CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to con	plete this form.	1 Filer ID (Ethics Commi 00080253	ssion Filers)	2 Total pages	filed: 33
3 CANDIDATE /	MS / MRS / MR	FIRST	-	MI		USE ONLY
OFFICEHOLDER	The Honorable	Standard D.				
NAME					Date Received	
					ELECTRONIC	CALLY FILED
	NICKNAME	LAST		SUFFIX	07/12/2023	
	Stan	Lambert				
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; A	PT / SUITE #; CI	TY;	ZIP CODE	Date Hand-delivered	l or Date Postmarked
MAILING	P.O. Box 3752					
ADDRESS					Receipt #	Amount
Change of Address	Abilene, TX 79604					
	,				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER	Mrs.	Becky				
NAME	WI 3.	Decky				
	NICKNAME	LAST		SUFFIX		
		Rentz				
6 CAMPAIGN	STREET ADDRESS (NO F	PO BOX PLEASE);	AP	/ SUITE #; CITY;	S	TATE; ZIP CODE
TREASURER ADDRESS	18 Pinehurst					
(Residence or Business)	Abilene, TX 79606					
	7.bileffe, 177 75000					
7 CAMPAIGN	AREA CODE PH	ONE NUMBER	EXTENSION			
TREASURER	(325) 280-6407					
PHONE						
8 REPORT						
TYPE	January 15	30th day befor	e election	Runoff	15th day after o	campaign treasurer
					appointment (o	fficeholder only)
	X July 15	8th day before	election	Exceeded modified	Final Report (A	ttach C/OH-FR)
			_	reporting limit	-	
9 PERIOD	Month Day Yea	r		Month Day	Year	
COVERED	01/01/2023	Т	HROUGH	06/30/202	3	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Yea	r 🛛 🗐	Primary	Runoff	Other	
	03/05/2024					
			General	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	State Representative D	istrict 71		State Representa	ative District 71	
	1			I		
		GO.	TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.e	thics.state.tx.u	5	Vers	sion V3.5.1.a18ea2ca

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 33

13 C / OH NAME	Lambert, Standard D	. (The Honorable)	14 Filer ID 00080253	(Ethics Com	mission Filers)						
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this informatio	the candidate's or offic	eholder's kn	owledge or						
Additional Pages	COMMITTEE TYPE										
	GENERAL	COMMITTEE ADDRESS									
	SPECIFIC										
	COMMITTEE CAMPAIGN TREASURER NAME										
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS								
16 CONTRIBUTION TOTALS		L IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00						
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$	0.00						
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$	2,630.43						
	4. TOTAL POLITIC	CAL EXPENDITURES		\$	66,857.14						
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$	199,531.66						
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	S 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 Honora	able Standard D. Lan	nbert							
		Signature o	f Candidate or Officeho	older							
AFFIX NO	TARY STAMP / SEAL AB	OVE									
	, this the		day								
of	, 20, to ca	ertify which, witness my hand and seal of office.									
Signature of offic	er administering	Printed name of officer administering	Title of office	er administer	ing oath						
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V3	3.5.1.a18ea2ca						

SUBTOTALS - C/OH	C	FORM C/OH OVER SHEET PG 3 3 of 33
18 FILER NAME Lambert, Standard D. (The Honorable)	(Ethics Commission Filers)	
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 66,692.57
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	DNS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 164.57
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$
12. X SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$ 357.32

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
	Total pages Schedule F1:		Filer ID (Ethics Commission Filers)						
	Sch: 1/27 Rpt: 4/33	Lambert, Standard D. (The Honorable)	00080253						
4	Date	Payee name							
	04/10/2023	Abilene Chamber of Commerce							
6	Amount (\$) \$600.00	7 Payee address; City; State; Zip Code 174 Cypress St., Ste. 200 Abilene, TX 79601							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Contributions/Donations Made By Check if travel out Check if travel out Check if Austin, T2	tside of Texas. Complete Schedule T. X, officeholder living expense ation to sponsor Salute to Small						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	02/10/2023	Abilene High School Booster Club							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$200.00	2800 N. 6th Street Abilene, TX 79603							
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense ation						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	02/03/2023	Abilene Philharmonic							
	Amount (\$) \$210.00	Payee address; City; State; Zip Code 1102 N 3rd Street C							
		Abilene, TX 79601							
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense ation						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:		Filer ID (Ethics Commission Filers)					
	Sch: 2/27 Rpt: 5/33	Lambert, Standard D. (The Honorable)	00080253					
4	Date 05/15/2023	5 Payee name Abilene Philharmonic						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
0	\$515.24	1102 N 3rd Street C						
		Abilene, TX 79601						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense ation					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	02/21/2023	All Kinds Animal Initiative						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$309.00	925 South 25th Street						
		Abilene, TX 79602						
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense ation					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	06/02/2023	Basketball Smiles						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$255.58	4525 Seal Lane						
		Abilene, TX 79606						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE		tside of Texas. Complete Schedule T.					
		Candidate/Officeholder/Political Committee Check if Austin, T Charitable don	X, officeholder living expense ation					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
\vdash								

