's or offic	eholder's knov	vledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME						
	GENERAL COMMITTEE ADDRESS							
	SPECIFIC	COMMITTEE ADDRESS						
		COMMITTEE CAMPAIGN TREACHRED NAME						
		COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS					
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00			
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	IC)	\$	38,569.63			
EXPENDITURE TOTALS	 	IZED POLITICAL EXPENDITURES		\$	0.00			
	4. TOTAL POLIT	ICAL EXPENDITURES		\$	4,124.49			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L	AST DAY OF THE	\$	45,285.92			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00			
17 AFFIDAVIT								
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.						
		The Ho	norable Scott K. Field	d				
		Signature o	f Candidate or Officeho	older				
AFFIX NO	TARY STAMP / SEAL AB	OVE						
Sworn to and subs	cribed before me, by the s	aid	, this the		_day			
of	, 20, to c	ertify which, witness my hand and seal of office.						
Signature of office	cer administering oath	Printed name of officer administering oath	Title of office	er administerin	n oath			
Signature of office	so, administering batti	, miled hame of officer duffillistering oddf	THE OF OTHER	aummister III	y Julii			

SUBTOTALS - JC/OH

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

					3 0f 38
	LER NAM	ME ut K. (The Honorable)	19 Filer ID 00065318	(Ethi	cs Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	34,100.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	4,469.63
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	;	\$	3,633.63
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	NS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	490.86
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS C	OF C/OH	\$	
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	NS	\$	
12		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS R TO FILER	ETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTI	SCHEDULE A(J)1		
	The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 1/17 Rpt: 4/38		
2	FILER NAME Field, Scott	K. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065318	
4	Date 06/30/2023	· ————————————————————————————————————		7 Amount of Contribution (\$) \$100.00	
8	Contributor's I	Principal Occupation	9 Contributor's Job Title	1	
	Attorney		Attorney		
10	Contributor's e	employer/law firm LLP	11 Law firm of contributor's sp	oouse (if any)	
12	If contributor i	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
	O6/13/2023 Almanza, Blackburn, Dickie & Mitchell, LLP Contributor address; City; State; Zip Code Austin, TX 78746			\$500.00	
	Contributor's I	I Principal Occupation	Contributor's Job Title	<u></u>	
		· ·			
	Contributor's	employer/law firm	Law firm of contributor's sp	nouse (if any)	
	If contributor i	s a child, law firm of parent(s) (if any)	.1		
	Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
	06/30/2023	Bennett, J. Bruce Contributor address; City; State; Zip Code Austin, TX 78731		\$250.00	
	Contributor's I	Principal Occupation	Contributor's Job Title		
	Attorney		Partner		
	Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)	
	Cardwell, Ha	art & Bennett			
	If contributor i	s a child, law firm of parent(s) (if any)			

	MONET	ARY POLITICAL CONT	SCHEDULE A(J)1			
	The Instru	ction Guide explains how to cor	mplete this form.	1 Total pages Schedule A(J)1: Sch: 2/17 Rpt: 5/38		
	FILER NAME	<. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065318		
4				7 Amount of Contribution (\$) \$50.00		
		Austin, TX 78731				
8	Contributor's	Principal Occupation	9 Contributor's Job Title			
	Attorney		Associate			
	Contributor's Butler Snow	employer/law firm LLP	11 Law firm of contributor's s	spouse (if any)		
		s a child, law firm of parent(s) (if any)	I			
	Date	Full name of contributor out-o	of-state PAC (ID#:)	Amount of Contribution (\$)		
	06/30/2023	Bowen, Marshall		\$250.00		
		Contributor address; City; State; Zip of Austin, TX 78731	Code			
	Contributor's	I Principal Occupation	Contributor's Job Title			
	Attorney	molpai Geografion	Associate			
		employer/law firm	Law firm of contributor's s	enouse (if any)		
	Butler Snow		Law IIIII of Contributor 3 s	spouse (ii aiiy)		
		s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-o	of-state PAC (ID#:)	Amount of Contribution (\$)		
	06/27/2023	Burgess, Karen		\$500.00		
		Contributor address; City; State; Zip (Code			
		Austin, TX 78701	<u></u>			
	Contributor's Attorney	Principal Occupation	Contributor's Job Title Shareholder			
	Contributor's	employer/law firm	Law firm of contributor's	spouse (if any)		
	Burgess Lav	v PC	Burgess Law Firm			
	If contributor i	s a child, law firm of parent(s) (if any)				

MONE	TARY POLITICAL CONT	SCHEDULE A(J)1		
The Instru	action Guide explains how to con	nplete this form.	1 Total pages Schedule A(J)1: Sch: 3/17 Rpt: 6/38	
2 FILER NAME	K. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065318	
4 Date			7 Amount of Contribution (\$) \$200.00	
	Austin, TX 78704			
8 Contributor's	Principal Occupation	9 Contributor's Job Title		
Attorney		Partner		
	employer/law firm	11 Law firm of contributor's s	pouse (if any)	
	ugherty, Hearon & Moody			
12 II contributor	is a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of	f-state PAC (ID#:)	Amount of Contribution (\$)	
06/12/2023	Clough, Christopher	. state 1710 (1511.	\$1,000.00	
		Contributor address; City; State; Zip Code		
	Austin, TX 78701			
Contributor's	Principal Occupation	Contributor's Job Title		
Attorney	Finicipal Occupation	Partner		
	employer/law firm	Law firm of contributor's s	spouse (if any)	
	er, Clough & Oddo		(· ···/)	
	is a child, law firm of parent(s) (if any)	I		
Date	Full name of contributor out-of	f-state PAC (ID#:)	Amount of Contribution (\$)	
06/29/2023	Cowan, Christopher		\$250.00	
	Contributor address; City; State; Zip C	Code		
	Austin, TX 78732			
Contributor's	Principal Occupation	Contributor's Job Title	-	
Attorney		Partner		
	employer/law firm	Law firm of contributor's s	pouse (if any)	
Butler Snov	LLP			
If contributor	is a child, law firm of parent(s) (if any)			

