CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruct	ion Guide explains how to comp	lete this form.	1 Filer ID (Ethics Comm		2 Total pages f	
			0006936	7		41
3 CANDIDATE / OFFICEHOLDE	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
NAME	The Honorable	Gary W.			Date Received	
					ELECTRONIC	ALLY FILED
	 NICKNAME	LAST		SUFFIX	07/14/2023	
	NICRNAME	VanDeaver		JUFFIX	0.72 // 2020	
4 CANDIDATE / OFFICEHOLDE	ADDRESS / PO BOX; AP	T / SUITE #; CI	TY;	ZIP CODE	Date Hand-delivered	or Date Postmarked
MAILING	PO Box 866					
ADDRESS					Receipt #	Amount
Change of Addre	New Boston, TX 75570				Date Processed	
					Date Processed	
					Date Imaged	
					Date imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER	Mr.	Joseph M.				
NAME		oosepii in.				
	NICKNAME	LAST Rose		SUFFIX		
		RUSE				
					·	
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO	J BOX PLEASE);	AP	PT / SUITE #; CITY	; 51	ATE; ZIP CODE
ADDRESS	211 County Road 1420					
(Residence or Busine						
	Bogata, TX 75417					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION			
TREASURER	(903) 573-5175		EXTENSION			
PHONE	(903) 573-5175					
8 REPORT						
TYPE	January 15	30th day befor	re election	Runoff	15th day after ca	ampaign treasurer
				L	appointment (of	ficeholder only)
	X July 15	8th day before	e election	Exceeded modified reporting limit	Final Report (At	tach C/OH-FR)
9 PERIOD COVERED	Month Day Year			Month Day		
COVERED	01/01/2023	Т	HROUGH	06/30/20	23	
		i				
10 ELECTION	ELECTION DATE			ELECTION TYPE	<u> </u>	
	Month Day Year		Primary	Runoff	Other	
			General	Special		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGH	T (if known)	
	State Representative Dis	trict 1		State Represen	tative District 1	
				1		
		60	TO PAGE 2			
Forms provided by	/ Texas Ethics Commission	www.e	thics.state.tx.u	ls	Vers	ion V3.5.1.a18ea2ca

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 41

13 C / OH NAME	VanDeaver, Gary W.	(The Honorable)	14 Filer ID 00069367	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendi <i>These expenditures may have been made withou</i> d officeholders are required to report this information	t the candidate's or offic	eholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRE	ESS		
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS (OTHER TH/ ES OF LOANS, OR CONTRIBUTIONS MADE ELI		\$	0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	IS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITIC	CAL EXPENDITURES		\$	22,925.16
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	CAL CONTRIBUTIONS MAINTAINED AS OF THE ERIOD	LAST DAY OF THE	\$	196,521.09
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCI OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS A	S OF THE LAST DAY	\$	0.00
17 AFFIDAVIT					
		l swear, or affirm, under pena true and correct and includes under Title 15, Election Code.	all information required	ccompanying to be reporte	report is d by me
		The Honor	able Gary W. VanDe	aver	
		Signature o	of Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
		aid	, this the		day
ot	, 20, to c	ertify which, witness my hand and seal of office.			
Signature of offi	cer administering	Printed name of officer administering	Title of office	er administeri	ing oath
Forms provided by Te	exas Ethics Commission	n www.ethics.state.tx.us		Version V3	3.5.1.a18ea2ca

SUBTOTALS - C/OH	C	FORM C/OH OVER SHEET PG 3 3 of 41
18 FILER NAME VanDeaver, Gary W. (The Honorable)	19 Filer ID 00069367	(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 CONTRIBUTION	S	\$ 22,925.16
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

			EXPENDITURE CATEGOR	RIES FOF	R BC	DX 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	rhead pense (pens /ages	nyment/Reimbursement 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 F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)			
	Sch: 1/38 Rpt: 4/41		VanDeaver, Gary W. (The Honorable) 00069367									
4	Date	5	Payee name									
	01/10/2023		Amazon Company									
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de							
	\$523.08		280 Wa St									
			Seattle, WA 98905									
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	odulo)	(b)	Description						
	OF	ľ	Office Overhead/Rental Expense	euule)	• •		outsi	de of Texas. Compl	ete Schedule T.			
	EXPENDITURE							officeholder living e	xpense			
						Office Supplie	es					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght			Office held	d			
	Date		Payee name									
	01/11/2023											
	Amount (\$)		Payee address; City; State;	Zip Co	de							
	\$20.26		280 Wa St									
			Seattle, WA 98905									
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description						
	OF EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Comple officeholder living e				
						Office Supplie		oncenoider living e	expense			
							00					
_	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	aht			Office held	d			
	expenditure to benefit C/OI				9				-			
-	Date		Payee name									
	04/05/2023		Austin Land & Cattle									
-	Amount (\$)		Payee address; City; State;	Zip Co	de							
	\$255.68		1205 N Lamar Blvd	p 00								
			Austin, TX 78703									
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description						
	EXPENDITURE		Food/Beverage Expense					de of Texas. Comple				
						Meal with Co		officeholder living e	expense			
-	Complete ONLY if direct		Candidate/Officeholder name	Office sou	aht			Office held	h			
	expenditure to benefit C/OI			-mcc 300	gin			Chice Hell	u			

				EXPENDIT	URE CATEGOR	RIES FOR	BOX 8(a	l)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Comm	F F C nittee L	Event Expense Tees Food/Beverage Ex Bift/Awards/Memo Legal Services The Instructior		Office Ove Polling Exp Printing Ex Salaries/W	oense ages/Contrac	Expense ct Labor		Transportation E Travel in District Travel Out of Dis		
1	Total pages Schedule F1:	2 F	ILER NAME						3	Filer ID	(Ethics Commissi	on Filers)
	Sch: 2/38 Rpt: 5/41		VanDeaver, Gary W. (The Honorable) 00069367									
4	Date 02/13/2023		ayee name Best Buy									
6	Amount (\$) \$897.70	9	ayee addres 607 Resea Austin, TX 7	ch Blvd	State;	; Zip Co	le					
8	PURPOSE OF EXPENDITURE			e Categories listed ead/Rental	at the top of this sch Expense	edule)	Ch	neck if travel	n, TX,	de of Texas. Com officeholder living	plete Schedule T. J expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Offic	eholder name	· C	Office sou	Iht			Office h	eld	
	Date	P	ayee name									
	03/21/2023	В	Blossom Flo	wers								
	Amount (\$) \$100.23	8	ayee addres 309 Laural Sun Valley, (Canyon Blv		; Zip Co	le					
	PURPOSE OF EXPENDITURE			e Categories listed Memorials E	at the top of this sch XPENSE	edule)		neck if travel neck if Austin		de of Texas. Com officeholder living	plete Schedule T. g expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Offic	eholder name	e C	Office sou	lht			Office h	eld	
	Date	P	ayee name									
	05/30/2023	c	Capital Gifts									
	Amount (\$) \$51.96	1	ayee addres 400 N Conç		State;	; Zip Co	le					
		A	ustin, TX 7	8701								
	PURPOSE OF EXPENDITURE			e Categories listed Memorials E	at the top of this sch XPENSE	edule)		neck if travel neck if Austin		de of Texas. Com officeholder living	plete Schedule T. J expense	
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Offic	eholder name	· C	Dffice sou	Iht			Office h	eld	