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)					
-	Sch: 3/27 Rpt: 6/33	Lambert, Standard D. (The Honorable)	00080253					
4	Date 06/20/2023	5 Payee name Big Brothers Big Sisters						
Ļ								
6	Amount (\$) \$520.00	 7 Payee address; City; State; Zip Code 547 Chestnut Street Abilene, TX 79602 						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
~	OF EXPENDITURE	Contributions/Donations Made By	utside of Texas. Complete Schedule T. IX, officeholder living expense nation					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	06/02/2023	Brandon Gall Benefit						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$200.00	10353 County Road 376 Anson, TX 79501						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. IX, officeholder living expense Nation					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	01/31/2023	Campaign Reporting Solutions, LLC						
-	Amount (\$)	Payee address; City; State; Zip Code						
	\$685.00	110 Carriage Drive						
		Lufkin, TX 75904						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. FX, officeholder living expense kkeeping services					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME	Filer ID (Ethics Commission Filers)					
	Sch: 4/27 Rpt: 7/33		Lambert, Standard D. (The Honorable)				00080253		
4	Date 01/31/2023		Payee name Campaign Reporting Solutions, LLC						
6	Amount (\$) \$125.00		Payee address; City; State; 110 Carriage Drive Lufkin, TX 75904	; Zip Co	de				
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Accounting/Banking	edule)	Check if Austin	ı, TX,	de of Texas. Complete Schedule T. officeholder living expense 099s for campaign contractors		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ght		Office held		
	Date		Payee name						
	01/20/2023		Chick-Fil-A						
	Amount (\$) \$30.22		Payee address; City; State; 503 W Martin Luther King Jr. Blvd Austin, TX 78701	; Zip Co	de				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Food/Beverage Expense	edule)		ı, TX,	de of Texas. Complete Schedule T. officeholder living expense Peting		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ght		Office held		
	Date		Payee name						
	03/03/2023		Chick-Fil-A						
	Amount (\$) \$34.68		Payee address; City; State; 503 W Martin Luther King Jr. Blvd	; Zip Co	de				
			Austin, TX 78701						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Food/Beverage Expense	edule)		I, TX,	de of Texas. Complete Schedule T. officeholder living expense eeting		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name C	Office sou	ght		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimt Fees Office Overhead/Rental Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	Jursement Solicitation/Fundraising Expense Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 5/27 Rpt: 8/33	ambert, Standard D. (The Honorable)	00080253						
4	Date 03/31/2023	Payee name Chick-Fil-A							
6	Amount (\$) \$34.68	Payee address; City; State; Zip Code 503 W Martin Luther King Jr. Blvd Austin, TX 78701							
8	PURPOSE OF EXPENDITURE		ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense preakfast meeting						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	04/13/2023	Chick-Fil-A							
	Amount (\$) \$34.68	Payee address; City; State; Zip Code 503 W Martin Luther King Jr. Blvd Austin, TX 78701							
	PURPOSE OF EXPENDITURE		ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense preakfast meeting						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	04/21/2023	Chick-Fil-A							
	Amount (\$) \$34.68	Payee address; City; State; Zip Code 503 W Martin Luther King Jr. Blvd							
		Austin, TX 78701							
	PURPOSE OF EXPENDITURE		ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense preakfast meeting						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	-	Office Ov Polling E xpense Printing E	xpense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:		•	•	3 Filer ID (Ethics Commission Filers)				
1	Sch: 6/27 Rpt: 9/33	ambert, Standard D. (The H	lonorable)		00080253				
4	Date	ayee name							
	03/29/2023	layton Spangler Photograp	hic Design						
6	Amount (\$)	ayee address; City;	State; Zip C	ode					
	\$399.00	35 Point Lick Drive							
		harleston, WV 25306							
8	PURPOSE			(b) Description					
Ŭ	OF	ategory (See Categories listed at the office Overhead/Rental Exp			outside of Texas. Complete Schedule T.				
	EXPENDITURE			Check if Austin	, TX, officeholder living expense				
				Photo of the	88th Legislature for capitol office decor				
9	Complete ONLY if direct expenditure to benefit C/O	ndidate/Officeholder name	Office sou	ıght	Office held				
	Date	ayee name							
	01/23/2023	copper Creek							
			Stata: Zin C	ada					
	Amount (\$)	ayee address; City;	State; Zip Co	Jue					
	\$270.11	401 Loop 332							
		bilene, TX 76550							
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the ood/Beverage Expense	e top of this schedule)		outside of Texas. Complete Schedule T. , TX, officeholder living expense				
				OH dinner m	eeting				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	ndidate/Officeholder name	Office sou	ight	Office held				
	Date	ayee name							
	05/03/2023	rystal Art Imports, Inc							
	Amount (\$)	ayee address; City;	State; Zip Co	ode					
	\$409.19	185-K Huntley Road							
		olumbus, OH 43229							
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the ift/Awards/Memorials Expe			outside of Texas. Complete Schedule T.				
					, TX, officeholder living expense ons, Investment and Financial Services hair				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sou	ıght	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 7/27 Rpt: 10/33	Lambert, Standard D. (The Honorable)	00080253					
4	Date 03/08/2023	Payee name Day Nursery of Abilene						
6	Amount (\$) \$300.00	Payee address; City; State; Zip Code 650 Cedar Street Abilene, TX 79601						
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense nation					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	06/09/2023	Earl Young's Team						
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 4525 Cole Avenue Ste. 1413 Dallas, TX 75205						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense nation					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	02/04/2023	Fire & Ice Feast, Inc						
	Amount (\$) \$250.00	Payee address;City;State;Zip Code3017 Shepherd Street						
		Abilene, TX 79605						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense nation					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awar Legal Ser	erage Expense ds/Memorials Expense	Office Ove Polling Ex Printing E Salaries/V	erhead pense xpens Vages	e /Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2 FIL	ER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 8/27 Rpt: 11/33			D. (The Honorat	ole)				00080253	
4	Date 02/14/2023		vee name ogle Fiber							
6	Amount (\$) \$70.00	701	vee address; L S Lamar stin, TX 78704	City; Sta	ate; Zip Cc	ode				
8	PURPOSE OF EXPENDITURE	(a) Cat Fee		ies listed at the top of this	schedule)		X Check if Austin,	, тх,		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholde	r name	Office sou	ight			Office he	eld
	Date	Pay	vee name							
	01/17/2023	Go	ogle Fiber							
	Amount (\$) \$70.00	702	L S Lamar	City; Sta	ate; Zip Co	ode				
	PURPOSE OF EXPENDITURE			ies listed at the top of this	schedule)		X Check if Austin,	, TX,		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholde	r name	Office sou	ight			Office he	ld
	Date	Pay	vee name							
	03/14/2023	Go	ogle Fiber							
	Amount (\$) \$70.00		vee address; L S Lamar	City; Sta	ate; Zip Cc	ode				
		Aus	stin, TX 78704			ī				
	PURPOSE OF EXPENDITURE	(a) Cat Fee	(ies listed at the top of this	schedule)		X Check if Austin,	, TX,		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholde	r name	Office sou	ight			Office he	ld