	MONET	ARY POLITICAL CO	SCHEDULE A(J)1			
	The Instru	ction Guide explains how t	o complete this f	orm.	1 Total pages Schedule A Sch: 4/17 Rpt: 7/38	(J)1:
2	FILER NAME Field, Scott I	K. (The Honorable)			3 Filer ID (Ethics Comm 00065318	ission Filers)
4	Date 06/14/2023	5 Full name of contributor Davis, Holly6 Contributor address; City; StatAustin, TX 78731	out-of-state PAC (ID#:_ e; Zip Code)	7 Amount of Contribution	(\$) \$2,500.00
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	1	
	Attorney			Partner		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	pouse (if any)	
	Kirker Davis	LLP		Kirker Davis LLP		
12	If contributor is	s a child, law firm of parent(s) (if any	/)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution	(\$)
	05/26/2023 Dickens, Dana Contributor address; City; State; Zip Code San Angelo, TX 76904				\$1,500.00	
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if any	/)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution	(\$)
	05/26/2023	Dickens, Jay Contributor address; City; Stat San Angelo, TX 76904	e; Zip Code			\$1,500.00
	Contributor's I	I Principal Occupation		Contributor's Job Title	I .	
	Land Develo	pper		Developer		
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	Self-employe	ed				
	If contributor is	s a child, law firm of parent(s) (if any	/)			

	MONET	ARY POLITICAL CONTE	SCHEDULE A(J)1	
	The Instru	ction Guide explains how to com	plete this form.	1 Total pages Schedule A(J)1: Sch: 5/17 Rpt: 8/38
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Field, Scott	K. (The Honorable)		00065318
4	Date 06/27/2023	 Full name of contributor out-of-s Dietz, Mark Contributor address; City; State; Zip Co 	state PAC (ID#:) ode	7 Amount of Contribution (\$) \$250.00
		Georgetown, TX 78628		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Attorney		Shareholder	
10	Contributor's	employer/law firm	11 Law firm of contributor's	spouse (if any)
	Dietz & Jarra	ard, PC		
12	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-s	state PAC (ID#:)	Amount of Contribution (\$)
	06/26/2023	Edwards, Jeff		\$250.00
		Contributor address; City; State; Zip Co	ode	·····
		Austin, TX 78701		
	Contributor's	Principal Occupation	Contributor's Job Title	•
	Attorney		Attorney	
	Contributor's	employer/law firm	Law firm of contributor's	spouse (if any)
	Edwards La	N		
	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-s	state PAC (ID#:)	Amount of Contribution (\$)
	06/27/2023	Evans, Cedric		\$250.00
		Contributor address; City; State; Zip Co	ode	
		Austin, TX 78704		
		Principal Occupation	Contributor's Job Title	
	Attorney		Partner	
		employer/law firm	Law firm of contributor's	spouse (if any)
	Butler Snow	LLP		
	If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL CONTR	RIBUTIC	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains how to comp	lete this f	orm.		ages Schedule A(J)2 5/17 Rpt: 9/38	1:
2	FILER NAME Field, Scott I	K. (The Honorable)			3 Filer ID 00065	Ethics Commissi	ion Filers)
4	Date 06/21/2023	 5 Full name of contributor out-of-star Gattis, Dan 6 Contributor address; City; State; Zip Cod Georgetown, TX 78626 	ate PAC (ID#:_)	7 Amoun	t of Contribution (\$)	\$1,000.00
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	<u> </u>		
	Attorney			Shareholder			
10	Contributor's 6 Gattis Law F	employer/law firm Firm PC		11 Law firm of contributor's sp	ouse (if any	/)	
12	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-sta	ate PAC (ID#:_		Amoun	t of Contribution (\$)	
	06/06/2023	Gray Becker PC Contributor address; City; State; Zip Cod Austin, TX 78701	de				\$500.00
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any	/)	
	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-sta	ate PAC (ID#:_)	Amoun	t of Contribution (\$)	
	05/17/2023	Jackson Walker LLP PAC Contributor address; City; State; Zip Cod Dallas, TX 75201-2725	de				\$1,000.00
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ouse (if any	/)	
	If contributor is	s a child, law firm of parent(s) (if any)					

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete th	is f	orm.	1	Total pages Schedule A(J)1: Sch: 7/17 Rpt: 10/38
2	FILER NAME Field, Scott I	K. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00065318
4	Date 06/26/2023			7	Amount of Contribution (\$) \$500.00	
8	Contributor's F	Principal Occupation		9 Contributor's Job Title	_	
	Attorney			Partner		
10		employer/law firm n, Blanke & Knight, LLP		11 Law firm of contributor's sp	ous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PAC ((ID#:_			Amount of Contribution (\$)
	06/06/2023	Krist, Austin Contributor address; City; State; Zip Code Austin, TX 78746				\$2,500.00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Member		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Cleveland K	rist PLLC				
	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PAC ((ID#:_)		Amount of Contribution (\$)
	06/06/2023	Law Office of J. Randall Grimes				\$500.00
		Contributor address; City; State; Zip Code Georgetown, TX 78626				
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's e	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1	Total pages Schedule A(J)1: Sch: 8/17 Rpt: 11/38
2	FILER NAME Field, Scott I	K. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00065318
4	Date 06/06/2023	5 Full name of contributor Law Office of Joshua M6 Contributor address; City;			7	Amount of Contribution (\$) \$250.00
		Cedar Park, TX 78613				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date 06/26/2023	Full name of contributor Liu, Cory Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$50.00
		Austin, TX 78702				
		Principal Occupation		Contributor's Job Title		
_		employer/law firm		Attorney Law firm of contributor's sp	oous	se (if any)
	Butler Snow If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	06/06/2023	Maples, Keith Contributor address; City; Austin, TX 78746	State; Zip Code			\$1,000.00
Н	Contributor's F	I Principal Occupation		Contributor's Job Title		
	Attorney			Partner		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
		oles, St. Leger, Bryant, LLP s a child, law firm of parent(s) (i	f any)	Maples Jones PLLC		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 9/17 Rpt: 12/38
2	FILER NAME Field, Scott I	K. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00065318
4	Date 06/27/2023			7	Amount of Contribution (\$) \$500.00	
		Austin, TX 78703		,		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)			
	Date 05/29/2023	Full name of contributor Mennucci, William Contributor address; City;	out-of-state PAC (ID#:_			Amount of Contribution (\$) \$250.00
		Austin, TX 78751				
		Principal Occupation		Contributor's Job Title		
	Attorney	employer/law firm		Partner Law firm of contributor's sp		o (if any)
	Thompson C	• •		Law IIIII of Continuator's Sp	Jous	e (ii ariy)
		s a child, law firm of parent(s) (if	any)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/06/2023	Minton, Bassett, Flores & Contributor address; City; S				\$1,500.00
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	1		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this f	form.		l pages Schedule A(J) : 10/17 Rpt: 13/38	1:
2	FILER NAME	K. (The Honorable)				ID (Ethics Commiss 65318	ion Filers)
4	Date 06/30/2023	5 Full name of contributor Nichols, Eric 6 Contributor address; City;	out-of-state PAC (ID#:_)		ount of Contribution (\$)	\$250.00
		Austin, TX 78701					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title Partner	•		
10	Contributor's 6	employer/law firm		11 Law firm of contributor's s	oouse (if a	any)	
12		s a child, law firm of parent(s) (i	f any)				
	Date 05/23/2023	Full name of contributor Pena, Ramon	out-of-state PAC (ID#:_)	Amo	ount of Contribution (\$)	\$1,000.00
		Contributor address; City; Round Rock, TX 78664	State; Zip Code				
_	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>		
	Office Mana			Office Manager			
	Contributor's o	employer/law firm v PLLC		Law firm of contributor's s	oouse (if a	any)	
	If contributor is	s a child, law firm of parent(s) (i	f any)				
	Date 06/06/2023	Full name of contributor Pennington, Tyler Contributor address; City;	out-of-state PAC (ID#:_		Amc	ount of Contribution (\$)	\$1,000.00
		Round Rock, TX 78664		I			
	Attorney	Principal Occupation		Contributor's Job Title Member			
	Contributor's e	employer/law firm Law PLLC		Law firm of contributor's s	oouse (if a	any)	
	If contributor is	s a child, law firm of parent(s) (i	f any)				