		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 FILER NAME 3	B Filer ID (Ethics Commission Filers)
	Sch: 3/38 Rpt: 6/41	VanDeaver, Gary W. (The Honorable)	00069367
4	Date 05/30/2023	5 Payee name Capital Gifts	
6	Amount (\$) \$20.51	7 Payee address; City; State; Zip Code 1400 N Congress Austin, TX 78701	
8	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. 'X, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	02/27/2023	Capital Grill	
	Amount (\$) \$242.43	Payee address; City; State; Zip Code 117 W 4th St	
	PURPOSE OF EXPENDITURE		ttside of Texas. Complete Schedule T. "X, officeholder living expense Stituants
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/15/2023	Chinatown Greyst	
	Amount (\$) \$75.67	Payee address; City; State; Zip Code 2712 Bee Cave Rd	
		Austin, TX 78746	
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense Stituants
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

				EXPENDITU	RE CATEGO	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Co	mmittee	Event Expense Fees Food/Beverage Expe Gift/Awards/Memoria Legal Services The Instruction C	nse Is Expense		Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 4/38 Rpt: 7/41		VanDeave	r, Gary W. (The	Honorable)				00069367	
4	Date	5	Payee name	2				•		
	04/14/2023			ofessional Wom	en					
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Cod	e			
	\$25.00		225 W Cro	ckett						
			DeKalb, T>	(75559						
8	PURPOSE	(a)	Category (See Categories listed at	the ten of this sch	odulo) (b) Description			
	OF	` `		ns/Donations M		(equie)		outs	ide of Texas. Com	plete Schedule T.
	EXPENDITURE			Officeholder/Pc		nittee	Check if Austir	ı, TX	, officeholder living	expense
							Donation			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	(Office soug	ht		Office he	eld
	Date		Payee name	2						
	01/10/2023		EB 2023 T	exas						
	Amount (\$)		Payee addre	ess; City;	State	; Zip Cod	e			
	\$20.00		610 S 1st S	-		, , ,				
			Austin, TX	78748						
	PURPOSE OF EXPENDITURE	(a)	Category (s	See Categories listed at	the top of this sch	nedule) (ı, TX	ide of Texas. Com , officeholder living ent	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Off	ïceholder name	(Office soug	ht		Office he	eld
-	Date		Payee name							
	06/16/2023		EB Texarka							
-	Amount (\$)	-	Payee addre	ess; City;	State	; Zip Cod	e			
	\$163.76		819 N State		Otato	, <u>_</u> , p eea				
	\$100.10		01010000							
			Texarkana	, TX 75501						
	PURPOSE OF	(a)		See Categories listed at		nedule) (b) Description			
	EXPENDITURE			ns/Donations M					ide of Texas. Com	
			Candidate/	Officeholder/Pc	litical Comm	nittee			, officeholder living	
							Contribution	ιΟ	i exalkalla S	esquicentenial
	Complete ONUV 5 diversit		Condidate 101	ioobolder r		Office	at		<u> </u>	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		_andidate/Of	iceholder name	(Office soug	ni.		Office he	210

		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 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: 5/38 Rpt: 8/41	VanDeaver, Gary W. (The Honorable) 00069367									
4	Date 02/07/2023	Payee name Eddie Finch Apt									
6	Amount (\$) \$8,000.00	Payee address; City; State; Zip Code 1122 Colorado St Austin, TX 78768									
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense P aSE								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	05/04/2023	Eddie V's									
	Amount (\$) \$327.12	Payee address;City;State; Zip Code301 E 5th StreetAustin, TX 78701									
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense nstituants								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	06/08/2023	Eddie V's									
	Amount (\$) \$179.39	Payee address;City;State;Zip Code301 E 5th Street									
		Austin, TX 78701									
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense nstituants								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

				EXPENDITUR	RE CATEGOR	RIES FOR	вс	DX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Jinting/Banking Fees Office Overhead/Rental Expense ulting Expense Food/Beverage Expense Polling Expense ibutions/ Donations Made By - Gift/Awards/Memorials Expense Printing Expense indidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor								Solicitation/Fund Transportation E Travel in District Travel Out of Dis OTHER (enter a	quipment	& Related Expense
1	Total pages Schedule F1:	12									(Ethics	Commission Filers)
T	Sch: 6/38 Rpt: 9/41		FILER NAME 3 Filer ID (Ethics Commission VanDeaver, Gary W. (The Honorable) 00069367									
4	Date	5	Payee name									
	04/17/2023		Elaine Arnold									
6	Amount (\$) \$100.00		Payee address; PO Box 1481	City;	State;	; Zip Co	de					
			Texarkana, TX	75504								
8	PURPOSE OF EXPENDITURE		Category _{(See C} Office Overhea			nedule)	(b)			de of Texas. Com officeholder living		dule T.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officel	older name	C	Office sou	ght			Office he	eld	
	Date		Payee name									
	06/27/2023		Elizabeth Coc	kerham								
	Amount (\$)		Payee address;	City;	State;	; Zip Co	de					
	\$500.00		PO Box Austin, TX 787	68								
	PURPOSE OF EXPENDITURE		Category _{(See C} Salaries/Wage			iedule)	(b)		, TX,	de of Texas. Com officeholder living		dule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officel	older name	C	Office sou	ght			Office he	eld	
	Date		Payee name									
	03/13/2023		Encore Softwa	ire								
	Amount (\$) \$49.99		Payee address; 384 Bel Marin	City; Keys Blvd	State;	; Zip Co	de					
			Novato, CA 94	949								
	PURPOSE OF EXPENDITURE		Category (See C Office Overhea			nedule)	(b)			de of Texas. Com officeholder living		dule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officel	older name	C	Office sou	ght			Office he	eld	

				EXPENDITU	JRE CATEGOR	RIES FOR	вс)X 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		F F C nmittee L	vent Expense ees ood/Beverage Exp Sift/Awards/Memori egal Services Fhe Instruction		Office Over Polling Exp Printing Ex Salaries/W	rheac iense pense ages	e /Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 7/38 Rpt: 10/41		VanDeaver,								
4	Date 01/13/2023		Payee name Google Fibeı								
6	Amount (\$) \$100.00		Payee address POB 11245 Mt View, CA		State;	; Zip Coo	de				
8	PURPOSE OF EXPENDITURE		Category _{(See} Office Overh		at the top of this sch EXPENSE	edule)	(b)		, TX,	de of Texas. Com officeholder living	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offic	eholder name	C	Office sou	ght			Office he	eld
	Date		Payee name								
	02/13/2023		Google Fiber								
	Amount (\$) \$100.00		Payee address POB 11245	s; City;	State;	; Zip Coo	de				
			Mt View, CA	98308							
	PURPOSE OF EXPENDITURE		Category _{(See} Office Overh		at the top of this sch EXPENSE	edule)	(b)		, TX,	de of Texas. Com officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offic	eholder name	C	Office sou	ght			Office he	eld
	Date		Payee name								
	03/13/2023		Google Fiber								
	Amount (\$) \$100.00		Payee address POB 11245	s; City;	State;	; Zip Coo	de				
			Mt View, CA	98308							
	PURPOSE OF EXPENDITURE		Category _{(See} Office Overh		at the top of this sch EXPENSE	edule)	(b)		, TX,	de of Texas. Com officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offic	eholder name	C	Dffice sou	ght			Office he	eld