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Award Legal Ser	erage Expense Is/Memorials Expens		Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pense ages/	e Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2 FILEF							3	Filer ID	(Ethics Commission File	ers)
	Sch: 9/27 Rpt: 12/33			D. (The Hond	orable)					00080253		
4	Date 04/14/2023	5 Payee Goog	e name Ile Fiber									
6	Amount (\$) \$70.00	701 \$	e address; 5 Lamar n, TX 78704	City;	State;	Zip Co	de					
8	PURPOSE OF EXPENDITURE	a) Categ Fees	Ory (See Catego	ies listed at the top o	of this sche	dule)		X Check if Austin,	, TX,	officeholder living	plete Schedule T. I expense I apartment maintair	ned
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candid	ate/Officeholde	r name	Ot	ffice sou	ght			Office he	eld	
	Date	Payee	e name									
	05/15/2023	Goog	le Fiber									
	Amount (\$) \$70.00	701 \$	e address; 5 Lamar n, TX 78704	City;	State;	Zip Co	de					
	PURPOSE OF EXPENDITURE	a) Categ Fees	Ory (See Catego	ies listed at the top o	of this sche	dule)		X Check if Austin,	, TX,	officeholder living	plete Schedule T. I expense I apartment maintair	ned
	Complete ONLY if direct expenditure to benefit C/OF	Candid	ate/Officeholde	r name	Ot	ffice sou	ght			Office he	eld	
	Date	Payee	e name									
	06/14/2023		le Fiber									
	Amount (\$) \$70.00		e address; S Lamar	City;	State;	Zip Co	de					
		Austi	n, TX 78704									
	PURPOSE OF EXPENDITURE	a) Categ Fees	Ory (See Catego	ies listed at the top o	of this sche	dule)		X Check if Austin,	, тх,	officeholder living	plete Schedule T. I expense I apartment maintair	ned
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candid	ate/Officeholde	r name	Of	ffice sou	ght			Office he	eld	
		_										

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
_	T	-	· · ·		inpiete this form.				
1	Total pages Schedule F1: Sch: 10/27 Rpt: 13/33	2	Lambert, Standard D. (The Honorable)	I		3	Filer ID (Ethics Commission Filers) 00080253		
4	Date	5	Payee name						
	02/27/2023		HEB						
6	Amount (\$) \$20.07	7	Payee address; City; State; 6900 Brodie Lane Austin, TX 78745	; Zip Co	de				
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense itol office		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Jht		Office held		
	Date		Payee name						
	04/03/2023		HEB						
	Amount (\$) \$145.15		Payee address; City; State; 6900 Brodie Lane Austin, TX 78745	Zip Co	de				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense itol office		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Dffice sou	jht		Office held		
	Date		Payee name						
	04/24/2023		HEB						
	Amount (\$) \$96.56		Payee address; City; State; 6900 Brodie Lane	Zip Co	de				
			Austin, TX 78745						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense itol office		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Dffice sou	Jht		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/V	erhea pense xpens Vages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	5		5 11000 10 00	in pro		3	Filer ID (Ethics Commission Filers)				
T	Sch: 11/27 Rpt: 14/33		Lambert, Standard D. (The Honorable	e)			3	Filer ID (Ethics Commission Filers) 00080253				
4	Date	5	Payee name									
	01/01/2023		Hardaway, David									
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	ode							
	\$2,000.00		1209 Hollis									
			Abilene, TX 79605									
8	PURPOSE	<u> </u>	Category (See Categories listed at the top of this so	hedule)	(b)	Description						
	OF	(,	Salaries/Wages/Contract Labor	nedule)	()		outsi	de of Texas. Complete Schedule T.				
	EXPENDITURE					Check if Austin	, TX,	officeholder living expense				
						Campaign co	ontr	act labor				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held				
	Date		Payee name									
	02/01/2023		Hardaway, David									
	Amount (\$)		Payee address; City; State	e; Zip Co	ode							
	\$2,000.00		1209 Hollis	· · · ·								
			Abilene, TX 79605									
	PURPOSE OF	(a)	Category (See Categories listed at the top of this so	hedule)	(b)	Description						
	EXPENDITURE						Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
						Campaign co						
						oumpaign oc						
	Complete ONLY if direct		Candidate/Officeholder name Office sought					Office held				
	expenditure to benefit C/OF	Н			5							
-	Date	<u> </u>	Payee name									
	03/01/2023		Hardaway, David									
-	Amount (\$)		-	e; Zip Co	ode							
	\$2,000.00		1209 Hollis	, <u>Lip</u> CU								
	φ2,000.00											
			Abilene, TX 79605									
	PURPOSE	(a)	Category (See Categories listed at the top of this so	hedule)	(b)	Description						
	OF EXPENDITURE		Salaries/Wages/Contract Labor					de of Texas. Complete Schedule T.				
								officeholder living expense				
						Campaign co	ontr					
					Ļ							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held				
		-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explain	Office Ov Polling E Printing B Salaries/	verhea xpens Expens Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	5		15 11000 10 0.	Unpi		3	Filer ID (Ethics Commission Filers)				
T	Sch: 12/27 Rpt: 15/33		Lambert, Standard D. (The Honorabl	e)			3	Filer ID (Ethics Commission Filers) 00080253				
4	Date	5	Payee name									
	04/01/2023		Hardaway, David									
6	Amount (\$)	7	Payee address; City; Stat	te; Zip C	ode							
	\$2,000.00		1209 Hollis									
			Abilene, TX 79605									
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	schedule)	(b)	Description						
	OF EXPENDITURE		Salaries/Wages/Contract Labor					de of Texas. Complete Schedule T.				
								officeholder living expense				
				act labor								
Ļ		Ĺ		0///								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ught			Office held				
	Date		Payee name									
	05/01/2023		Hardaway, David									
	Amount (\$)		Payee address; City; Stat	te; Zip C	ode							
	\$2,000.00		1209 Hollis									
			Abilene, TX 79605									
	PURPOSE OF		Category (See Categories listed at the top of this s	schedule)	(b)	Description						
	EXPENDITURE							de of Texas. Complete Schedule T. officeholder living expense				
						Campaign co						
						Campaign co	/////					
	Complete ONLY if direct		Candidate/Officeholder name Office sought					Office held				
	expenditure to benefit C/OF			Onice as	ugin							
	Date		Payee name									
	06/01/2023		Hardaway, David									
	Amount (\$)		-	te; Zip C	ode							
	\$2,000.00		1209 Hollis									
	+_,000.00											
			Abilene, TX 79605									
	PURPOSE OF		Category (See Categories listed at the top of this s	schedule)	(b)	Description						
	EXPENDITURE	Salaries/Wages/Contract Labor				Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
						Campaign co						
						Campaign Cu	/1111					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held						Office held						
	expenditure to benefit C/OF			Unice SU	agiit							