	MONET	ARY POLITICAL	SCHEDULE A(J)1			
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 11/17 Rpt: 14/38
2	FILER NAME Field, Scott I	R NAME I, Scott K. (The Honorable)				Filer ID (Ethics Commission Filers) 00065318
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Rick Freeman, PC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$1,000.00		
		Austin, TX 78746				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
06/01/2023 Ruggero, Peter Contributor address; City; State; Zip Code				\$250.00		
		Austin, TX 78701		T - 0		
		Principal Occupation		Contributor's Job Title		
	Attorney			Shareholder		
	Ruggero Lav	employer/law firm		Law firm of contributor's sp	oous	e (If any)
			6 A			
	if contributor is	s a child, law firm of parent(s) (i	r any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/17/2023	Schroeder, Joshua	_			\$1,000.00
		Contributor address; City; Georgetown, TX 78633	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney Shareholder					
	Contributor's employer/law firm Law firm of contributor's s			Law firm of contributor's sp	oous	e (if any)
	Sneed, Vine	& Perry, PC				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	SCHEDULE A(J)1					
	The Instru	ction Guide explains h	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 12/17 Rpt: 15/38			
2	FILER NAME				3 Filer ID (Ethics Commission Filers)			
	Field, Scott	K. (The Honorable)			00065318			
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)			
	05/17/2023	Scott Douglass & McCo	onnico LLP		\$1,000.00			
		6 Contributor address; City	; State; Zip Code					
		Austin, TX 78701						
8	Contributor's	Principal Occupation		9 Contributor's Job Title				
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)			
12	2 If contributor i	s a child, law firm of parent(s)	(if any)					
H	Date	Full name of contributor	D out of state DAC (ID#)		Amount of Contribution (\$)			
	05/18/2023	Snell, Jason	out-of-state PAC (ID#:)	\$500.00			
	00/10/2020	Contributor address; City	· State: 7in Code					
		Commodel address, only	, ciato, 2.p code					
		Austin, TX 78701						
		Principal Occupation		Contributor's Job Title				
	Attorney			Partner				
		employer/law firm		Law firm of contributor's s	pouse (if any)			
	Snell Law	171.1 6 6 1/2	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	If contributor i	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)			
	06/28/2023	Soltero, Carlos			\$500.00			
		Contributor address; City	State; Zip Code		<u></u>			
		Austin, TX 78746						
	Contributor's	Principal Occupation		Contributor's Job Title	•			
Attorney		Attorney						
		employer/law firm		Law firm of contributor's s	pouse (if any)			
	Maynard Ne							
	If contributor i	s a child, law firm of parent(s)	(if any)					

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	ı	Total pages Schedule A(J)1: Sch: 13/17 Rpt: 16/38
2	FILER NAME Field, Scott I	ME ott K. (The Honorable)			ı	Filer ID (Ethics Commission Filers) 00065318
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Stanley, Christopher 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$500.00		
		Georgetown, TX 78626				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Shareholder		
10		employer/law firm · & Perry, PC		11 Law firm of contributor's sp	ous	e (if any)
12		s a child, law firm of parent(s) (if	any)			
Date Full name of contributor out-of-state PAC (ID#:) Taylor, Amanda Contributor address; City; State; Zip Code			•	Amount of Contribution (\$) \$750.00		
	Contributor's I	Austin, TX 78749 Principal Occupation		Contributor's Job Title		
	Attorney	Timopai Goodpailon		Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	e (if any)
	Butler Snow	LLP				
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
06/29/2023 Taylor, Sam Contributor address; City; State; Zip Code				\$100.00		
		Austin, TX 78745		T		
	Contributor's I	Principal Occupation		Contributor's Job Title Senior Director		
	Contributor's employer/law firm Law firm of contributor's s		OUS	e (if any)		
	PLUS Communications			,ouo.	s (ii airy)	
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL C	SCHEDULE A(J)1		
	The Instru	ction Guide explains how	to complete this fo	orm.	1 Total pages Schedule A(J)1: Sch: 14/17 Rpt: 17/38
2	FILER NAME Field, Scott I	<. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00065318
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Terrazas, Kevin 6 Contributor address; City; State; Zip Code Austin, TX 78746		7 Amount of Contribution (\$) \$2,500.00		
8	Contributor's I	rincipal Occupation		9 Contributor's Job Title	l .
	Attorney			Member	
10	Contributor's of Terrazas PL	employer/law firm LC		11 Law firm of contributor's sp	pouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if ar	у)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
O6/30/2023 Thoman, Esme Contributor address; City; State; Zip Code Austin, TX 78746			\$100.00		
	Contributor's F	rincipal Occupation		Contributor's Job Title	l .
	Consultant			Consultant	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	Butler Snow	LLP			
	If contributor is	s a child, law firm of parent(s) (if ar	ly)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	05/25/2023	Thompson, Coe, Cousins & Contributor address; City; Sta			\$500.00
	Contributor's I	Principal Occupation		Contributor's Job Title	1
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if ar	ny)		