				EXPENDITUR	E CATEGOF	RIES FOR	вс)X 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Loan Repayment/Neimbursement Solicitation/Fundraising E Fees Office Overhead/Rental Expense Transportation Equipmen Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel out of District Legal Services Salaries/Wages/Contract Labor OTHER (enter a category The Instruction Guide explains how to complete this form.							quipment a	& Related Expense	
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·								Filer ID	(Ethics	Commission Filers)
1	Sch: 8/38 Rpt: 11/41		anDeaver, G	ary W. (The H	Ionorable)				-	00069367	(Ethics	
4	Date	5 P	ayee name									
	04/13/2023	G	oogle Fiber									
6	Amount (\$) \$100.00	Р	ayee address; OB 11245 It View, CA 9	City;	State;	; Zip Coo	de					
_												
8	PURPOSE OF EXPENDITURE		ategory _{(See C} office Overhea			iedule)	(b)		, TX,	de of Texas. Com officeholder living		dule T.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeh	older name	C	Office soug	ght			Office he	eld	
	Date	P	ayee name									
	05/15/2023	G	oogle Fiber									
	Amount (\$)	P	ayee address;	City;	State;	; Zip Coo	de					
	\$100.00	М	OB 11245 It View, CA 9									
	PURPOSE OF EXPENDITURE		ategory _{(See C} office Overhea			iedule)	(b)		, TX,	de of Texas. Com officeholder living		dule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeh	older name	C	Office soug	ght			Office he	eld	
	Date	P	ayee name									
	06/13/2023	G	oogle Fiber									
	Amount (\$) \$100.00		ayee address; OB 11245	City;	State;	; Zip Coo	de					
		M	It View, CA 9	3308								
	PURPOSE OF EXPENDITURE		ategory _{(See C} office Overhea			edule)	(b)		, TX,	de of Texas. Com officeholder livinç		dule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeh	older name	C	Office soug	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 Loan Repayment/Reimbursemu Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	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 Comm									
-	Sch: 9/38 Rpt: 12/41	VanDeaver, Gary W. (The Honorable) 00069367									
4	Date 01/03/2023	Payee name Hill Country Springs									
6	Amount (\$) \$37.81	Payee address; City; State; Zip Code 10019 S Interstate 35 Service Rd Austin, TX 78747									
8	PURPOSE OF EXPENDITURE		avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	02/03/2023	Hill Country Springs									
	Amount (\$) \$47.32	Payee address; City; State; Zip Code 10019 S Interstate 35 Service Rd Austin, TX 78747									
	PURPOSE OF EXPENDITURE		avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	03/02/2023	Hill Country Springs									
	Amount (\$) \$32.82	Payee address;City;State;ZipCode10019 S Interstate 35 Service Rd									
		Austin, TX 78747									
	PURPOSE OF EXPENDITURE		avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense								
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

		EXPENDITURE CATEGORIES FO	OR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan R Fees Office C Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printing Legal Services Salaries The Instruction Guide explains how to o	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: 10/38 Rpt: 13/41	VanDeaver, Gary W. (The Honorable) 00069367									
4	Date 04/04/2023	Payee name Hill Country Springs									
6	Amount (\$) \$42.07	Payee address; City; State; Zip Code 10019 S Interstate 35 Service Rd Austin, TX 78747									
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 Office Supplies 									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office so	ught	Office held							
	Date	Payee name									
	05/02/2023	Hill Country Springs									
	Amount (\$) \$42.07	Payee address; City; State; Zip C .0019 S Interstate 35 Service Rd Austin, TX 78747	ode								
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		outside of Texas. Complete Schedule T. , TX, officeholder living expense ES							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office so	ught	Office held							
	Date	Payee name									
	06/02/2023	Hill Country Springs									
	Amount (\$) \$82.06	Payee address; City; State; Zip 0 .0019 S Interstate 35 Service Rd	ode								
		Austin, TX 78747	1								
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		outside of Texas. Complete Schedule T. , TX, officeholder living expense ES							
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder name Office so	ught	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 Gift/Awards/Mer mittee Legal Services	Expense	Loan Repaym Office Overhe Polling Expen Printing Expen Salaries/Wage	Tra Tra Tra	ansportation E avel in District avel Out of Dis	raising Expense quipment & Related Expense trict category not listed above)				
1	Total pages Schedule F1:	-ILER NAME	er ID	(Ethics Commission Filers)							
	Sch: 11/38 Rpt: 14/41	√anDeaver, Gary W. (⁻	The Honorable)			00	069367				
4	Date 04/25/2023	Payee name Hilton									
6	Amount (\$) \$291.41	^D ayee address; City; 1600 Lamar Houston, TX 77005	State;	Zip Code							
8	PURPOSE OF EXPENDITURE	Category (See Categories lis Travel Out of District	ed at the top of this sche	edule) (b	Description Check if travel Check if Austin Check if Austin Lodging			plete Schedule T. expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder nar	ne O	office sough	:		Office he	eld			
	Date	^D ayee name									
	02/01/2023	Hobby Lobby									
	Amount (\$) \$84.95	Payee address; City; 2315 Richmond Rd	State;	Zip Code							
	PURPOSE OF EXPENDITURE	Texarkana, TX 75503 Category _{(See Categories lis} Office Overhead/Renta		edule) (b	Description Check if travel Check if Austin Office Suppli	ı, TX, offic		plete Schedule T. expense			
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder nar	ne O	office sough	I		Office he	eld			
	Date	Payee name									
	04/17/2023	Hobby Lobby									
	Amount (\$) \$271.82	Payee address; City; 2315 Richmond Rd	State;	Zip Code							
		Austin, TX 75503		i							
	PURPOSE OF EXPENDITURE	Category (See Categories lis Office Overhead/Renta		edule) (b	Description Check if travel Check if Austin Office Suppli	ı, TX, offic		plete Schedule T. expense			
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder nar	ne O	office sough	:		Office he	eld			