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/V	xpense Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME			Filer ID (Ethics Commission Filers)					
	Sch: 13/27 Rpt: 16/33		Lambert, Standard D. (The Honorable	e)			00080253				
4	Date 05/29/2023	5	Payee name Hardaway, David								
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	ode						
	\$1,500.00		1209 Hollis								
			Abilene, TX 79605								
8	PURPOSE	(a)	Category (See Categories listed at the top of this so	chedule)	(b) Description						
	OF		Salaries/Wages/Contract Labor	, ilouuloj		vel outs	ide of Texas. Complete Schedule T.				
	EXPENDITURE		-				, officeholder living expense				
			Campaign contract labor								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	Office sou	ught		Office held				
	Date		Payee name								
	01/04/2023		Lambert, Stan (Mr.)								
	Amount (\$)	-		e; Zip Co	nde						
	\$500.62		P.O. Box 3752	c, zip oc							
	\$500.02		F.O. BOX 3732								
			Abilene, TX 79604		1						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this so	chedule)	(b) Description						
	EXPENDITURE		Travel Out of District				side of Texas. Complete Schedule T.				
						Austin, TX, officeholder living expense nileage. Log maintained in the campaign					
							25). Not reimbursed by the state.				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office held							
	Date		Payee name								
	01/12/2023		Lambert, Stan (Mr.)								
	Amount (\$)	-		e; Zip Co	ado						
	\$301.30		P.O. Box 3752	ε, Ζιρ Ου	Jue						
	\$201.30		P.O. B0X 3732								
			Abilene, TX 79604								
	PURPOSE	(a)	Category (See Categories listed at the top of this so	chedule)	(b) Description						
	OF EXPENDITURE	Travel Out of District					ide of Texas. Complete Schedule T.				
							, officeholder living expense				
							e. Log maintained in the campaign 55). Not reimbursed by the state.				
						0.					
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ught		Office held				
	expenditure to benefit C/OI	Η									

		EXPENDITURE CATEGORIES F	OR BOX 8(á	(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printing	epayment/Reim Overhead/Renta Expense Expense s/Wages/Contra	al Expense Transportation Equipment & Related Expense Travel in District Travel Out of District act Labor OTHER (enter a category not listed above)				
1	Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)				
1	Sch: 14/27 Rpt: 17/33	Lambert, Standard D. (The Honorable)		00080253				
4	Date 03/03/2023	Payee name Lambert, Stan (Mr.)						
6	Amount (\$)	Payee address; City; State; Zip	` ode					
U	\$268.75	P.O. Box 3752 Abilene, TX 79604						
8	PURPOSE		(b) Deer	ovintion				
0	OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Polit	Cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense itical mileage. Log maintained in the campaign ce (410.3m*.655). Not reimbursed by the state.				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	03/24/2023	Lambert, Stan (Mr.)						
	Amount (\$)	Payee address; City; State; Zip	Code					
	\$205.01	P.O. Box 3752 Abilene, TX 79604						
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Polit	cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense itical mileage. Log maintained in the campaign ce (313m*.655). Not reimbursed by the state.				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office s	bught	Office held				
	Date	Payee name						
	04/07/2023	Lambert, Stan (Mr.)						
	Amount (\$) \$222.70	Payee address; City; State; Zip P.O. Box 3752	Code					
		Abilene, TX 79604						
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Polit	cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense itical mileage. Log maintained in the campaign ce (340m*.655). Not reimbursed by the state.				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office s	ought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pens (ages	e /Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	· · · · ·				3	Filer ID (Ethics Commission Filers)			
-	Sch: 15/27 Rpt: 18/33	[Lambert, Standard D. (The Honorable))				00080253			
4	Date	5	Payee name								
	06/13/2023		ambert, Stan (Mr.)								
6	Amount (\$)	7	Payee address; City; State;	; Zip Co	de						
	\$288.20		P.O. Box 3752								
Abilene, TX 79604											
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description					
	OF EXPENDITURE		Travel Out of District					ide of Texas. Complete Schedule T.			
								, officeholder living expense e. Log maintained in the campaign			
								55). Not reimbursed by the state.			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	ght			Office held			
	Date		Payee name								
	06/27/2023		Lambert, Stan (Mr.)								
	Amount (\$)		Payee address; City; State;	; Zip Co	de						
	\$524.00		P.O. Box 3752	,							
	¢02 1100										
		<u> </u>	Abilene, TX 79604								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description					
	EXPENDITURE		Travel Out of District					ide of Texas. Complete Schedule T. , officeholder living expense			
								e. Log maintained in the campaign			
							e (800m*.655). Not reimbursed by the state.				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought					Office held				
	expenditure to benefit C/O										
	Date		Payee name								
	03/16/2023		Lambert, Stan (Mr.)								
	Amount (\$)		Payee address; City; State;	; Zip Co	de						
	\$164.57		P.O. Box 3752								
			Abilene, TX 79604								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description					
	EXPENDITURE		Loan Repayment/Reimbursement					ide of Texas. Complete Schedule T.			
					Check if Austin, TX, officeholder living expense Reimbursement of personal funds used for campaigr						
								rly reported on Sch G			
	Complete ONLV if direct	Ļ	Candidate/Officeholder name C	Office sou	ab+	-		Office held			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI			Surve Son	ynt			Onice neid			