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A(J)1			
	The Instru	ction Guide explains how to	complete this fo	orm.	1	ges Schedule A(J)1: 5/17 Rpt: 18/38			
2	FILER NAME Field, Scott I	K. (The Honorable)			3 Filer ID 000653	(Ethics Commissio	n Filers)		
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Tomlinson, Maitreya 6 Contributor address; City; State; Zip Code Austin, TX 78704		7 Amount	of Contribution (\$)	\$200.00				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title					
	Attorney			Member					
10	Contributor's of Tomlinson F	employer/law firm irm, PLLC		11 Law firm of contributor's sp	ouse (if any)				
12	If contributor is	s a child, law firm of parent(s) (if any)							
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount	of Contribution (\$)			
06/27/2023 Vaughan, Ben Contributor address; City; State; Zip Code					\$250.00				
Austin, TX 78703 Contributor's Principal Occupation Contributor's Job Title		<u> </u>							
	Attorney			Partner					
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any)				
	Graves, Dou	igherty, Hearon & Moody							
	If contributor is	s a child, law firm of parent(s) (if any)							
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount	of Contribution (\$)			
	06/08/2023	Verdict Law PLLC Contributor address; City; State Austin, TX 78746	; Zip Code				\$500.00		
	Contributor's I	Principal Occupation		Contributor's Job Title					
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)				
	If contributor is	s a child, law firm of parent(s) (if any)							

	MONET	ARY POLITICAL CON	SCHEDULE A(J)1			
	The Instru	ction Guide explains how to c	complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 16/17 Rpt: 19/38	
2	FILER NAME Field, Scott I	K. (The Honorable)			3 Filer ID (Ethics Commission F 00065318	Filers)
4	Date 06/29/2023 Full name of contributor out-of-state PAC (ID#:) Victoria , Giese 6 Contributor address; City; State; Zip Code Austin, TX 78722-2249		7 Amount of Contribution (\$)	\$300.00		
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Attorney			Associate		
10	Contributor's of Butler Snow	employer/law firm LLP		11 Law firm of contributor's sp	pouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor 0	ut-of-state PAC (ID#:_)	Amount of Contribution (\$)	
06/26/2023 Wenholz, David Contributor address; City; State; Zip Code Austin, TX 78733			\$3	1,000.00		
	Contributor's F	I Principal Occupation		Contributor's Job Title		
	Attorney			Shareholder		
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	Wenholz Do	w, PC				
	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor 0	ut-of-state PAC (ID#:_)	Amount of Contribution (\$)	
	06/06/2023	West Short & Howell, PLLC	_			1,000.00
		Contributor address; City; State; Z Georgetown, TX 78626	ip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	1	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)				

	MONET	SCHEDULE /	A(J)1			
	The Instruc	ages Schedule A(J)1 7/17 Rpt: 20/38				
2	FILER NAME	((The Herenelle)		1	(Ethics Commission	n Filers)
_		(. (The Honorable)		00065		
4		5 Full name of contributor out-of-state PAC (ID#:_)	7 Amoun	t of Contribution (\$)	#1 000 00
	06/28/2023	Wymore, Kent				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Driftwood, TX 78619				
8		Principal Occupation	9 Contributor's Job Title			
	Attorney		Member			
10		mployer/law firm	11 Law firm of contributor's sp	ouse (if any	<u> </u>	
	Wymore Law	r Firm, PLLC s a child, law firm of parent(s) (if any)				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

	The Instru	action Guide explains how to complete this f	orm.	1 Total pages Sc Sch: 1/1 Rpt:		
2	FILER NAME Field, Scott	K. (The Honorable)		3 Filer ID (Ethic 00065318	es Commission Filers)	
4	TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
5	Date			8 Amount of	9 In-kind contribution	
3	06/27/2023	l –		contribution (\$)	description Catering and parking for fundraiser	
		Austin, TX 78701		Check if travel (I I Dutside of Texas. Complete Schedule T.	
10	Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See i	nstructions)	
12	Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL)	(See instructions)	
	Attorney		Partner			
14	Contributor's Butler Snow	employer/law firm (FOR JUDICIAL) / LLP	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)	
16	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date Full name of contributor out-of-state PAC (ID#:			Amount of In-kind contribution contribution (\$) description \$2,096.65 Food, drink, and room charge for fundraiser		description Food, drink, and room	
		Round Rock, TX 78664		Check if travel of	I I Dutside of Texas. Complete Schedule T.	
	Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See i	nstructions)	
	Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)	
	Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)	
	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date Full name of contributor out-of-state PAC (ID#: 06/27/2023 Sneed, Vine & Perry PC Contributor address; City; State; Zip Code			Amount of contribution (\$) \$1,186.49	In-kind contribution Catering and parking for fundraiser		
		Georgetown, TX 78626		Check if travel of	I I outside of Texas. Complete Schedule T.	
	Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions)					
	Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions)					
	Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)	
	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
ı						

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

Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services The Instruction (-	s/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILEF	RNAME				3	Filer ID	(Ethics Commission F	-ilers)
	Sch: 1/13 Rpt: 22/38		Scott K. (The Honor	able)				00065318		
4	Date	5 Payee	e name							
	05/01/2023	2020	Market							
6	Amount (\$)	7 Payee	e address; City;	State; Zip	Code					
	\$44.19	1500	Rivery Road							
		Suite	1100							
		Geor	getown, TX 78628							
8	PURPOSE	(a) Categ	Ory (See Categories listed at	t the top of this schedule)	(b)	Description				
	OF EXPENDITURE	Food	/Beverage Expense					ide of Texas. Com		
						Lunch meetir		, officeholder living	expense	
						Lanen meeti	ıg			
9	Complete ONLY if direct	Candid	ate/Officeholder name	Office s	ught			Office he	eld	
	expenditure to benefit C/OF	1								
	Date	Payee	e name							
	05/19/2023	Angie	e's							
	Amount (\$)	Payee	address; City;	State; Zip	Code					
	\$49.81	1307	E. 7th Street							
		Austi	n, TX 78702							
	PURPOSE	(a) Categ	Ory (See Categories listed at	t the top of this schedule)	(b)	Description				
	OF EXPENDITURE	Food	/Beverage Expense			<u></u>		ide of Texas. Com		
						Lunch meetir		, officeholder living		
						Lunch meetil	ıg v	With Consult	uit	
	Complete ONLY if direct expenditure to benefit C/OH		ate/Officeholder name	Office s	ought			Office he	eld	
	·									
	Date	1	e name							
	01/28/2023	Austi	n Convention Center							
	Amount (\$)	Payee	e address; City;	State; Zip	Code					
	\$10.00	500 E	E. Cesar Chavez							
		Austi	n, TX 78701		_					
	PURPOSE OF	(a) Categ	Ory (See Categories listed at	t the top of this schedule)	(b)	Description	_			
	EXPENDITURE	Even	t Expense					ide of Texas. Com	•	
						Parking for ev		, officeholder living nt	expense	
						r arking for E	v C1			
\vdash	Complete ONLY if direct	Candid	ate/Officeholder name	Office s	ouaht			Office he	eld .	
	expenditure to benefit C/OH									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
rtising 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
Leal 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:	<u>.</u>
1	Sch: 2/13 Rpt: 23/38	Field, Scott K. (The Honorable) 6 Field Scott K. (The Honorable)
4	Date	5 Payee name
	05/30/2023	Blue Corn Harvest
6	Amount (\$) \$68.26	7 Payee address; City; State; Zip Code 212 West 7th Street Georgetown, TX 78626
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
		Lunch meeting with law student and judges
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/04/2023	Bruchmiller, Sarah
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	405 Martin Luther King
		Georgetown, TX 78626
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Payment for partial table at fundraising event
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/10/2023	Capitol Area Boy Scouts
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	12500 N. IH 35
		Austin, TX 78753
	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 Contribution Check if Austin, TX, officeholder living expense Contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
1		