				EXPENDI	TURE CATEGO	RIES FOF	BC	DX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Event Expense Fees Food/Beverage E Gift/Awards/Mem Legal Services The Instructio		Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pens ages	e /Contract Labor		Solicitation/Fund Transportation E Travel in District Travel Out of Dis OTHER (enter a	quipment &	& Related Expense
1	Total pages Schedule F1:	_			in ourde organis				3	Filer ID	/⊏thics	Commission Filers)
T	Sch: 12/38 Rpt: 15/41			Gary W. (T	he Honorable)				3	00069367	(Etinos	
4	Date	5 F	ayee name									
	05/01/2023	ŀ	Hobby Lobb									
6	Amount (\$) \$23.80	2	Payee addres 2315 Richm Fexarkana, F	ond Rd	State	e; Zip Co	de					
8	PURPOSE	(a) (Category (Se	e Categories liste	ed at the top of this sch	hedule)	(b)	Description				
	OF EXPENDITURE		Office Overh			incutic)		Check if travel	ı, TX,	de of Texas. Com officeholder living		dule T.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offic	eholder nam	ie (Office sou	ght			Office he	eld	
	Date	F	ayee name									
	05/31/2023	F	lobby Lobb	у								
	Amount (\$)	F	ayee addres	s; City;	State	; Zip Co	de					
	\$82.22		2315 Richm Austin, TX 7									
	PURPOSE OF EXPENDITURE		Category _{(Se} Office Overh		ed at the top of this sch Expense	hedule)	(b)		ı, TX,	de of Texas. Com officeholder living		dule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Offic	eholder nam	ie (Office sou	ght			Office he	eld	
	Date	F	ayee name	-						-		
	06/15/2023	ト	lobby Lobb	у								
	Amount (\$) \$353.43		Payee addres 2315 Richm		State	e; Zip Co	de					
		г	exarkana,	TX 75503								
	PURPOSE OF EXPENDITURE		Category _{(Se} Office Overh	-	ed at the top of this sch Expense	hedule)	(b)		ı, ТХ,	de of Texas. Com officeholder living		dule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Offic	eholder nam	le d	Office sou	ght			Office he	eld	

			EXPENDITURE CA	ATEGOR	RIES FOR	8 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 Expen Inmittee Legal Services The Instruction Guide e		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									
-	Sch: 13/38 Rpt: 16/41	-	VanDeaver, Gary W. (The Hond	orable)				Filer ID (Ethics Commission Filers) 00069367			
4	Date 03/28/2023	5	Payee name In 6th Street								
		_		<u> </u>	7. 0						
6	Amount (\$) \$95.00		Payee address; City; State; Zip Code E 6th St Austin, TX 78701								
8	PURPOSE	(a)		of this sch	edulo)	(b) Description					
-	OF EXPENDITURE	¥-3	 (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 Meal with Constituants 								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Office sou	ght		Office held			
	Date		Payee name								
	05/02/2023		In 6th Street								
	Amount (\$)		Payee address; City;	State;	; Zip Co	de					
	\$239.63		E 6th St Austin, TX 78701								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Food/Beverage Expense	of this sch	edule)		n, TX	side of Texas. Complete Schedule T. 4, officeholder living expense tituants			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held			
	Date		Payee name								
	06/22/2023		Intelius								
	Amount (\$) \$1.01		Payee address; City; 501 W Broadway St	State;	; Zip Coo	de					
			San Diego, CA 92101								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Office Overhead/Rental Expens		edule)			side of Texas. Complete Schedule T. K, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		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	Gift/Award Imittee Legal Serv	rage Expense s/Memorials Expense	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	FILER NAME		Filer ID (Ethics Commission Filers)							
	Sch: 14/38 Rpt: 17/41			V. (The Honorable)	00069367							
4	Date 06/28/2023		Payee name Intelius									
6	Amount (\$) \$37.26		 7 Payee address; City; State; Zip Code 501 W Broadway St San Diego, CA 92101 									
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 Software										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder	name C	Office soug	ght		Office held				
	Date		Payee name									
	04/25/2023		Lones Brooklyn									
	Amount (\$) \$389.05	I	Payee address; C Street	City; State;	Zip Coo	de						
			Brooklyn, NY 1123	4								
	PURPOSE OF EXPENDITURE		Category _{(See Categori} Gift/Awards/Memor	es listed at the top of this sche ials Expense	edule)		η, TX,	ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder	name C	Office soug	ght		Office held				
	Date		Payee name									
	01/17/2023		Lyft									
	Amount (\$) \$9.73		Payee address; 0 E 7th St	City; State;	Zip Coo	de						
			Austin, TX 78701									
	PURPOSE OF EXPENDITURE		Category _{(See Categori} Travel Out of Distri	es listed at the top of this sche ct	edule)		η, TX,	ide of Texas. Complete Schedule T. , officeholder living expense tation				
	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:		Filer ID (Ethics Commission Filers)							
	Sch: 15/38 Rpt: 18/41	VanDeaver, Gary W. (The Honorable)	00069367							
4	Date 01/17/2023	5 Payee name Lyft								
6	Amount (\$) \$9.64	 Payee address; City; State; Zip Code E 7th St Austin, TX 78701 								
8	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense rtation							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	01/26/2023	Lyft								
	Amount (\$) \$17.82	Payee address; City; State; Zip Code E 7th St Austin, TX 78701								
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense rtation							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	01/26/2023	Lyft								
	Amount (\$) \$9.86	Payee address; City; State; Zip Code E 7th St								
		Austin, TX 78701								
	PURPOSE OF EXPENDITURE		iside of Texas. Complete Schedule T. X, officeholder living expense rtation							
	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		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: 16/38 Rpt: 19/41	VanDeaver, Gary W. (The Honorable)	00069367							
4	Date 02/01/2023	5 Payee name Lyft								
6	Amount (\$) \$10.94	7 Payee address; City; State; Zip Code E 7th St Austin, TX 78701								
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Austin Transportation								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	02/15/2023	Lyft								
	Amount (\$) \$12.65	Payee address; City; State; Zip Code E 7th St Austin, TX 78701								
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description	side of Texas. Complete Schedule T. K, officeholder living expense rtation							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	02/22/2023	Lyft								
	Amount (\$) \$10.95	Payee address; City; State; Zip Code E 7th St								
		Austin, TX 78701								
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. K, officeholder living expense rtation							
	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		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: 17/38 Rpt: 20/41	VanDeaver, Gary W. (The Honorable)	00069367							
4	Date 02/24/2023	5 Payee name Lyft								
6	Amount (\$) \$9.57	7 Payee address; City; State; Zip Code E 7th St Austin, TX 78701								
8	PURPOSE OF EXPENDITURE	OF Travel Out of District								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	02/27/2023	Lyft								
	Amount (\$) \$8.02	Payee address; City; State; Zip Code E 7th St Austin, TX 78701								
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. K. officeholder living expense rtation							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	03/08/2023	Lyft								
	Amount (\$) \$20.11	Payee address; City; State; Zip Code E 7th St								
		Austin, TX 78701								
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. K, officeholder living expense rtation							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