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense hmittee Legal Services The Instruction Guide explain	Office Ov Polling E Printing I Salaries/	verhea Expense Expense Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expen Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2					3	Filer ID (Ethics Commission	Eilore)
	Sch: 16/27 Rpt: 19/33		Lambert, Standard D. (The Honorabl	le)				00080253	
4	Date	5	Payee name						
	01/01/2023		McCall Property Management LLC						
6	Amount (\$)	7	Payee address; City; Sta	te; Zip C	ode				
	\$3,000.00		PO Box 633						
			Spicewood, TX 78669						
_			-		1				
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description			
	EXPENDITURE		Fees					de of Texas. Complete Schedule T. officeholder living expense	
								apartment maintained in Aus	tin
						Rent for point	icui	apartment maintained in Ado	un
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office so	ught			Office held	
		-							
	Date		Payee name						
	02/01/2023		McCall Property Management LLC						
	Amount (\$)		Payee address; City; Sta	ite; Zip C	ode				
	\$3,000.00		PO Box 633						
			Spicewood, TX 78669						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this s Fees	schedule)	(b)	X Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense apartment maintained in Aus	tin
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ught			Office held	
	Date		Payee name						
	03/01/2023		McCall Property Management LLC						
	Amount (\$)		Payee address; City; Sta	te; Zip C	ode				
	\$3,000.00		PO Box 633	, <u>L</u> ip O	040				
	\$5,000.00		10 000 000						
			Spicewood, TX 78669						
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE		Fees					de of Texas. Complete Schedule T.	
	EXPENDITORE							officeholder living expense	
						Rent for politi	Ical	apartment maintained in Aus	tın
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ught			Office held	
\vdash									

		EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp nmittee Legal Services The Instruction Guide		Office Over Polling Exp Printing Exp Salaries/Wa	head/ ense pense ages/	e Contract Labor		Travel in District Travel Out of Distr	uipment & Related Expense
1	Total pages Schedule F1:	2							Filer ID	(Ethics Commission Filers)
1	Sch: 17/27 Rpt: 20/33		Lambert, Standard D. (The Ho	onorable))				00080253	
4	Date	5	Payee name							
	04/01/2023		McCall Property Management	LLC						
6	Amount (\$)	7	Payee address; City;	State;	; Zip Cod	le				
	\$3,000.00		PO Box 633							
			Spicewood, TX 78669							
_			-							
8	PURPOSE OF	(a)	Category (See Categories listed at the to	op of this sch	edule)	(b)	Description			
	EXPENDITURE		Fees				Check if travel of X Check if Austin,		de of Texas. Compl	
										naintained in Austin
								cui	aparanena n	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	jht			Office hel	d
	Date		Payee name							
	04/25/2023		McCall Property Management	LLC						
	Amount (\$)		Payee address; City;	State;	; Zip Cod	le				
	\$3,000.00		PO Box 633		-					
	+ - ,									
			Spicewood, TX 78669							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the to Fees	op of this sch	edule)		X Check if Austin,	, TX,		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	jht			Office hel	d
	Date		Payee name							
	06/01/2023		McCall Property Management	LLC						
	Amount (\$)		Payee address; City;		; Zip Cod	1e				
	\$3,000.00		PO Box 633	Olule,	, 20 000					
	\$5,000.00									
			Spicewood, TX 78669							
	PURPOSE	(a)	Category (See Categories listed at the to	op of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Fees						de of Texas. Compl	
	EXPENDITORE						X Check if Austin,			
							Rent for politi	cal	apartment m	naintained in Austin
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	ht			Office hel	d
⊢										