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	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 3/13 Rpt: 24/38	Field, Scott K. (The Honorable) 00065318					
4	Date	5 Payee name					
	01/03/2023	Federalist Society					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$25.00	1776 I Street NW					
		Suite 300					
		Washington DC, TX 20006					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)					
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		Yearly dues					
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	02/04/2023	Field, Scott					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$181.70	110 Skyview Cove					
		Liberty Hill, TX 78642					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		Reimbursement for personal expenses from 7/1/22-					
		12/31/22					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O	1					
	Date	Payee name					
	04/28/2023	Go Daddy.com					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$273.28	14455 North Hayden Rd.					
		Suite 219					
		Scottsdale, AZ 85260					
	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					
		Domain registration fee					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/Ol	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 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: Sch: 4/13 Rpt: 25/38	2 FILER NAME Field, Scott K. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00065318
4	Date 05/01/2023	5 Payee name HEB
6	Amount (\$) \$59.57	7 Payee address; City; State; Zip Code 19348 Ronald Reagan Blvd.
8	PURPOSE OF EXPENDITURE	Georgetown, TX 78728 (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 office
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 04/15/2023	Payee name HEB
	Amount (\$) \$48.46	Payee address; City; State; Zip Code 19348 Ronald Reagan Blvd.
	PURPOSE OF EXPENDITURE	Georgetown, TX 78728 (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 Office supplies
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 03/10/2023	Payee name HEB
	Amount (\$) \$40.53	Payee address; City; State; Zip Code 19348 Ronald Reagan Blvd.
		Georgetown, TX 78728
	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 Office supplies
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

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: 5/13 Rpt: 26/38	2 FILER NAME Field, Scott K. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065318
4	Date 02/03/2023	5 Payee name HEB	
6	Amount (\$) \$53.57	7 Payee address; City; State; Zip Code 19348 Ronald Reagan Blvd.	
8	PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office supplies
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 01/23/2023	Payee name Harland Clarke	
	Amount (\$) \$20.00	Payee address; City; State; Zip Code 15955 La Cantera Parkway San Antonio, TX 78256	
	PURPOSE OF EXPENDITURE	Accounting/Banking	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Checks
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 05/19/2023	Payee name Horseshoe Bay Resort	
	Amount (\$) \$2.98	Payee address; City; State; Zip Code 200 Hi Cir N	
		Horseshoe Bay, TX 78657	
	PURPOSE OF EXPENDITURE	Food/Beverage Expense	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense cond at Bench/Bar conference
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

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: 6/13 Rpt: 27/38	Field, Scott K. (The Honorable) 00065318			
4	Date	5 Payee name			
	05/03/2023	Kerbey Lane Cafe			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$57.57	2606 Guadalupe			
		Austin, TX 78705			
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 Mentorship breakfast			
		Methorship breaklast			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
-	Date	Dougo nama			
		Payee name Kerbay Lana Cafa			
	03/24/2023	Kerbey Lane Cafe			
	Amount (\$)	Payee address; City; State; Zip Code			
\$53.94 2606 Guadalupe					
		Austin, TX 78705			
	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 Law school mentor breakfast			
		Law School Mentol breaklast			
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
_	Data	Davies same			
	Date 02/16/2023	Payee name Kerbey Lang Cofe			
		Kerbey Lane Cafe			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$36.60	2606 Guadalupe			
		Austin, TX 78705			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense Law school mentor breakfast			
		Law School Helitol Dieanast			
_	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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/13 Rpt: 28/38	Field, Scott K. (The Honorable) 00065318
4	Date	5 Payee name
	01/19/2023	Kerbey Lane Cafe
6	Amount (\$) \$40.04	7 Payee address; City; State; Zip Code 2606 Guadalupe
		Austin, TX 78705
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mentor breakfast
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/23/2023	La Cocina de Consuelo
	Amount (\$) \$79.88	Payee address; City; State; Zip Code 4516 Burnet Road
		Austin, TX 78756
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supporter breakfast meeting
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 06/30/2023	Payee name Marisol's
	Amount (\$) \$68.87	Payee address; City; State; Zip Code 603 W. University Avenue
		Georgetown, TX 78626
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff lunch
	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 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	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: 8/13 Rpt: 29/38	Field, Scott K. (The Honorable) 00065318
4	Date	5 Payee name
	05/11/2023	Marisol's
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$16.43	603 W. University Avenue
		Georgetown, TX 78626
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Lunch meeting with judges
		Landi modalig war jaagoo
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Payeo namo
	06/26/2023	Payee name NationBuilder
	Amount (\$)	Payee address; City; State; Zip Code
	\$41.00	PO Box 811428
		Los Angeles, CA 90081
	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 Monthly fee for website and credit card processing
		Monthly lee for website and credit card processing
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Data	
	Date	Payee name
	05/26/2023	NationBuilder
	Amount (\$)	Payee address; City; State; Zip Code
	\$41.00	PO Box 811428
		Los Angeles, CA 90081
	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 Monthly fee for website and credit card processing
		Monthly lee for website and credit cald processing
_	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
Transport in District Travel in District Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 9/13 Rpt: 30/38	Field, Scott K. (The Honorable)	00065318
4	Date	5 Payee name	•
	04/26/2023	NationBuilder	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$41.00	PO Box 811428	
L		Los Angeles, CA 90081	
8	PURPOSE OF	, -	Description
	EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Monthly fee for website and credit card processing
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	experiditure to beriefit C/O	1	
	Date	Payee name	
L	03/25/2023	NationBuilder	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$41.00	PO Box 811428	
L		Los Angeles, CA 90081	
	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees	Check if Austin, TX, officeholder living expense
			Monthly fee for website and credit card processing
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	- Componential of the second control of the		
	Date	Payee name	
L	02/25/2023	NationBuilder	
	Amount (\$) \$41.00	Payee address; City; State; Zip Code PO Box 811428	
	Ψ41.00	FO BOX 011420	
		Los Angeles, CA 90081	
┝	PURPOSE	_	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Fees	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Monthly fee for website and credit card processing
\vdash	Complete ONLY if direct	Candidata/Officabalder name	Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