				EXPEN	DITURE CATE	GORIES FO	R BC	OX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			egal Services	e Expense emorials Expense	Office Ov Polling Ex Printing E Salaries/	erhea kpense xpens Nages	se s/Contract Labor		Solicitation/Fund Transportation E Travel in Districi Travel Out of Di OTHER (enter a	Equipment & R t strict	elated Expense
1	Total pages Schedule F1:	2					•		3	Filer ID	(Ethics Co	mmission Filers)
1	Sch: 18/38 Rpt: 21/41			nDeaver, Gary W. (The Honorable)						00069367	(2003-00	
4	Date	5	Payee name									
	03/08/2023		Lyft									
6	Amount (\$)	7	Payee address	s; City	; St	ate; Zip Co	ode					
	\$8.69		E 7th St									
			Austin, TX 78	8701								
8	PURPOSE	(a)	Category (See	e Categories li	sted at the top of this	s schedule)	(b)	Description				
	OF EXPENDITURE		Travel Out of	f District						de of Texas. Con	•	е Т.
							1			officeholder livin	g expense	
							1	Austin Trans	port	lation		
L							Ļ					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder na	me	Office sou	ught			Office h	eld	
	Date		Payee name									
	03/09/2023		Lyft									
	Amount (\$)		Payee address	s; City	; St	ate; Zip Co	ode					
	\$10.99		E 7th St		-	•						
			Austin, TX 78	8701								
	PURPOSE	(a)	Category (See	e Categories li	sted at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE		Travel Out of	f District						de of Texas. Con		е Т.
										officeholder living	g expense	
								Austin Trans	μοπ	lation		
						0.0				0.45	- 1-1	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic		ine	Office sou	igni			Office h	eiu	
	Date		Payee name									
	03/15/2023		Lyft									
	Amount (\$)		Payee address	s; City	; St	ate; Zip Co	ode					
	\$48.82		E 7th St	,		•						
			-									
			Austin, TX 78	8701								
	PURPOSE	(a)			sted at the top of this	s schedule)	(b)	Description				
	OF EXPENDITURE		Travel Out of	f District						de of Texas. Con		е Т.
										officeholder livin	g expense	
								Austin Trans	port	lation		
							<u> </u>					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder na	me	Office sou	ught			Office h	eld	

	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: 19/38 Rpt: 22/41	VanDeaver, Gary W. (The Honorable)	00069367							
4	Date 03/16/2023	5 Payee name Lyft								
6	Amount (\$) \$9.57	7 Payee address; City; State; Zip Code E 7th St Austin, TX 78701								
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Austin Transportation								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	03/17/2023	Lyft								
	Amount (\$) \$9.49	Payee address; City; State; Zip Code E 7th St Austin, TX 78701								
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. 4. officeholder living expense rtation							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	03/17/2023	Lyft								
	Amount (\$) \$14.99	Payee address; City; State; Zip Code E 7th St								
		Austin, TX 78701								
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. K, officeholder living expense rtation							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							

				EXPE		CATEGOF	RIES FOF	R BC	DX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	nmittee	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor							Solicitation/Fun Transportation Travel in Distric Travel Out of D OTHER (enter	Equipment & t istrict	& Related Expense		
1	Total pages Schedule F1:	2	FILER NAME							3 Filer ID (Ethics Commission Filers)				
	Sch: 20/38 Rpt: 23/41		VanDeaver,		V. (The Ho	norable)					00069367			
4	Date 03/22/2023		Payee name Lyft											
6	Amount (\$) \$13.99		Payee addres E 7th St Austin, TX 7		Sity;	State;	Zip Co	de						
8	PURPOSE OF EXPENDITURE	Travel Out of District								dule T.				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	ceholder	name	C	Office sou	ght			Office h	eld		
	Date		Payee name											
	04/05/2023		Lyft											
	Amount (\$) \$9.57		Payee addres E 7th St	s; C	City;	State;	Zip Co	de						
			Austin, TX 7	8701										
	PURPOSE OF EXPENDITURE		Category _{(Se} Travel Out c			op of this sche	edule)	(b)		, TX,	de of Texas. Cor officeholder livin ation		dule T.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	ceholder	name	C	Office sou	ght			Office h	eld		
	Date		Payee name											
	04/05/2023		Lyft											
	Amount (\$) \$9.57		Payee addres E 7th St	is; C	City;	State;	Zip Co	de						
			Austin, TX 7	8701			i							
	PURPOSE OF EXPENDITURE		Category _{(Se} Travel Out c			op of this sche	edule)	(b)		, тх,	de of Texas. Cor officeholder livin cation	•	dule T.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	ceholder	name	C	Office sou	ght			Office h	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 Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense ommittee 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:	· · ·	3 Filer ID (Ethics Commission Filers)								
-	Sch: 21/38 Rpt: 24/41	VanDeaver, Gary W. (The Honorable)	00069367								
4	Date 04/11/2023	Payee name Lyft									
6	Amount (\$) \$9.57	7 Payee address; City; State; Zip Code E 7th St Austin, TX 78701									
8	PURPOSE OF EXPENDITURE	OF Travel Out of District									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	04/13/2023	Lyft									
	Amount (\$) \$11.72	Payee address; City; State; Zip Code E 7th St Austin, TX 78701									
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ortation								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	04/13/2023	Lyft									
	Amount (\$) \$11.99	Payee address; City; State; Zip Code E 7th St									
		Austin, TX 78701									
	PURPOSE OF EXPENDITURE	F Travel Out of District									
	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		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: 22/38 Rpt: 25/41	VanDeaver, Gary W. (The Honorable)	00069367							
4	Date 04/14/2023	5 Payee name Lyft								
6	Amount (\$) \$9.57	7 Payee address; City; State; Zip Code E 7th St Austin, TX 78701								
8	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense ortation							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	04/18/2023	Lyft								
	Amount (\$) \$10.99	Payee address; City; State; Zip Code E 7th St Austin, TX 78701								
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense prtation							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	04/21/2023	Lyft								
	Amount (\$) \$10.28	Payee address; City; State; Zip Code E 7th St								
		Austin, TX 78701								
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense ortation							
	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		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: 23/38 Rpt: 26/41	VanDeaver, Gary W. (The Honorable)	00069367							
4	Date 04/21/2023	5 Payee name Lyft								
6	Amount (\$) \$15.87	7 Payee address; City; State; Zip Code E 7th St Austin, TX 78701								
8	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense rtation							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	04/25/2023	Lyft								
	Amount (\$) \$9.57	Payee address; City; State; Zip Code E 7th St Austin, TX 78701								
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense rtation							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	04/26/2023	Lyft								
	Amount (\$) \$11.65	Payee address; City; State; Zip Code E 7th St								
		Austin, TX 78701								
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense rtation							
	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		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: 24/38 Rpt: 27/41	VanDeaver, Gary W. (The Honorable)	00069367						
4	Date 04/27/2023	5 Payee name Lyft							
6	Amount (\$) \$9.57	7 Payee address; City; State; Zip Code E 7th St Austin, TX 78701							
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Ortation						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	05/08/2023	Lyft							
	Amount (\$) \$9.57	Payee address; City; State; Zip Code E 7th St Austin, TX 78701							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Ortation						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	05/08/2023	Lyft							
	Amount (\$) \$10.13	Payee address; City; State; Zip Code E 7th St							
		Austin, TX 78701							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Ortation						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

				EXPE	NDITURE CA	TEGOF	RIES FOF	R BC	DX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Exper Fees Food/Bevera Gift/Awards/ Legal Servic	nse age Expense 'Memorials Expen	se	Loan Repa Office Ove Polling Ex Printing Ex Salaries/W	aymei rhead bense pens (ages	nt/Reimbursement d/Rental Expense e e /Contract Labor		Transportation I Travel in Distric Travel Out of Di		
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID	(Ethics Commission File	ers)
	Sch: 25/38 Rpt: 28/41		VanDeaver,		. (The Hond	orable)					00069367		
4	Date 05/08/2023		Payee name Lyft										
6	Amount (\$) \$9.57		Payee addres E 7th St Austin, TX 7		ty;	State;	Zip Co	de					
8	PURPOSE OF EXPENDITURE	(a)	Category _{(Se} Travel Out c			of this sch	edule)	(b)		, TX,	officeholder livin	nplete Schedule T. g expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	ceholder i	name	C	Office sou	ght			Office h	eld	
	Date		Payee name										
	05/16/2023		Lyft										
	Amount (\$) \$13.86		Payee addres E 7th St	s; Ci	ty;	State;	Zip Co	de					
			Austin, TX 7	8701									
	PURPOSE OF EXPENDITURE	(a)	Category _{(Se} Travel Out c			of this sch	edule)	(b)		, TX,	officeholder livin	nplete Schedule T. g expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	ceholder i	name	C	Office sou	ght			Office h	eld	
	Date		Payee name										
	05/17/2023		Lyft										
	Amount (\$) \$9.57		Payee addres E 7th St	is; Ci	ty;	State;	Zip Co	de					
			Austin, TX 7	8701									
	PURPOSE OF EXPENDITURE	(a)	Category _{(Se} Travel Out c			of this sch	edule)	(b)		, тх,	officeholder livin	nplete Schedule T. g expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	ceholder i	name	C	Office sou	ght			Office h	eld	

				EXPE	NDITURE CA	TEGOF	RIES FOF	BC	DX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expen Fees Food/Bevera Gift/Awards/ Legal Servic	se Ige Expense Memorials Expens	se	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	iymei rhead bense pens 'ages	nt/Reimbursement d/Rental Expense e e /Contract Labor		Transportation I Travel in Distric Travel Out of D		
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID	(Ethics Commission	Filers)
	Sch: 26/38 Rpt: 29/41		VanDeaver,	Gary W	. (The Honor	rable)					00069367		
4	Date 05/30/2023		Payee name Lyft										
6	Amount (\$) \$9.57		Payee addres E 7th St Austin, TX 7		ty;	State;	Zip Co	de					
8	PURPOSE OF EXPENDITURE	(a)	Category _{(Se} Travel Out o			of this sche	edule)	(b)		, TX,	officeholder livin	nplete Schedule T. Ig expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder r	name	С	Office sou	ght			Office h	eld	
	Date		Payee name										
	06/07/2023		Lyft										
	Amount (\$) \$9.57		Payee addres E 7th St		ty;	State;	Zip Co	de					
			Austin, TX 7	8701									
	PURPOSE OF EXPENDITURE	(a)	Category _{(Se} Travel Out o			f this sche	edule)	(b)		, TX,	officeholder livin	nplete Schedule T. Ig expense	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offic	eholder r	name	C	Office sou	ght			Office h	eld	
	Date		Payee name										
	02/23/2023		North Italia										
	Amount (\$) \$25.57		Payee addres 500 W 2nd S		ty;	State;	Zip Co	de					
			Austin, TX 7	8701									
	PURPOSE OF EXPENDITURE		Category _{(Se} Food/Bevera			f this sche	edule)	(b)		, TX,	officeholder livin	nplete Schedule T. Ig expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder r	name	C	Office sou	ght			Office h	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 Ex Imittee Legal Services The Instruction Guid		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contrac	Expense t Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2		•		-		3	Filer ID	(Ethics Commission Filers)
-	Sch: 27/38 Rpt: 30/41		VanDeaver, Gary W. (The Ho	onorable)					00069367	
4	Date	5	Payee name							
	03/10/2023		Office Depot							
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	le				
	\$149.55		907 W 5th Street							
			Austin, TX 78703							
_										
8	PURPOSE OF		Category (See Categories listed at the		edule)	(b) Descr				
	EXPENDITURE		Office Overhead/Rental Expe	ense					de of Texas. Comp officeholder living	
							e Supplie		onicentilider inving	expense
						Onioc	Cappin			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	C	Dffice sou	Jht			Office he	ld
	Date		Payee name							
	03/29/2023		Photographic							
				Chata	710 00					
	Amount (\$)		Payee address; City;	State;	; Zip Co	le				
	\$511.00		908 E 5th St							
			Austin, TX 78701							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the Office Overhead/Rental Expe		edule)	Che	eck if travel o		de of Texas. Comp officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	C	Dffice sou	Jht			Office he	ld
	Date	1	Payee name							
	05/02/2023		Postnet							
	Amount (\$)		Payee address; City;	State:	Zip Co	le				
	\$295.77		3571 Far West Blvd	,						
	\$200111									
			Austin, TX 78731							
	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	edule)	(b) Descr	•			
	OF EXPENDITURE		Office Overhead/Rental Expe	ense			eck if Austin,		de of Texas. Comp officeholder living	
-	Complete ONLY if direct	<u>ر</u>	andidate/Officeholder name	<u>с</u>	Office sou	ıht			Office he	Id
	expenditure to benefit C/OI		שומוטונני שוונכווטועכו וומוווכ	C C	2000 2000	, ,				

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contra	al Expense act Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2						3	Filer ID	(Ethics Commission Filers)
1	Sch: 28/38 Rpt: 31/41		VanDeaver, Gary W. (Th	e Honorable)					00069367	
4	Date	5	Payee name							
	06/16/2023		Prime Neckwear							
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	de				
	\$60.00		PO Box 10278							
			Glendale, AZ 85318							
8	PURPOSE	<u> </u>	Category (See Categories listed			(b) Desc	cription			
Ũ	OF	(~)	Gift/Awards/Memorials E		edule)	_	•	outsic	de of Texas. Com	blete Schedule T.
	EXPENDITURE			siperioe		□□c	heck if Austin,	, тх,	officeholder living	expense
						Gifts	5			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		candidate/Officeholder name	e C	Office sou	Jht			Office he	łd
	Date		Payee name							
	01/09/2023		Raymuendo Rodriquez							
	Amount (\$)	-	Payee address; City;	State:	Zip Co	le				
	\$95.74		PO Box	Olato,	, <u>Lip</u> 00					
	\$55.74		TO BOX							
			Austin, TX 78768							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed Office Overhead/Rental		edule)		heck if travel o		de of Texas. Comp officeholder living	
							ce Supplie			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	e C	Office sou	Jht			Office he	ld
	Date		Payee name							
	05/30/2023		Raymuendo Rodriquez							
	Amount (\$)		Payee address; City;	State;	; Zip Co	le				
	\$500.00		PO Box							
			Austin, TX 78768							
	PURPOSE OF	(a)	Category (See Categories listed		edule)	(b) Desc	•			
	EXPENDITURE		Salaries/Wages/Contrac	t Labor		C C		, TX,	de of Texas. Comp officeholder living	
-	Complete ONLY if direct	Ļ	andidate/Officeholder name	<u>, </u>	Office sou	ıht			Office he	ld
	expenditure to benefit C/OI			, L		jiit				iu
-										

	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: 29/38 Rpt: 32/41	VanDeaver, Gary W. (The Honorable)	00069367							
4	Date 06/01/2023	5 Payee name Ruth's Chris Steak								
6	Amount (\$) \$227.00	7 Payee address; City; State; Zip Code 107 W 6th Street Austin, TX 78701								
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 Meal with Constituants 									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	03/21/2023	Sams Club								
	Amount (\$) \$125.08	Payee address; City; State; Zip Code 3610 St Michael Dr								
		Texarkana, TX 75503								
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	05/08/2023	Sams Club								
	Amount (\$) \$74.87	Payee address; City; State; Zip Code 3610 St Michael Dr								
		Texarkana, TX 75503								
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense							
	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 Ex Innittee Legal Services The Instruction Guid		Office Ove Polling Exp Printing Ex Salaries/W	rheac pense pens (ages	e /Contract Labor		Travel in District Travel Out of Distric	ipment & Related Expense
1	Total pages Cabadula F1.	-			1000 10 001	inpic		-		Ethios Commission Filors)
1	Total pages Schedule F1: Sch: 30/38 Rpt: 33/41	2	FILER NAME VanDeaver, Gary W. (The Ho	onorable)				3	Filer ID (00069367	Ethics Commission Filers)
4	Date	5	Payee name							
	06/07/2023		Sharon Elkins							
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	de				
	\$500.00		PO Box							
			DeKalb, TX 75559							
8	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Salaries/Wages/Contract Lab	or					de of Texas. Comple	
	-								officeholder living ex	pense
							Session Bonu	us		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Office sou	ght			Office held	
	Date		Payee name							
	05/22/2023		Steiner Ranch							
	Amount (\$)		Payee address; City;	State	; Zip Co	de				
	\$140.12		5424 Steiner Ranch Blvd		,					
	φ140.1Z		5424 Stellier Runch Biva							
			Austin, TX 78732							
	PURPOSE OF	(a)	Category (See Categories listed at the	top of this sch	edule)	(b)	Description			
	EXPENDITURE		Food/Beverage Expense						de of Texas. Comple officeholder living ex	
							Meal with Co		-	pense
							Mear with Co	1150	ituants	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	Office sou	ght			Office held	
	Date		Payee name							
	05/16/2023		TDCJ							
	Amount (\$)		Payee address; City;	State	; Zip Co	de				
	\$582.39		861B I-45-N							
			Huntsville, TX 77320							
	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	edule)	(b)	Description	_		
	OF EXPENDITURE		Gift/Awards/Memorials Exper	nse					de of Texas. Comple	
								, тх,	officeholder living ex	pense
							Gifts			
	Complete ONLY if direct		Candidate/Officeholder name	C	Office sou	ght		_	Office held	
	expenditure to benefit C/OI	4								

				EXPEND	TURE CATEGO	ORIES FOF	R BC	DX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage I Gift/Awards/Men Legal Services The Instruction		Office Ove Polling Ex Printing Ex Salaries/W	rhead pense (pens /ages	e /Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expens	e
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Fi	lers)
	Sch: 31/38 Rpt: 34/41			Gary W. (1	he Honorable)				00069367		
4	Date 06/20/2023		Payee name TDCJ									
6	Amount (\$) \$316.09		Payee addres 861B I-45-N Huntsville, T		State	e; Zip Co	de					
8	PURPOSE OF EXPENDITURE		Category _{(Se} Gift/Awards/		ed at the top of this so Expense	chedule)	(b)			de of Texas. Com officeholder living	plete Schedule T. J expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder nan	ıe	Office sou	ght			Office he	eld	
	Date		Payee name									
	05/03/2023		TFRW Nuts	& Bolts								
	Amount (\$) \$300.00		Payee addres 919 Congres	ss Ave	State	e; Zip Co	de					
			Austin, TX 7									
	PURPOSE OF EXPENDITURE		Contribution	s/Donation	ed at the top of this so s Made By /Political Comr		(b)			de of Texas. Com officeholder living	plete Schedule T. J expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder nan	ıe	Office sou	ght			Office he	eld	
	Date		Payee name									
	02/17/2023		Texas Cons	ervative Co	alition							
	Amount (\$) \$2,000.00		Payee addres PO Box 265		State	e; Zip Co	de					
			Austin, TX 7									
	PURPOSE OF EXPENDITURE		Contribution	s/Donation	ed at the top of this so s Made By /Political Comr		(b)			de of Texas. Com officeholder living	plete Schedule T. J expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder nan	10	Office 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 Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing 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)						
1	Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)						
	Sch: 32/38 Rpt: 35/41	VanDeaver, Gary W. (The Honorable)	00069367						
4	Date	Payee name							
	04/04/2023	Texas House Republican Caucus							
6	Amount (\$)	Payee address; City; State; Zip Code							
	\$1,000.00	919 Congress Ave							
		Austin, TX 78701							
8									
	OF EXPENDITURE		itside of Texas. Complete Schedule T. IX, officeholder living expense						
		Candidate/Officeholder/Political Committee							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
⊨	Date	Payee name							
	06/02/2023	Texas for Stan							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$51.03	PO Box 3752							
		Abilene, TX 79604							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense airman Gift						
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	01/09/2023	Trish Conradt							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$48.93	E1.310 PO Box 2910							
		Austin, TX 78768							
	PURPOSE OF) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE		itside of Texas. Complete Schedule T. IX, officeholder living expense						
		Office Supplies							
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	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 Expe Gift/Awards/Memoria Imittee Legal Services The Instruction	als Expense	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		-		•	3	Filer ID (Ethics Commission Filers)	
-	Sch: 33/38 Rpt: 36/41		VanDeaver, Gary W. (The	e Honorable)				00069367	
4	Date	5	Payee name						
	04/14/2023		Trish Conradt						
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	de			
	\$200.00		E1.310 PO Box 2910						
			Austin, TX 78768						
8	PURPOSE	(a)	Category (See Categories listed a	at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Office Overhead/Rental E					ide of Texas. Complete Schedule T.	
	LAFENDITORE							, officeholder living expense	
						Office Suppli	es		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Office sou	Jht		Office held	
	Date		Payee name						
	06/01/2023		Trish Conradt						
	Amount (\$)	-	Payee address; City;	State [.]	Zip Co	10			
	\$500.00		E1.310 PO Box 2910	State,					
	\$500.00		E1.310 PO D0X 2910						
			Austin, TX 78768						
	PURPOSE OF EXPENDITURE		Category (See Categories listed a Salaries/Wages/Contract		edule)	Check if Austir	I, TX	ide of Texas. Complete Schedule T. , officeholder living expense	
						Session Bon	us		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	Jht		Office held	
	Date		Payee name						
	05/11/2023		UPS Store						
-	Amount (\$)		Payee address; City;	State [.]	Zip Co	le			
	\$88.19		2407 S Congress Ave	State,	210 000				
	\$00.15		2407 3 Congress Ave						
			Austin, TX 78704						
	PURPOSE OF		Category (See Categories listed a		edule)	(b) Description			
	EXPENDITURE		Office Overhead/Rental E	xpense				ide of Texas. Complete Schedule T. , officeholder living expense	
-	Complete ONLY if direct	<u></u>	andidate/Officeholder name	<u>с</u>	Office sou	nht		Office held	
	expenditure to benefit C/Oł			Ĺ	SUICE SUU	jiit		Onice neid	

				EXPENDIT	JRE CATEGO	RIES FOF	R BO	K 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - I Comr	F F C nittee L	vent Expense ees ood/Beverage Exp Sift/Awards/Memor egal Services Fhe Instruction		Office Ove Polling Ex Printing Ex Salaries/W	rhead/f bense pense 'ages/C	/Reimbursement Rental Expense Contract Labor e this form.		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2 F	ILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 34/38 Rpt: 37/41			Gary W. (Th	e Honorable)					00069367	
4	Date 03/07/2023		ayee name ISPS								
6	Amount (\$) \$77.99	P	ayee address O 4863150 Iew Boston,	5	State	; Zip Co	de				
8	PURPOSE OF EXPENDITURE			Categories listed ead/Rental E	at the top of this sch Expense	iedule)				de of Texas. Com officeholder livinç	plete Schedule T. J expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Offic	eholder name	C	Office sou	ght			Office he	eld
	Date	Р	ayee name								
	01/30/2023	v	Vordpress								
	Amount (\$) \$35.72	5		s; City; Street #3687 co, CA 94104	9	; Zip Co	de				
	PURPOSE OF EXPENDITURE	(a) C	ategory (See		at the top of this sch	iedule)				le of Texas. Com officeholder livinç	plete Schedule T. j expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Offic	eholder name	C	Office sou	ght			Office he	eld
	Date	P	ayee name								
	03/01/2023		Vordpress								
	Amount (\$) \$35.18		ayee address 47 Market S	s; City; Street #3687		; Zip Co	de				
				co, CA 94104							
	PURPOSE OF EXPENDITURE			Categories listed ead/Rental E	at the top of this sch Expense	iedule)				de of Texas. Com officeholder living	plete Schedule T. J expense
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Offic	eholder name	C	Office sou	ght			Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			FeesOffice Overhead/Rental ExpenseTraFood/Beverage ExpensePolling ExpenseTraGift/Awards/Memorials ExpensePrinting ExpenseTra							Iraising Expense cquipment & Related Expense strict category not listed above)	
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers)	-
-	Sch: 35/38 Rpt: 38/41			Gary W. (The	e Honorable)				5	00069367		
4	Date 03/29/2023		Payee name Wordpress									
6	Amount (\$)	<u> </u>	Payee address	s; City;	State;	Zip Co	de					-
	\$35.18	!	547 Market S San Francisc	Street #36879	9	. – .						
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8	PURPOSE OF EXPENDITURE		Category _{(See} Office Overh		at the top of this sch Expense	edule)	(b)		, TX,	de of Texas. Com officeholder living	plete Schedule T. J expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Office	eholder name	C	Office sou	ght			Office he	eld	
	Date		Payee name									٦
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	PURPOSE OF EXPENDITURE		Category _{(See} Office Overh		at the top of this sch Expense	edule)	(b)			de of Texas. Com officeholder living	plete Schedule T. g expense	
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	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Office	eholder name	C	Office sou	ght			Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense							draising Expense Equipment & Rela t strict a category not liste	ited Expense
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Com	mission Filers)
-	Sch: 36/38 Rpt: 39/41	2			he Honorable)					00069367		
4	Date	5	Payee name									
	06/29/2023		Wordpress									
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de					
	\$35.18		547 Market	Street #368	79							
			San Francis	sco, CA 941	04							
8	PURPOSE	(a)					(b)	Description				
Ŭ	OF	(,	Office Over		ed at the top of this sch	nedule)	()		outsi	de of Texas. Con	nplete Schedule T	
	EXPENDITURE			neud/rtenta	Ехреное			Check if Austin	ı, тх,	officeholder livin	g expense	
								Web Hosting				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offi	ceholder nam	ne C	Office sou	ght			Office h	eld	
	Date		Payee name									
	01/23/2023		Zoom									
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$15.98		120 Market	-		,						
	+20100		220									
			San Jose, C	CA 98113								
	PURPOSE	(a)	Category (Se	ee Categories liste	ed at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Office Over	head/Renta	Expense						nplete Schedule T	
	-									officeholder livin	g expense	
								Online Meeti	ny i	Expense		
	Complete ONIL V if direct		Candidate/Offi	acholdor por		Office sou	abt			Office h	old	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI						JIII			Oncen	eiu	
-	Data		Deurse									
	Date 02/23/2023		Payee name Zoom									
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	\$15.98		120 Market	St								
			San Jose, C	CA 98113								
	PURPOSE	(a)	Category (Se	ee Categories liste	ed at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Office Over	head/Renta	Expense						nplete Schedule T	
	EXPENDITORE									officeholder livin	g expense	
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	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder nam	ne C	Office sou	ght			Office h	eld	
	experiatione to benefit C/Of	•										

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor						Transportation I Travel in Distric Travel Out of Di		
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Comr	nission Filers)
1	Sch: 37/38 Rpt: 40/41	2			The Honorabl	e)			3	00069367	(Ethics Conn	
4	Date	5	Payee name									
	03/24/2023		Zoom									
6	Amount (\$)	7	Payee addre	ss; City;	Sta	ate; Zip Co	ode					
	\$17.04		120 Market	St								
			San Jose, C	CA 98113								
8	PURPOSE	(a)					(b)	Description				
Ŭ	OF	(~)	Office Over		sted at the top of this	schedule)	()		outsi	de of Texas. Con	nplete Schedule T	
	EXPENDITURE			neuu/rtenti				Check if Austin	ı, тх,	officeholder livin	g expense	
								Online Meeti	ng l	Expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offi	ceholder na	me	Office sou	ight			Office h	eld	
	Date		Payee name									
	04/24/2023		Zoom									
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	\$17.04		120 Market	-		,						
	\$1110 T		120 Manot	01								
			San Jose, C	CA 98113								
	PURPOSE	(a)	Category (Se	ee Categories lis	sted at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE		Office Over	head/Rent	al Expense						nplete Schedule T	
										officeholder livin	g expense	
								Online Meetin	ny i	Expense		
	Complete ONLY if direct		Candidate/Offi	ooboldor po	mo	Office sou	laht			Office h	ald	
	expenditure to benefit C/Oł				ine	Office Soc	iyin			Onice II	eiu	
-	Date	<u> </u>	Payee name									
	05/23/2023		Zoom									
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	\$17.04		120 Market	51								
			San Jose, C	CA 98113								
	PURPOSE	(a)	Category (Se	ee Categories lis	sted at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE		Office Over	head/Rent	al Expense						nplete Schedule T	
										officeholder livin	g expense	
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	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder na	me	Office sou	ıght			Office h	eld	
	onpenditure to benefit C/OI	•										

		EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Loan Repayment/Reimbursement 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)						
	Credit Card Payment	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:			Filer ID	(Ethics Commission Filers)				
	Sch: 38/38 Rpt: 41/41	VanDeaver, Gary W. (The Honorable)		00069367					
4	Date	5 Payee name							
	06/23/2023	Zoom							
6	Amount (\$) \$17.04	 7 Payee address; City; State; Zip Code 120 Market St 							
		San Jose, CA 98113							
8	 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 Online Meeting Expense 								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought		Office he	eld				