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 18/27 Rpt: 21/33		Lambert, Standard D. (The Honorable)				00080253		
4	Date 01/26/2023	5	Payee name McMurry University						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
	\$1,000.00		1642 Sayles Blvd Abilene, TX 79605						
8	PURPOSE	(2)			(b) Description				
0	OF	(a)	Category (See Categories listed at the top of this sche Contributions/Donations Made By Candidate/Officeholder/Political Commi	ide of Texas. Complete Schedule T. , officeholder living expense tion to sponsor 100th anniversary					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	ght		Office held		
	Date		Payee name						
	03/21/2023		Moore, Brayden (Mr.)						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$750.00		1301 Crossing Place Austin, TX 78741						
	PURPOSE OF EXPENDITURE	(a)	ide of Texas. Complete Schedule T. , officeholder living expense act labor						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	ght		Office held		
	Date		Payee name						
	05/29/2023		Moore, Brayden (Mr.)						
	Amount (\$) \$1,000.00		Payee address;City;State;1301 Crossing Place	Zip Co	de				
			Austin, TX 78741						
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contract labor 					, officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ght		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Comr	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)									
1	Total pages Schedule F1:	2 F	ILER NAME				3	Filer ID (Ethics Commission Filers)				
	Sch: 19/27 Rpt: 22/33		ambert, Standard D. (The Honorab	le)				00080253				
4	Date	5 F	ayee name									
	01/03/2023	N	lational Center for Children's Illustra	ated Literat	ure							
6	Amount (\$)	7 F	ayee address; City; Sta	te; Zip Co	de							
	\$500.00	1	02 Cedar Street									
			hilana TV 70601									
			bilene, TX 79601									
8	PURPOSE OF		category (See Categories listed at the top of this	schedule)	(b)	Description						
	EXPENDITURE		Contributions/Donations Made By					de of Texas. Complete Schedule T.				
			Candidate/Officeholder/Political Con	imittee		Charitable do		officeholder living expense				
							mai					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	Office sou	ght			Office held				
		•										
	Date	F	ayee name									
	03/13/2023	F	4X Foundation									
	Amount (\$)	F	ayee address; City; Sta	te; Zip Co	de							
	\$1,000.00		PO Box 1661	, p								
	¢1,000.00		0 200 1001									
		A	bilene, TX 76904									
	PURPOSE	(a) (category (See Categories listed at the top of this	schedule)	(b)	Description						
	OF EXPENDITURE	Contributions/Donations Made By						de of Texas. Complete Schedule T.				
		Candidate/Officeholder/Political Committee						, TX, officeholder living expense				
						Charitable do	nat	lion				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	Office sou	ght			Office held				
⊨	Date		20100 2020									
	04/26/2023		ayee name 24X Foundation									
	Amount (\$)			te; Zip Co	de							
	\$1,000.00	F	PO Box 1661									
		A	bilene, TX 76904									
⊢	PURPOSE	(a) (Category (See Categories listed at the top of this	schedule)	(b)	Description						
	OF		Contributions/Donations Made By	scriedule)	Ú		outsi	de of Texas. Complete Schedule T.				
	EXPENDITURE							officeholder living expense				
						Charitable do	nat	tion				
	Complete ONLY if direct	Ca	ndidate/Officeholder name	Office sou	ght			Office held				
	expenditure to benefit C/OI				-							
⊢												

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee 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)					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 20/27 Rpt: 23/33	Lambert, Standard D. (The Honorable)	00080253					
4	Date 02/04/2023	 Payee name Rescue the Animals SPCA 						
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 4620 N 1st Street Abilene, TX 79603						
8	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	utside of Texas. Complete Schedule T. TX, officeholder living expense nation to sponsor the annual Fur Ball					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	01/01/2023	Rider, William (Mr.)						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$1,000.00	3816 South Lamar Blvd #1010 Austin, TX 78704						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedul Check if Austin, TX, officeholder living expense Campaign contract labor						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	02/01/2023	Rider, William (Mr.)						
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 3816 South Lamar Blvd #1010 Austin, TX 78704						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense htract labor					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	mmittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid		Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		Transportation E Travel in District Travel Out of Di	
1	Total pages Schedule F1:	FILER NAME	Ξ				3	Filer ID	(Ethics Commission Filers)
	Sch: 21/27 Rpt: 24/33		tandard D. (The H	onorable)				00080253	
4	Date	Payee name							
	03/21/2023	Rider, Willia							
6	Amount (\$)	Payee addre	ss; City;	State;	Zip Coo	е			
	\$1,500.00	3816 South	ı Lamar Blvd						
		#1010							
		Austin, TX	78704						
8	PURPOSE	Category (S	ee Categories listed at the	top of this sche	edule)	b) Description			
	OF EXPENDITURE		ages/Contract Lab		ŕ				nplete Schedule T.
								, officeholder livin	g expense
						Campaign co	JUIU	actiador	
0	Complete ONLV if direct	Candidata/Off	iocholdor namo		office cours	ht.		Office h	ald
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Off	iceholder name	0	office soug	n		Onice h	eia
	Date	Payee name							
	05/29/2023	Rider, Willia	am (Mr.)						
	Amount (\$)	Payee addre	ss; City;	State;	Zip Coo	е			
	\$2,500.00	3816 South	ı Lamar Blvd						
		#1010							
		Austin, TX	78704						
	PURPOSE	Category (S	ee Categories listed at the	ton of this sche	edule)	b) Description			
	OF EXPENDITURE		ages/Contract Lab						nplete Schedule T.
		Check if Austin, TX, office							g expense
						Campaign co	ontr	act labor	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office						Office h	eld
	expenditure to benefit C/OI	candidate/On		0	nice soug	ni,		Once n	eiu
	Date	Payee name							
	03/13/2023	Rolling Plai	ns Memorial Hosp	vital					
	Amount (\$)	Payee addre	ss; City;	State;	Zip Coo	е			
	\$250.00	200 E Arizo	ona Avenue						
		Sweetwate	r, TX 79556						
	PURPOSE OF		ee Categories listed at the		edule)	b) Description			
	EXPENDITURE		ns/Donations Mad Officeholder/Politic		ittoo			ide of Texas. Con , officeholder living	nplete Schedule T.
		Canulualen			lillee	Charitable do			gexpense
	Complete ONLY if direct	Candidate/Off	iceholder name	0	office soug	ht		Office h	eld
	expenditure to benefit C/OI								

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment							Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	·		• • • • • •	3	Filer ID (Ethics Commission Filers)		
-	Sch: 22/27 Rpt: 25/33		Lambert, Standard D. (The Honorable)				00080253		
4	Date 01/11/2023		Payee name Sling TV						
6	Amount (\$) \$21.65		Payee address; City; State; 9601 S Meridian Blvd Englewood, CO 80112	Zip Co	de				
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 Image: Check if Austin, TX, officeholder living expense Television subscription for political aparticities and the top of this schedule					officeholder living expense cription for political apartment				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ght		Office held		
	Date		Payee name						
	02/13/2023		Sling TV						
	Amount (\$) \$43.30		Payee address; City; State; 9601 S Meridian Blvd Englewood, CO 80112	Zip Co	de				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Fees	edule)	X Check if Austin	, тх, I bsc	de of Texas. Complete Schedule T. officeholder living expense cription for political apartment ustin		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sought Office held					
	Date		Payee name						
	03/14/2023		Sling TV						
	Amount (\$) \$43.30		Payee address; City; State; 9601 S Meridian Blvd	Zip Co	de				
			Englewood, CO 80112	i					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Fees	edule)	X Check if Austin	, тх, Ibso	de of Texas. Complete Schedule T. officeholder living expense cription for political apartment ustin		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ght		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2 F	·		•	3	Filer ID (Ethics Commission Filers)		
-	Sch: 23/27 Rpt: 26/33		ambert, Standard D. (The Honorable	e)		ľ	00080253		
4	Date 04/12/2023		Payee name Sling TV						
6	Amount (\$) \$43.30	ç	Payee address; City; Stat 9601 S Meridian Blvd Englewood, CO 80112	e; Zip Co	de				
8	PURPOSE OF EXPENDITURE		 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Television subscription for political apartment maintained in Austin 						
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						Office held			
	Date 05/11/2023		Payee name Sling TV						
	Amount (\$) \$43.30	ç	Payee address; City; Stat 9601 S Meridian Blvd Englewood, CO 80112	e; Zip Co	de				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so	chedule)	X Check if Austin	, тх, Ibso	de of Texas. Complete Schedule T. officeholder living expense cription for political apartment ustin		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	Office sought Office held				
	Date	F	Payee name						
	06/12/2023		Sling TV						
	Amount (\$) \$43.30		Payee address; City; State 9601 S Meridian Blvd	e; Zip Co	de				
		E	Englewood, CO 80112						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so FeeS	chedule)	X Check if Austin	, тх, Ibso	de of Texas. Complete Schedule T. , officeholder living expense Cription for political apartment Justin		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Gift/Awards/Memorials E nmittee Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2				· · · · · ·	3	Filer ID (Ethics Commission Filers)				
-	Sch: 24/27 Rpt: 27/33	2	Lambert, Standard D. (The H	Honorable))			00080253				
4	Date	5	Payee name									
	05/23/2023		Tecovas									
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le						
	\$750.00		1500 South Congress									
			Austin, TX 78704									
8	PURPOSE					(b) Description						
ľ	OF	(()	Category (See Categories listed at the Gift/Awards/Memorials Expe		iedule)		outs	side of Texas. Complete Schedule T.				
	EXPENDITURE		Gill/Awalus/Memorials Expe	ense				ζ, officeholder living expense				
						Staff gifts						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Dffice soug	ht		Office held				
	Date		Payee name									
	05/25/2023		Tecovas									
	Amount (\$)		Payee address; City;	Stato [.]	; Zip Coo	10						
	.,			State,	, zip cot	ie						
	\$250.00		1500 South Congress									
			Austin, TX 78704									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the Gift/Awards/Memorials Expe		edule)			side of Texas. Complete Schedule T. <, officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Office soug	ht		Office held				
	Date		Payee name									
	02/19/2023		Texas House Republican Ca	aucus								
	Amount (\$)		Payee address; City;		; Zip Coo	ام						
	\$1,000.00		P.O. Box 13305	State,	, zip cot							
	φ1,000.00		1.0. D0x 13303									
			Austin, TX 78711									
	PURPOSE	(a)	Category (See Categories listed at the	e top of this sch	edule)	(b) Description						
	OF EXPENDITURE		Fees					side of Texas. Complete Schedule T.				
								<, officeholder living expense				
						Annual camp	aig	gn membership dues				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Office soug	ht		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense hittee Legal Services The Instruction Guide explains	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 F				3	Filer ID (Ethics Commission Filers)				
_	Sch: 25/27 Rpt: 28/33	L	ambert, Standard D. (The Honorable)			00080253				
4	Date 01/01/2023		Payee name Vertheim, Robyn (Mrs.)								
6	Amount (\$) \$2,000.00	6	Payee address; City; State 550 Cynthia Ct. Abilene, TX 79602	e; Zip Coo	le						
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Campaign contract labor						officeholder living expense					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ht		Office held				
	Date	P	Payee name								
	02/01/2023	V	Wertheim, Robyn (Mrs.)								
	Amount (\$) \$2,000.00		Payee address; City; State 550 Cynthia Ct.	e; Zip Coo	le						
		A	Abilene, TX 79602								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Salaries/Wages/Contract Labor	hedule)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense act labor				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ht		Office held				
	Date	F	Payee name								
	03/01/2023	V	Vertheim, Robyn (Mrs.)								
	Amount (\$) \$500.00		Payee address; City; State 550 Cynthia Ct.	e; Zip Coo	le						
		A	\bilene, TX 79602								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Salaries/Wages/Contract Labor	hedule)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense act labor				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ht		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2 F	· · · ·		·	3	Filer ID (Ethics Commission Filers)		
_	Sch: 26/27 Rpt: 29/33	Li	ambert, Standard D. (The Honorable))			00080253		
4	Date 03/21/2023		ayee name Vertheim, Robyn (Mrs.)						
6	Amount (\$) \$1,000.00	6!	ayee address; City; State; 50 Cynthia Ct. bilene, TX 79602	; Zip Coo	le				
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Campaign contract labor						, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name C	Office soug	Iht		Office held		
	Date	P	ayee name						
	04/01/2023	N N	Vertheim, Robyn (Mrs.)						
	Amount (\$) \$500.00	6	50 Cynthia Ct.	; Zip Coo	le				
	PURPOSE OF EXPENDITURE	(a) C	bilene, TX 79602 ategory (See Categories listed at the top of this sch alaries/Wages/Contract Labor	iedule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense act labor		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name C	Office sou	Jht		Office held		
	Date	P	ayee name						
	05/01/2023	N N	Vertheim, Robyn (Mrs.)						
	Amount (\$) \$500.00		ayee address; City; State; 50 Cynthia Ct.	; Zip Coo	le				
		A	bilene, TX 79602						
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the top of this sch alaries/Wages/Contract Labor	iedule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense act labor		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name C	Office sou	Jht		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense y - Gitt/Awards/Memorials Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	ILER NAME			3 Filer ID (Ethics Commission Filers)				
	Sch: 27/27 Rpt: 30/33	ambert, Standard D. (The Honorable)		00080253				
4	Date	ayee name							
	06/01/2023	/ertheim, Robyn (Mrs.)						
6	Amount (\$) \$500.00	ayee address; City; 50 Cynthia Ct. bilene, TX 79602	State; Zip	Code					
8	PURPOSE OF EXPENDITURE	DF Salaries/Wages/Contract Labor							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	ndidate/Officeholder nan	ne Office s	bught	Office held				
	Date	ayee name							
	05/29/2023	/ertheim, Robyn (Mrs.)						
	Amount (\$) \$2,000.00	ayee address; City; 50 Cynthia Ct. bilene, TX 79602	State; Zip	Code					
	PURPOSE OF EXPENDITURE	ategory (See Categories list alaries/Wages/Contra			el outside of Texas. Complete Schedule T. in, TX, officeholder living expense contract labor				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	ndidate/Officeholder nan	ne Office s	bught	Office held				

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ove Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing Ex	syment/Reinbursement Solicitation/Fundraising Expense rhead/Rental Expense Transportation Equipment & Related Expense pense Travel in District ges/Contract Labor OTHER (enter a category not listed above)						
1	Total pages Schedule G: Sch: 1/1 Rpt: 31/33	2 FILER NAME Lambert, Standard D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080253						
4	Date 03/16/2023	5 Payee name Apple.com	i						
6	Amount (\$) \$129.89 X Reimbursement from political contributions intended	 7 Payee address; City; State; Zip Co One Apple Park Way Cupertino, CA 95014 	de						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Annual subscription for campaign office online storage						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held						
	Date 03/16/2023	Payee name Chick-Fil-A							
	Amount (\$) \$34.68 X Reimbursement from political contributions intended	Payee address; City; State; Zip Co 503 W Martin Luther King Jr. Blvd Austin, TX 78701	de						
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense OH breakfast meeting						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held						

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

SCHEDULE K

The Instr	The Instruction Guide explains how to complete this form. 1 Total page Sch: 1/2								
2 FILER NAM	ίE	D (Ethics Commission	Filers)						
	Lambert, Standard D. (The Honorable)0008025Date5Name of person from whom amount is received8								
4 Date		Name of person from whom amount is received			8 Amount (\$)	÷=4.00			
05/22/2023	_	Bhojani for Texas				\$51.08			
	6	Address of person from whom amount is received; City; State; Zip Code							
		Irving, TX 75063							
	7	Purpose for which amount is received Check if p	ooliti	ical cont	tribution returned to filer				
		Reimbursement for committee chair gift							
Date		Name of person from whom amount is received			Amount (\$)				
05/29/2023	3	Frederick Frazier Campaign				\$51.03			
		Address of person from whom amount is received; City; State; Zip Code							
		McKinney, TX 75070							
	\vdash		ooliti	ical cont	I tribution returned to filer				
		Reimbursement for committee chair gift							
Date	╈	Name of person from whom amount is received			Amount (\$)				
05/16/2023	3	Gary Wayne VanDeaver Campaign				\$51.03			
		Address of person from whom amount is received; City; State; Zip Code							
		New Boston, TX 75570							
	\vdash	<u> </u>	noliti	ical cont	tribution returned to filer				
		Reimbursement for committee chair gift	50	10ui 00					
Date	╈	Name of person from whom amount is received			Amount (\$)				
05/29/2023	3	Hubert Vo Campaign				\$51.03			
		Address of person from whom amount is received; City; State; Zip Code							
		Houston TV 77072							
	┝	Houston, TX 77072 Purpose for which amount is received Check if g	ooliti	ical cont	tribution returned to filer				
		Reimbursement for committee chair gift	JUIL						
Date	┿	Name of person from whom amount is received			Amount (\$)				
05/16/2023	3	John Bryant Campaign			, une a (+,	\$51.09			
		Address of person from whom amount is received; City; State; Zip Code							
	⊢	Dallas, TX 75214							
		Purpose for which amount is received Check if p Reimbursement for committee chair gift	oolit	ical cont	tribution returned to filer				

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

SCHEDULE K

	The Instru		ages Schedule K: /2 Rpt: 33/33			
2	FILER NAME				(Ethics Commission F	ilers)
	Lambert, Sta	andard D. (The Honorable)	00802	253		
4	Date	5 Name of person from whom amount is received			8 Amount (\$)	
	05/23/2023	Mihaela Plesa for Texas				\$51.03
		6 Address of person from whom amount is received; City; State; Zip Code				
		Dallas, TX 75248				
		7 Purpose for which amount is received Check if p	olitical	l contri	bution returned to filer	
		Reimbursement for committee chair gift				
	Date	Name of person from whom amount is received			Amount (\$)	
	05/15/2023	Terri Leo Wilson Campaign				\$51.03
		Address of person from whom amount is received; City; State; Zip Code				
		Galveston, TX 77554				
		Purpose for which amount is received Check if p	olitical	l contri	bution returned to filer	
		Reimbursement for committee chair gift				