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

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

Sch: 10/13 Rpt: 31/38 Field, Scott K. (The Honorable) 00065318 4 Date 01/25/2023 5 Payee name NationBuilder 5 Amount (\$) 7 Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081 6 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees	4 Date 01/25/2023 5 Payee name NationBuilder 6 Amount (\$) 7 Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Check if Monthly 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name NationBuilder Amount (\$) Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081 PURPOSE OF Solicitation/Fundraising Expense (a) Category (See Categories listed at the top of this schedule) (b) Description Categories (Code Po Box 811428) Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Credit categories (Code Po Box 811428) Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Credit categories (Code Po Box 90081)	on travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense fee for website and credit card processing
Date Date S Payee name NationBuilder	4 Date 01/25/2023 5 Payee name NationBuilder 6 Amount (\$) 7 Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Check if Monthly 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name NationBuilder Amount (\$) Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081 PURPOSE OF Solicitation/Fundraising Expense (a) Category (See Categories listed at the top of this schedule) (b) Descriptic Check if Credit categories listed at the top of this schedule) Check if Credit categories listed at the top of this schedule) Check if Credit categories listed at the top of this schedule) Check if Credit categories listed at the top of this schedule) Check if Credit categories listed at the top of this schedule) Check if Credit categories listed at the top of this schedule) Check if Credit categories listed at the top of this schedule) Check if Credit categories listed at the top of this schedule) Check if Credit categories listed at the top of this schedule) Check if Credit categories listed at the top of this schedule) Check if Credit categories listed at the top of this schedule) Payee name	on travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense fee for website and credit card processing
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NationBuilder Payee address: City; State: Zip Code	NationBuilder State; Zip Code	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense fee for website and credit card processing
S41.00 PO Box 811428 Los Angeles, CA 90081 3 PURPOSE OF EXPENDITURE 4 (a) Category (See Categories listed at the top of this schedule) Complete ONLY if direct expenditure to benefit C/OH Payee name 06/30/2023 Amount (\$) Payee address; City; State; Zip Code EXPENDITURE 4 (a) Category (See Categories listed at the top of this schedule) Date OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Complete ONLY if direct expenditure to benefit C/OH Payee address; City; State; Zip Code Candidate/Officeholder name Office sought Office held	S41.00 PO Box 811428 Los Angeles, CA 90081 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Check if Check if Monthly 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name NationBuilder Amount (\$) Payee address; City; State; Zip Code \$1,065.55 PO Box 811428 Los Angeles, CA 90081 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Check if Credit category Check if Credit category Credit category Candidate/Officeholder name Office sought Candidate/Officeholder name Office sought Candidate/Officeholder name Office sought Candidate/Officeholder name Candidate/Officeholder name Office sought Candidate/Officeholder name Candidate/Officeholder name Office sought Candidate/Officeholder name Candidate/Officeholder name Candidate/Officeholder name Office sought Candidate/Officeholder name Candidate	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense fee for website and credit card processing
Los Angeles, CA 90081 Complete ONLY if direct expenditure to benefit C/OH	Los Angeles, CA 90081	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense fee for website and credit card processing
PURPOSE EXPENDITURE	Category See Categories listed at the top of this schedule Category	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense fee for website and credit card processing
PURPOSE EXPENDITURE	Category See Categories listed at the top of this schedule Category	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense fee for website and credit card processing
PURPOSE EXPENDITURE	Category See Categories listed at the top of this schedule Category	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense fee for website and credit card processing
Check if travel outside of Texas. Complete Schedule T. Check if Justin. TX. officientiate Wing expenses Check if Justin. TX. officientiate Wing expenses Monthly fee for website and credit card processing	Fees Check if Monthly State	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense fee for website and credit card processing
Candidate/Officeholder name Office sought Office held	9 Complete ONLY if direct expenditure to benefit C/OH Date O6/30/2023 Payee name NationBuilder Amount (\$) Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Payee name	fee for website and credit card processing
Date ORILY if direct expenditure to benefit C/OH Payee name NationBuilder Amount (\$) Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081 PURPOSE (a) Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense Credit card fees on contributions Complete QNLY if direct expenditure to benefit C/OH Date Payee name Office sought Office held Payee name Office held Payee name Office sought Office held Payee name Office held Complete QNLY if direct Card fees on Contributions Office held	9 Complete ONLY if direct expenditure to benefit C/OH Date O6/30/2023 Payee name NationBuilder Amount (\$) Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Check if Credit categories and complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Payee name	
Date 06/30/2023 Payee name NationBuilder Amount (\$) Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense Credit card fees on contributions Candidate/Officeholder name Office sought Office held Date 02/27/2023 Pok-E-Jo's Amount (\$) Payee address; City; State; Zip Code 610 N. Austin Avenue Georgetown, TX 78626 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Credit card fees on contributions Office held Office held Office held Date 02/27/2023 Pok-E-Jo's Amount (\$) Payee address; City; State; Zip Code 610 N. Austin Avenue Georgetown, TX 78626 PURPOSE OF EXPENDITURE (b) Description Check if fused outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CLS luncheon Complete QNLY if direct Candidate/Officeholder name Office sought Office held	Date 06/30/2023 Amount (\$) Payee address; City; State; Zip Code \$1,065.55 PO Box 811428 Los Angeles, CA 90081 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Payee name	Office held
Date 06/30/2023 Payee name NationBuilder Amount (\$) Payee address; City; State; Zip Code PO Box 811428 Los Angeles, CA 90081 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense Credit card fees on contributions Candidate/Officeholder name Office sought Office held Date 02/27/2023 Pok-E-Jo's Amount (\$) Payee address; City; State; Zip Code 610 N. Austin Avenue Georgetown, TX 78626 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Credit card fees on contributions Office held Office held Office held Date 02/27/2023 Pok-E-Jo's Amount (\$) Payee address; City; State; Zip Code 610 N. Austin Avenue Georgetown, TX 78626 PURPOSE OF EXPENDITURE (b) Description Check if fused outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CLS luncheon Complete QNLY if direct Candidate/Officeholder name Office sought Office held	Date 06/30/2023 Amount (\$) Payee address; City; State; Zip Code \$1,065.55 PO Box 811428 Los Angeles, CA 90081 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Payee name	Office held
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Solicitation/Fundraising Expense	Solicitation/Fundraising Expense Check if Che	n
Complete ONLY if direct expenditure to benefit C/OH Date Payee name Pok-E-Jo's Amount (\$) Payee address; City; State; Zip Code Georgetown, TX 78626 PURPOSE OF EXPENDITURE Purpose (a) Category (See Categories listed at the top of this schedule) CLS luncheon Complete ONLY if direct Candidate/Officeholder name Office sought Office held	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name office sought Date Payee name	
Complete ONLY if direct expenditure to benefit C/OH Date	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Payee name	
Date	expenditure to benefit C/OH Date Payee name	Tu lees on continuutions
Date	expenditure to benefit C/OH Date Payee name	Office held
O2/27/2023 Pok-E-Jo's Amount (\$) Payee address; City; State; Zip Code \$25.06 610 N. Austin Avenue Georgetown, TX 78626 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CLS luncheon Complete ONLY if direct Candidate/Officeholder name Office sought Office held	- Syst Name	Cince field
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Amount (\$) \$25.06 Payee address; City; State; Zip Code 610 N. Austin Avenue Georgetown, TX 78626 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CLS luncheon Complete ONLY if direct Candidate/Officeholder name Office sought Office held	02/2/1/2023 F 0x-2-30 3	
\$25.06 610 N. Austin Avenue Georgetown, TX 78626 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CLS luncheon Complete ONLY if direct Candidate/Officeholder name Office sought Office held	Assessment (dt)	
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PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CLS luncheon Complete ONLY if direct Candidate/Officeholder name Office sought Office held	\$25.00 OTO N. AUSUII AVEITUE	
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CLS luncheon Complete ONLY if direct Candidate/Officeholder name Office sought Office held	O	
OF EXPENDITURE Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CLS luncheon Complete ONLY if direct Candidate/Officeholder name Office sought Office held	<u> </u>	
EXPENDITURE EVENT Expense Check if Austin, TX, officeholder living expense CLS luncheon Complete ONLY if direct Candidate/Officeholder name Office sought Office held		
CLS luncheon Complete ONLY if direct Candidate/Officeholder name Office sought Office held	EVENDITURE Event Expense Light Glock in	·
expenditure to benefit C/OH	· · · · · · · · · · · · · · · · · · ·	
	expenditure to benefit C/OH	Office held
		Office held
		Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
	Sch: 11/13 Rpt: 32/38	Field, Scott K. (The Honorable) 00065318							
4	Date	5 Payee name							
	01/03/2023	Senior Aggie Leadership Council							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$275.00	c/o Eugene Payne							
		1300 Circle Ridge Drive							
		Austin, TX 78746							
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 Yearly dues							
		really dues							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
,	expenditure to benefit C/OI								
_	Date	Davida marra							
	01/17/2023	Payee name Taylor Chamber of Commerce							
		· ·							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$130.00	1519 N. Main Street							
		Taylor, TX 76574							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		Payment for portion of table at banquet							
		The state of the s							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								
	Date	Payee name							
	01/18/2023	Texas Aggie Bar Association							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$40.00	500 Winstead Building							
	Ψ40.00	2728 N. Harwood Street							
		Dallas, TX 75201							
	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							
		Yearly dues							
	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 Comm

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

	Candidate/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: 12/13 Rpt: 33/38	Field, Scott K. (The Honorable) 00065318						
4	Date	5 Payee name						
	03/24/2023	The Yard						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$65.78	940 W. University Avenue						
		Suite 120						
		Georgetown, TX 78626						
8	PURPOSE							
١	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		Staff appreciation						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI	1						
_	Date	Payee name						
	05/22/2023	United States Postal Service						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$25.20	2300 Scenic Drive						
\$25.20 2500 Scenic Drive								
		Georgetown, TX 78626						
	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						
		Purchase of stamps						
	Compulate ONLY if direct	Candidate/Officeholder name Office sought Office held						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI							
	· 							
	Date	Payee name						
	05/19/2023	University of Texas Parking and Transportation Services						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$6.00	2401 San Jacinto Blvd.						
		Austin, TX 78705						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		Parking for speaking engagement.						
	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 -Candidate/Officeholder/Political Comm

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

	Candidate/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: 13/13 Rpt: 34/38	Field, Scott K. (The Honorable) 00065318						
4	Date	5 Payee name						
	04/24/2023	Whiskey Cake						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$54.12	2600 N. IH 35						
		Round Rock, TX 78681						
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 Inn of Court meeting						
		illii oi Court meeting						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
9	expenditure to benefit C/O							
_	D :							
	Date	Payee name						
	04/26/2023	Williamson County A&M Club						
	Amount (\$)	Payee address; City; State; Zip Code						
\$150.00 701 S. Main Street								
		Georgetown, TX 78626						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Contributions/Donations Made By						
		Candidate/Officeholder/Political Committee						
		Sponsorship						
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							
_	Data							
	Date	Payee name						
	02/13/2023	Willie's Ice House						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$20.24	1301 S. IH 35 Frontage Road						
		Georgetown, TX 78626						
	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 Lunch meeting						
		Lunch meeting						
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

Solicitation/Fundraising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Co Credit Card Payment		al Committee Legal Services Salaries/Wages/Contract Labor			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
L			The Instruction Guide explains	how to co	omplete this form.			
1	Total pages Schedule G:	2 FILER NAMI	E			3	Filer ID (Ethics Comm	ission Filers)
	Sch: 1/4 Rpt: 35/38	Field, Scott	K. (The Honorable)				00065318	
4	Date	5 Payee name	;					
	01/28/2023	Field, Scott						
6	Amount (\$)	7 Payee addre	ess; City; State	; Zip Co	ode			
	\$47.16	405 Martin	Luther King					
	Reimbursement from							
	X political contributions intended	Georgetow	n, TX 78626					
8	PURPOSE	(a) Category (s	See Categories listed at the top of this sch	nedule)	(b) Description	=	eck if travel outside of Texas. Co	
	OF EXPENDITURE	Travel Out	of District			_	eck if Austin, TX, officeholder living	
	-				Mileage reimburs	sem	ent to and from Austin	Bar Gala
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought		Office held	
	Date	Payee name						
	01/17/2023	Field, Scott	t					
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode			
	\$23.58	405 Martin	Luther King					
	Reimbursement from							
	X political contributions intended	Georgetow	n, TX 78626					
\vdash	PURPOSE		See Categories listed at the top of this sch	nedule)	Description	Ch	eck if travel outside of Texas. Co	omplete Schedule T.
	OF	Travel In D	•			=	eck if Austin, TX, officeholder living	
	EXPENDITURE				Mileage to and fr	om	Taylor Chamber of Co	mmerce Gala
					_			
\vdash	Complete ONLY if direct	<u> </u>	holder name		Office sought		Office held	
	expenditure to benefit				, and the second			
	C/OH							
	Date	Payee name						
	02/10/2023	Field, Scott	İ					
Т	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode			
	\$14.15	1 1	Luther King	•				
	Reimbursement from		Ü					
	x political contributions intended	Georgetow	n, TX 78626					
	PURPOSE	Category (S	See Categories listed at the top of this sch	nedule)	Description	_	eck if travel outside of Texas. Co	
	OF EXPENDITURE	Travel In D	istrict			_	eck if Austin, TX, officeholder living	ng expense
					Mileage to and fr	om	fundraiser	
L								
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought		Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Folling Expense Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule G:	2 FILER NAM	IE			3	Filer ID (Ethics Commission Filers)			
	Sch: 2/4 Rpt: 36/38	Field, Sco	tt K. (The Honorable)				00065318			
4	Date	5 Payee nam	e							
	05/16/2023	Field, Sco								
6	Amount (\$)	7 Payee addr	ess; City; Stat	e; Zip C	ode					
	\$34.98	_	Luther King							
	Reimbursement from political contributions intended	Georgetov	vn, TX 78626							
8	PURPOSE	(a) Category (See Categories listed at the top of this s	chedule)	(b) Description	Ch	eck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Travel Out	t of District			_	eck if Austin, TX, officeholder living expense			
	-				Mileage to and fr	rom	judicial reception			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Offic	eholder name		Office sought		Office held			
	Date	Payee nam	e							
	06/02/2023	Field, Sco	tt							
	Amount (\$)	Payee addr	Payee address; City; State; Zip Code							
	\$1.83	405 Martir	Luther King							
	Reimbursement from political contributions intended	Georgetov	vn, TX 78626							
	PURPOSE	Category (See Categories listed at the top of this s	chedule)	Description	Ch	eck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Travel In [District			Ch	eck if Austin, TX, officeholder living expense			
					Mileage to and fr	rom	fundraiser			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Offic	eholder name		Office sought		Office held			
	Date	Payee nam	e							
	06/03/2023	Field, Sco	tt							
	Amount (\$)	Payee addr	ess; City; Stat	e; Zip C	ode					
	\$165.06	405 Martir	Luther King							
	Reimbursement from political contributions intended	Georgetov	vn, TX 78626							
	PURPOSE	Category (See Categories listed at the top of this s	chedule)	Description	=	eck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Travel Out	t of District			_	eck if Austin, TX, officeholder living expense			
					Mileage to and fr	rom	bar board meeting			
	Complete ONLY if direct expenditure to benefit C/OH	 Candidate/Offic	eholder name		Office sought		Office held			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment				Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor				Travel in District Travel Out of District OTHER (enter a category not listed above)			
	oroan oara'r aymon			The Instruction Guide	e explains h	now to co	mplete this form.				
1	Total pages Schedule G:	2	FILER NAME					3	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 3/4 Rpt: 37/38		Field, Scott	K. (The Honorable))				000653	318	
4	Date	5	Payee name					•			
	06/06/2023	1	Field, Scott								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode				
	\$9.95		405 Martin L	_uther King							
	Reimbursement from			•							
	X political contributions intended		Georgetown	n, TX 78626							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the to	op of this sche	edule)	(b) Description	=		el outside of Texas. Comp	
	OF EXPENDITURE		Travel In Dis	strict			L	CI	neck if Aust	in, TX, officeholder living	expense
EXI ENDITORE							Mileage to and f	rom	fundrai	ser	
9	Complete ONLY if direct expenditure to benefit C/OH	Can	ndidate/Officeh	nolder name			Office sought			Office held	
	Date		Payee name								
	06/29/2023	1	Field, Scott								
_	Amount (\$)	┷	Payee addres	ss; City;	State:	Zip Co	nde				
	\$36.42	1	405 Martin L	•	State,	Zip Cc	de				
			405 Martin L	Lutilet King							
	X Reimbursement from political contributions intended		Georgetown	n, TX 78626							
	PURPOSE		Category (Se	ee Categories listed at the to	op of this sche	dule)	Description	CI	neck if trave	el outside of Texas. Comp	plete Schedule T.
	OF EXPENDITURE		Travel Out of	of District				CI	neck if Aust	in, TX, officeholder living	expense
							Mileage to and f	rom	fundrai	ser	
	Complete ONLY if direct	Can	ndidate/Officeh	nolder name			Office sought			Office held	
	expenditure to benefit C/OH										
	Date		Payee name								
	06/23/2023		Field, Scott								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode				
	\$34.58		405 Martin L	_uther King							
	Reimbursement from			_							
	X political contributions intended		Georgetown	n, TX 78626							
	PURPOSE			ee Categories listed at the to	op of this sche	edule)	Description	_		el outside of Texas. Comp	
	OF EXPENDITURE		Travel Out of	of District			L	_		in, TX, officeholder living	expense
	-		Mileage					rom	suppor	ter meeting	
L		\perp									
	Complete ONLY if direct expenditure to benefit C/OH	Can	ndidate/Officeh	nolder name			Office sought			Office held	
H											

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 4/4 Rpt: 38/38 Field, Scott K. (The Honorable) 00065318 Date Payee name 06/20/2023 HEB Amount (\$) Payee address; City; State; Zip Code \$23.15 19348 Ronald Reagan Blvd. Reimbursement from political contributions Х intended Georgetown, TX 78728 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** Office supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/05/2023 Texas A&M Association of Former Students Amount (\$) Payee address; City; State; Zip Code \$100.00 505 George Bush Drive Reimbursement from political contributions Χ College Station, TX 77840 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH