CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complet	e this form.	Filer ID (Ethics Commi 00062790		2 Total pages fil	led: 18
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE (USE ONLY
OFFICEHOLDER NAME	The Honorable	Christopher G.			Date Received	ALLY EU ED
					ELECTRONIC	ALLY FILED
	NICKNAME	LAST		SUFFIX	07/17/2023	
	Chris	Turner				
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE#; CIT	Y;	ZIP CODE	Date Hand-delivered o	r Date Postmarked
OFFICEHOLDER MAILING ADDRESS	P. O. Box 182093				Receipt #	Amount
Change of Address	Arlington, TX 76096					
onalige or radiose	Allington, 1X 70090				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR F	IRST		MI		
TREASURER NAME	Mr. V	William D.				
	NICKNAME L	 _AST		SUFFIX		
		Dipert		301117		
		po.t				
6 CAMPAIGN	STREET ADDRESS (NO PO B	OX PLEASE):	AP [·]	Γ / SUITE #; CITY	: STA	ATE; ZIP CODE
TREASURER ADDRESS	7301 W. Pioneer Pkwy.	- //		, -	,	,
(Residence or Business)						
(Residence of Business)	Arlington, TX 76013					
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	XTENSION			
TREASURER	(817) 543-3700	NOWBER E	ATENSION			
PHONE	(017) 545-5700					
8 REPORT						
TYPE	January 15	30th day before	election	Runoff	15th day after ca	
		Oth day before	Jostian \Box	Exceeded modified	appointment (offi	
	X July 15	8th day before e	election	reporting limit	Final Report (Atta	dii C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2023	TH	ROUGH	06/30/20	23	
40 ELECTION	FLEOTION DATE			EL FOTION TVET		
10 ELECTION	ELECTION DATE Month Day Year	XPr	iman,	ELECTION TYPE Runoff	Other	
	03/05/2024			Kulloli	Other	
	00/00/2021	G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH		
	State Representative Distric	ct 101		State Represen	tative District 101	
	1					
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 118

13 C / OH NAME	Turner, Christopher (G. (The Honorable)	14 Filer ID 00062790	(Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or poli These expenditures may have been a d officeholders are required to report t	made without the candidate's or office	eholder's knowledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
—	GENERAL						
	CDECIFIC	COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASU	RER NAME				
		COMMITTEE CAMPAIGN TREASU	RER ADDRESS				
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, S OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)					
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEI	ES OF LOANS)	\$ 1,359.74			
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 3,179.46			
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 118,224.82			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED RIOD	AS OF THE LAST DAY OF THE	\$ 356,390.13			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDIN TING PERIOD	G LOANS AS OF THE LAST DAY	\$ 0.00			
17 AFFIDAVIT							
			, under penalty of perjury, that the ac and includes all information required t ection Code.				
			The Honorable Christopher G. Ti	urner			
			Signature of Candidate or Officeho				
AFFIX NO	TARY STAMP / SEAL AB	OVE					
Sworn to and subso	cribed before me, by the s	aid	, this the	day			
of	, 20, to co	ertify which, witness my hand and sea	al of office.				
Cignoture of affin	por administoring	Drinted name of officer administration	toring Title of effice	r administoring acth			
Signature of office	er auministering	Printed name of officer adminis	tering Title of office	r administering oath			

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

3 of 118

					0 01 110
18 FIL	ER NAN	ΛΕ.	19 Filer ID	(Ethi	ics Commission Filers)
Tui	rner, Cl	hristopher G. (The Honorable)	00062790		
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,359.74
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS	\$		
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	80,725.15	
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	36,626.46
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	873.21
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	1,327.76

	MONET	ARY POLITICAL CONTRIBUT	IONS	SCHEDULE A1				
	The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A1: Sch: 1/4 Rpt: 4/118				
	FILER NAME	the the second of the theory of the the theory of the theory of the theory of the theory of the theo		3 Filer ID (Ethics Commission F	ilers)			
		stopher G. (The Honorable)		00062790				
	Date 06/29/2023	5 Full name of contributor out-of-state PAC (IE Bell, Gwen		7 Amount of Contribution (\$)	\$20.00			
		6 Contributor address; City; State; Zip Code						
_		Houston, TX 77066-2015						
	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions Retired	s)				
	Date	Full name of contributor ut-of-state PAC (IE	D#:)	Amount of Contribution (\$)				
	06/30/2023	Bridges, Lorraine			\$20.00			
		Contributor address; City; State; Zip Code						
		Grand Prairie, TX 75052-0438						
		pation / Job title (See Instructions)	Employer (See Instructions	s)				
	Retired		Retired					
	Date	Full name of contributor ut-of-state PAC (IE	D#:)	Amount of Contribution (\$)				
	06/29/2023	Buerschinger, Charles			\$100.00			
		Contributor address; City; State; Zip Code						
		Austin, TX 78734-2070						
		pation / Job title (See Instructions)	Employer (See Instructions	s)				
	Retired		Retired					
	Date	Full name of contributor ut-of-state PAC (IE	D#:)	Amount of Contribution (\$)				
	06/19/2023	Bylo Chacon, Jessica			\$1.00			
		Contributor address; City; State; Zip Code						
		Berkeley, CA 94704-3408						
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)				
	Not Employe	ed	Not Employed					
_	Date	Full name of contributor out-of-state PAC (IE	D#:)	Amount of Contribution (\$)				
	06/20/2023	Conyngham, Karen			\$103.45			
		Contributor address; City; State; Zip Code						
		Austin, TX 78746-4115						
—	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)				
	Researcher	, ,	Self-Employed	-,				
			<u> </u>					

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this	form.	1			
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)	
	Turner, Chris	stopher G. (The Honorable)			00062790		
4	Date 06/19/2023	5 Full name of contributor out-of-state PAC (ID#: Donahue, Robert	·	7	Amount of Contribution (\$)	\$20.00	
		6 Contributor address; City; State; Zip Code					
_	Deinsinal	Grapevine, TX 76051-4995	9 Employer (See Instructions	<u></u>			
8	Retired	pation / Job title (See Instructions)	5)				
	Date	Full name of contributor ut-of-state PAC (ID#:)		Amount of Contribution (\$)		
	06/19/2023	Dunn, Louise			\$15.00		
		Contributor address; City; State; Zip Code					
		Arlington, TX 76002-2869					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Retired Tead	cher	Retired				
	Date	Full name of contributor ut-of-state PAC (ID#:)		Amount of Contribution (\$)		
	06/29/2023	Foreman, Richard				\$20.00	
		Contributor address; City; State; Zip Code					
	Dringing coou	Arlington, TX 76018-3021	Employer (See Instructions	<u>'</u>			
	Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	s)			
	Date	Full name of contributor uut-of-state PAC (ID#:)		Amount of Contribution (\$)		
	06/29/2023					\$103.45	
		Contributor address; City; State; Zip Code					
		Fort Worth, TX 76109-5233					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Administrato	r	MHMR of Tarrant				
	Date	Full name of contributor ut-of-state PAC (ID#:			Amount of Contribution (\$)		
	06/29/2023	Jones, Gilford				\$51.83	
		Contributor address; City; State; Zip Code					
		Arlington, TX 76014-3513					
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)			

	MONEI	ARY POLITICAL (SCHEDULE A1			
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 3/4 Rpt: 6/118	
2	FILER NAME Turner, Chris	stopher G. (The Honorable)			3	Filer ID (Ethics Commission 00062790	n Filers)
4	Date 06/30/2023	5 Full name of contributor Liu, George6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$50.00
8	Principal occu Attorney	Fairfax, VA 22031-2060 pation / Job title (See Instructions	s) s	Employer (See Instruction Euclid Vision Corporation			
	Date Full name of contributor out-of-state PAC (ID#:) 06/29/2023 Majkut, Beverly Contributor address; City; State; Zip Code Arlington, TX 76014-3127					Amount of Contribution (\$)	\$36.34
	Principal occu Retired	pation / Job title (See Instructions	5)	Employer (See Instructions Retired	s)		
	Date 06/19/2023	Full name of contributor Meeks, Raymond Contributor address; City; Si	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	•	Venus, TX 76084-3252 pation / Job title (See Instructions	s)	Employer (See Instruction	s)		
	Date 06/29/2023	Full name of contributor Morales, Sandra Contributor address; City; Si	out-of-state PAC (ID#:	Raymond M Meeks		Amount of Contribution (\$)	\$103.45
	Principal occu Retired	pation / Job title (See Instructions	5)	Employer (See Instruction: Retired	s)		
	Date 06/30/2023	Full name of contributor Nolan, John Contributor address; City; Si Arlington, TX 76015-3824				Amount of Contribution (\$)	\$50.00
	Principal occu Retired engin	pation / Job title (See Instructions neer	5)	Employer (See Instruction: Retired	s)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1							
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/4 Rpt: 7/118					
2	FILER NAME Turner, Chris	stopher G. (The Honorable)		3	3 Filer ID (Ethics Commission Filers) 00062790					
4	Date 06/29/2023	5 Full name of contributor out-of-state PAC (ID#:_ Suhm, Mary 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$103.45				
		Austin, TX 78737-9299								
8	Principal occu Retired	ipation / Job title (See Instructions)	9 Employer (See Instructions Retired	5)						
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Truitt, Gary Contributor address; City; State; Zip Code Denton, TX 76201-1709)		Amount of Contribution (\$)	\$100.00				
	Principal occu Retired	upation / Job title (See Instructions)	Employer (See Instructions Retired	5)						
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#: Vedlitz, Arnold Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$258.32				
		College Station, TX 77840-3328								
	Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions Texas A&M Univeersity	i)						
	Date 06/29/2023	Full name of contributor out-of-state PAC (ID#:_ Wilhelm, Franya Contributor address; City; State; Zip Code Arlington, TX 76012-2052			Amount of Contribution (\$)	\$103.45				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)						

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
		,
1	Total pages Schedule F1:	
	Sch: 1/25 Rpt: 8/118	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	05/25/2023	AJL Advertising Specialities
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$202.00	2101 Airport Blvd
		Austin, TX 78722-1403
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Printing Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Sine Die T-shirts
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
F	Date	Payee name
	03/03/2023	American Express
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,502.16	200 Vesey St
		New York, NY 10281-5525
	P. P. C.	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit card payment
		Great data payment
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· ·
_	Data	
	Date	Payee name
	05/03/2023	American Express
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,010.61	200 Vesey St
		New York, NY 10281-5525
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITURE	Check if Austin, TX, officeholder living expense
		Credit card payment
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiorare to beliefft C/OI	•

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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: 2/25 Rpt: 9/118	Turner, Christopher G. (The Honorable)	00062790
4	Date	5 Payee name	
	06/06/2023	American Express	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$6,676.72	200 Vesey St	
		•	
		New York, NY 10281-5525	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Credit Card Payment Check if trav	el outside of Texas. Complete Schedule T.
	LXI LINDITORL		tin, TX, officeholder living expense
		Credit card	payment
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experialitate to betterit eyer		
	Date	Payee name	
	04/07/2023	American Express	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$6,980.31	200 Vesey St	
		New York, NY 10281-5525	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Credit Gard Layment	el outside of Texas. Complete Schedule T.
			tin, TX, officeholder living expense
		Credit card	payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office field
	Date	Payee name	
	02/06/2023	American Express	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$9,638.14	200 Vesey St	
		•	
		New York, NY 10281-5525	
_	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Credit Cara r ayment	el outside of Texas. Complete Schedule T.
			tin, TX, officeholder living expense
		Credit card	раушеш
	Commission Chill V. V. II	Condidate Office helder no 222	Office hald
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
_			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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

Austin apartment rent

Office held

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

Solicitation/Fundraising Expense

Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/25 Rpt: 10/118 Turner, Christopher G. (The Honorable) 00062790 4 Date Payee name 06/16/2023 Amli on 2nd 6 Amount (\$) Payee address; City; State; Zip Code \$95.00 421 W 3rd St Austin, TX 78701-4052 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** X Check if Austin, TX, officeholder living expense Austin apartment rent Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/04/2023 Amli on 2nd Amount (\$) Payee address; City; State; Zip Code \$2,649.56 421 W 3rd St Austin, TX 78701-4052 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** X Check if Austin, TX, officeholder living expense Austin apartment rent Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/05/2023 Amli on 2nd Amount (\$) Payee address: City; State; Zip Code \$2,761.49 421 W 3rd St Austin, TX 78701-4052 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** TX Check if Austin, TX, officeholder living expense

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide exp	e Printing Salarie	-	se s/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:						ı	Filer ID	(Ethics Commission Filers)
	Sch: 4/25 Rpt: 11/118	Turner, Chr	istopher G. (The Hono	orable)				00062790	
4	Date	5 Payee name							
	02/03/2023	Amli on 2nd	Í						
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip	Code				
	\$3,068.65	421 W 3rd \$	St						
		Austin, TX	78701-4052						
8	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Office Over	head/Rental Expense			=		de of Texas. Comp	
						Austin apartn		officeholder living	expense
						, ωσιπ αμαιτη	.1011	. i Ciil	
9	Complete ONLY if direct	Candidata/O#	ceholder name	Office s	ought			Office he	ald.
9	Complete ONLY if direct expenditure to benefit C/O		cenoider name	Office s	ougni			Office fie	eiu
	Date	Payee name							
	03/03/2023	Amli on 2nd	I						
	Amount (\$)	Payee addre	ss; City;	State; Zip	Code				
	\$3,132.35	421 W 3rd S	St						
		Austin, TX	78701-4052						
	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Office Over	head/Rental Expense					de of Texas. Comp	
						Austin apartn		officeholder living	expense
						γασαπ αραπ	110111	t rent	
_	Complete ONLY if direct	Candidate/Offi	ceholder name	Office s	Ollapt			Office he	Ald
	expenditure to benefit C/O		onoider name	Office 3	Jugiit			Cilice He	
 	Data								
	Date	Payee name	1						
	05/03/2023	Amli on 2nd							
	Amount (\$)	Payee addre		State; Zip	Code				
	\$3,136.48	421 W 3rd S	St						
		Austin, TX	78701-4052						
	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE		head/Rental Expense	•				le of Texas. Comp	
	THE LADITORE					_		officeholder living	expense
						Austin apartn	nent	t rent	
	Complete ONLY if direct expenditure to benefit C/O		ceholder name	Office s	ought			Office he	eld
	portattaro to borioni o/Oi	-							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:									
	Sch: 5/25 Rpt: 12/118	Turner, Christopher G. (The Honorable) 00062790								
4	Date	5 Payee name								
	06/14/2023	Arlington Black Chamber of Commerce								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$250.00	PO Box 2614								
		Arlington, TX 76004-2614								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITORE	Check if Austin, TX, officeholder living expense								
		Membership dues								
_										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	06/30/2023	Dubberke, Tammy								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$250.00	3703 Lasalle Dr								
		Arlington, TX 76016-2930								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Salaries/Wages/Contract Labor								
	EXI ENDITORE	Check if Austin, TX, officeholder living expense								
		Campaign salary								
	Complete ONLY if direct	Candidata/Officeholder name Office county Office hold								
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	01/31/2023	Dubberke, Tammy								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$1,250.00	3703 Lasalle Dr								
		Arlington, TX 76016-2930								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.								
	_/	Check if Austin, TX, officeholder living expense Campaign salary								
		Campaign salary								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	Complete ONLY if direct expenditure to benefit C/OI	o								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con		Legal Service				Wages	ete this form.		Travel Out o OTHER (ent		ict ategory not listed above)	
1	Total pages Schedule F1:	2	EII ER NAME			•		•		3	Filer ID		(Ethics Commission Filers)	-
-	Sch: 6/25 Rpt: 13/118	ı	Turner, Chri		(The Ho	norable	.)			ľ	0006279		(24.100 001111110101111111010)	
Ļ	<u> </u>	⊢		Stopher C	. (1116-116	Jilorabic	•)				0000273			_
4	Date	ı	Payee name											
	02/28/2023		Dubberke, T	ammy										
6	Amount (\$)	7	Payee addres	ss; City	<i>r</i> ;	State;	Zip Co	ode						
	\$1,250.00		3703 Lasalle	e Dr										
			Arlington, T	x 76016-2	2930									
8	DUDDOCE	⊢						(b)	<u> </u>					_
°	PURPOSE OF		Category (Se				edule)	(D)	Description Check if travel	outei	de of Teyes (^omnle	ete Schedule T.	
	EXPENDITURE		Salaries/Wa	iges/Cont	raci Labo	ľ			Check if Austin					
									Campaign sa					
9	Complete ONLY if direct		Candidate/Offic	reholder na	ame		Office sou	ıaht			Office	held		_
ľ	expenditure to benefit C/OI		zarialaato/Oni	seriolael III	arric		JIIICC 300	igiit			Omec	, 11010	u	
L														_
	Date	ı	Payee name											
	03/31/2023		Dubberke, T	ammy										
	Amount (\$)		Payee addres	ss; City	/ ;	State;	Zip Co	ode						
	\$1,250.00		3703 Lasalle	e Dr										
			Arlington, T	x 76016-2	2930									
	PURPOSE	⊢						(h)	Description					_
	OF		Category (Se				edule)	(1)	Description Check if travel	outsi	de of Texas (Comple	ete Schedule T.	
	EXPENDITURE		Salaries/Wa	iges/Cont	raci Labo	r			Check if Austin					
									Campaign sa	alar	y			
	Complete ONLY if direct		Candidate/Offic	ceholder na	ame		Office sou	ıaht			Office	e held	d	_
	expenditure to benefit C/OI												-	
_		_												=
	Date		Payee name	_										
	04/28/2023		Dubberke, 1	ammy										
	Amount (\$)		Payee address	ss; City	/ ;	State;	Zip Co	ode						
	\$1,250.00		3703 Lasalle	e Dr										
			Arlington, T	X 76016-2	2930									
	PURPOSE	 						(h)	Description					_
	OF		Category (See Salaries/Wa				edule)	(6)		outsi	de of Texas. (Comple	ete Schedule T.	
	EXPENDITURE		Salalies/ Wa	iges/Cont	iaci Labo	!			Check if Austin					
									Campaign Sa	alar	у			
	Complete ONLY if direct		Candidate/Offic	ceholder na	ame	C	Office sou	ıght			Office	e held	d	_
	expenditure to benefit C/OI							5						
\vdash														_

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a extraory not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/25 Rpt: 14/118	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	05/31/2023	Dubberke, Tammy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,250.00	3703 Lasalle Dr
		Arlington, TX 76016-2930
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign salary
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	02/03/2023	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.95	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Merchant fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Davido namo
	03/03/2023	Payee name First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.95	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Merchant fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schodula F1:	
1	Total pages Schedule F1: Sch: 8/25 Rpt: 15/118	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	04/03/2023	First Data Merchant Services
6	Amount (\$) \$19.95	7 Payee address; City; State; Zip Code 5565 Glenridge Connector NE Ste 2000 Atlanta, GA 30342-1651
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Merchant fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/03/2023	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.95	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Merchant fee
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/05/2023	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.95	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Merchant fee
	Complete ONLY if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 9/25 Rpt: 16/118	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	01/03/2023	First Data Merchant Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$28.19	5565 Glenridge Connector NE
		Ste 2000
Ļ	DUDDOS.	Atlanta, GA 30342-1651
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Merchant fee
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
L	03/03/2023	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.95	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Merchant fee
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/03/2023	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.95	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Merchant Fee
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/25 Rpt:	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	05/03/2023	First Data Merchant Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$44.95	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	_/	Check if Austin, TX, officeholder living expense Merchant fee
		ivierchant lee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ءُ	expenditure to benefit C/O	
	Date	Payee name
	06/05/2023	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.95	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	_/	Check if Austin, TX, officeholder living expense Merchant fee
		Welchantiee
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	02/03/2023	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.56	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Merchant fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	'

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/25 Rpt:	Turner, Christopher G. (The Honorable)
4	Date	5 Payee name
	01/03/2023	First Data Merchant Services
6	Amount (\$) \$54.35	7 Payee address; City; State; Zip Code 5565 Glenridge Connector NE
	Ψ34.33	Ste 2000
Ļ		Atlanta, GA 30342-1651
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Merchant fee
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/03/2023	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$245.01	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Merchant fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/03/2023	First Data Merchant Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$489.11	5565 Glenridge Connector NE
		Ste 2000
		Atlanta, GA 30342-1651
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Merchant fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

pense Travel in District

kpense Travel Out of Dis

//ages/Contract Labor OTHER (enter a

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/25 Rpt:	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	05/30/2023	Grand Prairie Juneteenth Committee
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	PO Box 530744
		Grand Prairie, TX 75053-0744
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Donation
L		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit of or	
	Date	Payee name
	01/23/2023	Gutierrez, Sarah
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	401 Middle Crk
		Buda, TX 78610-2765
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Campaign operations consulting
	2	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/21/2023	Gutierrez, Sarah
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	401 Middle Crk
		Buda, TX 78610-2765
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense
		Check if Austin, TX, officeholder living expense
		Campaign operations consulting
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to beliefit 6/01	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor,

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/25 Rpt:	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	03/27/2023	Gutierrez, Sarah
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	401 Middle Crk
		Buda, TX 78610-2765
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign operations consulting
		Campaign operations consulting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	04/20/2023	Gutierrez, Sarah
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	401 Middle Crk
	1-,000	
		Buda, TX 78610-2765
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign operations consulting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/19/2023	Gutierrez, Sarah
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	401 Middle Crk
		Buda, TX 78610-2765
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign operations consulting
		Campaign operations consulting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

e Travel in Distri se Travel Out of I s/Contract Labor OTHER (enter

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 com	olete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 14/25 Rpt:	Turner, Christopher G. (The Honorable)	00062790
4	Date	5 Payee name	<u>'</u>
	06/20/2023	Gutierrez, Sarah	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,000.00	401 Middle Crk	
		Buda, TX 78610-2765	
8	PURPOSE OF	, , ,	Description
	EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Campaign operations consulting
l			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	office held
F	Date	Payee name	
	06/30/2023	Internal Revenue Service	
_	Amount (\$)	Payee address; City; State; Zip Code)
	\$103.12	PO Box 970030	
l			
		Saint Louis, MO 63197-0030	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l			Campaign payroll taxes
l			
	Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
l	04/30/2023	Internal Revenue Service	
Г	Amount (\$)	Payee address; City; State; Zip Code	3
	\$185.62	PO Box 970030	
		Saint Louis, MO 63197-0030	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Payroll taxes
			. 2,1-2.1 120100
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sough	office held
	expenditure to benefit C/OI		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/25 Rpt:	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	01/31/2023	Internal Revenue Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$185.63	PO Box 970030
		Saint Louis, MO 63197-0030
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll taxes
		r ayroll taxes
_	Complete ONU V if alice	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	02/28/2023	Internal Revenue Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$185.63	PO Box 970030
		Saint Louis, MO 63197-0030
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Payroll taxes
		rayioli taxes
_	Operation ONLY if allowed	Our did to 10 ff as had done as many
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/31/2023	Internal Revenue Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$185.63	PO Box 970030
		Saint Louis, MO 63197-0030
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		Payroll taxes
	Compulate ONU V if alice	Condidate/Officeholder name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
-	Total pages Cabadula 51:	1
	Total pages Schedule F1: Sch: 16/25 Rpt:	2 FILER NAME Turner, Christopher G. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00062790
4	Date	5 Payee name
	05/31/2023	Internal Revenue Service
6	Amount (\$) \$185.63	7 Payee address; City; State; Zip Code PO Box 970030
	\$103.03	FO BOX 970030
		Saint Louis, MO 63197-0030
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Payroll taxes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/17/2023	Intuit
	Amount (\$)	Payee address; City; State; Zip Code
	\$58.63	2632 Marine Way
		Mountain View, CA 94043-1126
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Accounting software subscription
		Accounting Software Subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/16/2023	Intuit
	Amount (\$)	Payee address; City; State; Zip Code
	\$63.96	2632 Marine Way
		Mountain View, CA 94043-1126
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense Accounting software subscription
		Accounting software subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Gard Layment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 17/25 Rpt:	Turner, Christopher G. (The Honorable)	00062790
4	Date	5 Payee name	
	03/16/2023	Intuit	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$63.96	2632 Marine Way	
	l	Mountain View, CA 94043-1126	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking	avel outside of Texas. Complete Schedule T.
		I — I —	ustin, TX, officeholder living expense g software subscription
	!	Accounting	y soliware subscription
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office field
_	Date	Device name	
	04/17/2023	Payee name Intuit	
_			
	Amount (\$)		
	\$63.96	2632 Marine Way	
	!	24 24 24 24 24 24 24 24 24 24 24 24 24 2	
		Mountain View, CA 94043-1126	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	/ Accounting/Banking	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense
	!	I — I —	g software subscription
	!		·
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OH	н	
	Date	Payee name	
	05/16/2023	Intuit	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$63.96	2632 Marine Way	
	!		
	!	Mountain View, CA 94043-1126	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		avel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Au	ustin, TX, officeholder living expense
	!	Accounting	g software subscription
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	- CApendidio to Sellelli 2. 2.		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/25 Rpt:	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	06/16/2023	Intuit
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$63.96	2632 Marine Way
		Mountain View, CA 94043-1126
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Accounting software subscription
		, todanting contrare customption
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
۲	Date	Payee name
	06/18/2023	Michael's
	Amount (\$)	Payee address; City; State; Zip Code
	\$606.96	3166 S State Highway 161
	Ψ000.30	Ste 140
		Grand Prairie, TX 75052-7718
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Frames for resolutions
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	04/12/2023	NAACP Grand Prairie Branch
	Amount (\$) \$500.00	Payee address; City; State; Zip Code PO Box 530973
	φουυ.υυ	PO BOX 530973
		Once of Decision TV 75050 0070
		Grand Prairie, TX 75053-0973
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Event Sponsorship
ı		1
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·

SCHEDULE F1

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

Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officenoider/Politic	at Committee Legal Services Salaries/wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 19/25 Rpt:	Turner, Christopher G. (The Honorable) 00062790
4 Date	5 Payee name
01/16/2023	Ngo, Vanna
6 Amount (\$) \$255.45	7 Payee address; City; State; Zip Code PO Box 540592
	Grand Prairie, TX 75054
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 Mileage reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/31/2023	Ngo, Vanna
Amount (\$) \$500.00	Payee address; City; State; Zip Code PO Box 540592
	Grand Prairie, TX 75054
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 salary
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/28/2023	Ngo, Vanna
Amount (\$) \$500.00	Payee address; City; State; Zip Code PO Box 540592
	Grand Prairie, TX 75054
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 salary
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Polling Expense Travel in Di Printing Expense Travel Out Salaries/Wages/Contract Labor OTHER (er

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 20/25 Rpt:	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	03/31/2023	Ngo, Vanna
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	PO Box 540592
		Grand Prairie, TX 75054
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign salary
Ļ	0 1 0 0 1 1 1 1	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	04/28/2023	Ngo, Vanna
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	PO Box 540592
		Grand Prairie, TX 75054
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign salary
		- Cantipoligia Canaliy
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/31/2023	Ngo, Vanna
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	PO Box 540592
		Grand Prairie, TX 75054
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign salary
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to beliefit 6/01	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politic	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 21/25 Rpt:	Turner, Christopher G. (The Honorable) 00062790
4 Date	5 Payee name
06/30/2023	Ngo, Vanna
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 540592
	Grand Prairie, TX 75054
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign salary
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H
Date	Payee name
01/31/2023	Peterson, Kelly
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1000 San Marcos St Unit 176 Austin, TX 78702-2660
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 salary
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held
Date 02/28/2023	Payee name Peterson, Kelly
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1000 San Marcos St Unit 176 Austin, TX 78702-2660
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 salary
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	mmittee	Gift/Awards/Memor Legal Services	·		Vages	s/Contract Labor		Travel Out o OTHER (ent		ict ategory not listed above)
_		1		The Instruction	Guiue expiains	5 HOW TO CO	mpre	ete tilis iOIIII.	1			/=:: · · · · · · · ·
1	Total pages Schedule F1:	2							3			(Ethics Commission Filers)
	Sch: 22/25 Rpt:		Turner, Chr	istopher G. (1	he Honorab	le)				0006279	0	
4	Date	5	Payee name									
	03/31/2023		Peterson, K	elly								
6	Amount (\$)	7	Payee addre	ss; City;	State	e; Zip Co	de					
	\$500.00		1000 San M	larcos St								
			Unit 176									
			Austin, TX 7	78702-2660								
8	PURPOSE	(a)		ee Categories listed	at the top of this or	chedule)	(b)	Description				
	OF	'		ages/Contract		inedule)	()		outsi	ide of Texas. (Comple	ete Schedule T.
	EXPENDITURE							Check if Austin			iving e	xpense
								Campaign sa	alar	у		
9	Complete ONLY if direct		Candidate/Offi	ceholder name		Office sou	ght			Office	held	d
	expenditure to benefit C/O	H 										
	Date		Payee name									
	04/28/2023		Peterson, K	elly								
	Amount (\$)	Г	Payee addres	ss; City;	State	e; Zip Co	de					
	\$500.00		1000 San M	larcos St								
			Unit 176									
			Austin, TX 7	78702-2660								
	PURPOSE	(a)		ee Categories listed			(h)	Description				
	OF	`-'		ee Categories listed ages/Contract		Lileuule)	()	_	outsi	ide of Texas. (Comple	ete Schedule T.
	EXPENDITURE		Jaia: 100/ VVC	.500,001111401	000.			Check if Austin	, TX	, officeholder li	iving e	xpense
								Campaign sa	alar	у		
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offi	ceholder name		Office sou	ght			Office	held	d
L	CAPERIORALE TO DETICAL C/OF											
	Date		Payee name		<u> </u>							
	05/31/2023		Peterson, K	elly								
	Amount (\$)		Payee addres	ss; City;	State	e; Zip Co	de					
	\$500.00		1000 San M	larcos St								
			Unit 176									
			Austin, TX 7	78702-2660								
	PURPOSE	(a)		ee Categories listed	at the top of this so	chedule)	(b)	Description				
	OF EXPENDITURE	ļ ´ ´		ages/Contract				Check if travel				ete Schedule T.
	EXPENDITURE			-				Check if Austin			iving e	xpense
								Campaign sa	alar	У		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Offi	ceholder name	!	Office sou	ght			Office	held	d
	CAPETIGITUTE TO DETICITE C/OF	' '										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 23/25 Rpt:	2 FILER NAME Turner, Christopher G. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00062790
4	Date 06/30/2023	5 Payee name Peterson, Kelly
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1000 San Marcos St Unit 176 Austin, TX 78702-2660
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign salary
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 05/18/2023	Payee name Reilly Echols Printing
	Amount (\$) \$1,861.90	Payee address; City; State; Zip Code 1710 S Harwood St Dallas, TX 75215-1221
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graduation certificates for constituents
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 03/06/2023	Payee name Tarrant County Democratic Party
	Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 685 John B Sias Memorial Pkwy Ste 400 Fort Worth, TX 76134-1304
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political contribution
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/25 Rpt:	Turner, Christopher G. (The Honorable) 00062790
4	Date	5 Payee name
	06/30/2023	Turner, Chris
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$176.01	3060 Nadar
		Grand Prairie, TX 75054-6792
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T. Expense Check if Austin, TX, officeholder living expense
		Expense
		milioago rominadoomone
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Dougo nama
		Payee name
	06/30/2023	Turner, Chris
	Amount (\$)	Payee address; City; State; Zip Code
	\$225.00	3060 Nadar
		Grand Prairie, TX 75054-6792
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement
		Check if Austin, TX, officeholder living expense Schedule G Reimbursement
		Schedule & Reimbulsement
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/Oł	
_	_	
	Date	Payee name
	03/31/2023	Turner, Chris
	Amount (\$)	Payee address; City; State; Zip Code
	\$499.97	3060 Nadar
		Grand Prairie, TX 75054-6792
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment & Related
	ZAI ZIAZITORZ	Expense Check if Austin, TX, officeholder living expense
		Mileage reimbursement
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	
	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outpers extrapply not listed above)

	Credit Card Payment	The Instruction Guide explains how to com	es/contract Labor	OTHER (etitel a category not listed above)	
1	Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)	\dashv
	Sch: 25/25 Rpt:	Turner, Christopher G. (The Honorable)		00062790	
4	Date	5 Payee name	I		\neg
	01/15/2023	Turner, Chris			
6	Amount (\$)	7 Payee address; City; State; Zip Code	<u> </u>		_
ľ	\$606.21	3060 Nadar			
	Ψ000.21	3000 Nadai			
		Curred Durinia TV 75054 6700			
		Grand Prairie, TX 75054-6792			
8	PURPOSE OF) Description		
	EXPENDITURE	Loan Repayment/Reimbursement	ш	utside of Texas. Complete Schedule T. TX, officeholder living expense	
			_	eimbursement	
			Concade C 1	embarsement	
9	Complete ONLY if direct	Candidate/Officeholder name Office sough		Office held	-
9	expenditure to benefit C/OI		ι	Office field	
_					\dashv
	Date	Payee name			
	03/31/2023	Turner, Chris			
	Amount (\$)	Payee address; City; State; Zip Code	!		
	\$648.21	3060 Nadar			
		Grand Prairie, TX 75054-6792			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)) Description		
	OF EXPENDITURE	Loan Repayment/Reimbursement	—	utside of Texas. Complete Schedule T.	
	EXI ENDITORE			TX, officeholder living expense	
			Schedule G re	eimbursement	
					4
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t	Office held	
					4
l					

SCHEDULE **F4**

EXPENDITURE CATEGORIES FOR BOX 10(a)

	Accounting/Banking Consulting Expense	Fees Food/Beverage Ex	pense F	Office Overhead/Rental Expense Polling Expense	Transportation Travel in Dis	
	Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards/Memor I Committee Legal Services		Printing Expense Salaries/Wages/Contract Labor	Travel Out of OTHER (ent	f District er a category not listed above)
		The Instruction	Guide explains ho	w to complete this form.		
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID	(Ethics Commission Filers)
	Sch: 1/79 Rpt: 33/118	Turner, Christopher G. (1	The Honorable)		0006279	0
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CH	IARGED TO A	CREDIT CARD	\$	2,739.95
5	Date	6 Payee name				
	04/25/2023	AT&T				
7	Amount (\$) \$48.17	8 Payee address; City; 208 S Akard St	State;	Zip Code		
		Dallas, TX 75202-4206				
9	TYPE OF EXPENDITURE	X Political	□ N	on-Political		
10		(a) Category (See Categories listed	at the top of this sched	ule) (b) Description		
	OF EXPENDITURE	Office Overhead/Rental I	Expense			Complete Schedule T.
				<u> </u>	in, TX, officeholder li hone service	ving expense
				Campaign	morie service	
11	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	Off	ice sought	Office	held
	Date	Payee name				
	05/24/2023	AT&T				
	Amount (\$)	Payee address; City;	State;	Zip Code		
l						
	\$48.17	208 S Akard St				
	\$48.17	208 S Akard St Dallas, TX 75202-4206				
	\$48.17 TYPE OF	Dallas, TX 75202-4206		on Delitical		
			□ N	on-Political		
	TYPE OF EXPENDITURE PURPOSE	Dallas, TX 75202-4206				
	TYPE OF EXPENDITURE	Dallas, TX 75202-4206	at the top of this sched	ule) (b) Description Check if trave		Complete Schedule T.
	TYPE OF EXPENDITURE PURPOSE OF	Dallas, TX 75202-4206 X Political (a) Category (See Categories listed	at the top of this sched	(b) Description Check if trave	in, TX, officeholder li	
	TYPE OF EXPENDITURE PURPOSE OF	Dallas, TX 75202-4206 X Political (a) Category (See Categories listed	at the top of this sched	(b) Description Check if trave		
	TYPE OF EXPENDITURE PURPOSE OF	Dallas, TX 75202-4206 X Political (a) Category (See Categories listed Office Overhead/Rental E	at the top of this schedi Expense	(b) Description Check if trave	in, TX, officeholder li	ving expense
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Dallas, TX 75202-4206 X Political (a) Category (See Categories listed Office Overhead/Rental E	at the top of this schedi Expense	(b) Description Check if trave Check if Austi Campaign p	in, TX, officeholder li hone service	ving expense
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Dallas, TX 75202-4206 X Political (a) Category (See Categories listed Office Overhead/Rental E	at the top of this schedi Expense	(b) Description Check if trave Check if Austi Campaign p	in, TX, officeholder li hone service	ving expense
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Dallas, TX 75202-4206 X Political (a) Category (See Categories listed Office Overhead/Rental E	at the top of this schedi Expense	(b) Description Check if trave Check if Austi Campaign p	in, TX, officeholder li hone service	ving expense
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Dallas, TX 75202-4206 X Political (a) Category (See Categories listed Office Overhead/Rental E	at the top of this schedi Expense	(b) Description Check if trave Check if Austi Campaign p	in, TX, officeholder li hone service	ving expense
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Dallas, TX 75202-4206 X Political (a) Category (See Categories listed Office Overhead/Rental E	at the top of this schedi Expense	(b) Description Check if trave Check if Austi Campaign p	in, TX, officeholder li hone service	ving expense
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Dallas, TX 75202-4206 X Political (a) Category (See Categories listed Office Overhead/Rental E	at the top of this schedi Expense	(b) Description Check if trave Check if Austi Campaign p	in, TX, officeholder li hone service	ving expense
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Dallas, TX 75202-4206 X Political (a) Category (See Categories listed Office Overhead/Rental E	at the top of this schedi Expense	(b) Description Check if trave Check if Austi Campaign p	in, TX, officeholder li hone service	ving expense
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Dallas, TX 75202-4206 X Political (a) Category (See Categories listed Office Overhead/Rental E	at the top of this schedi Expense	(b) Description Check if trave Check if Austi Campaign p	in, TX, officeholder li hone service	ving expense
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Dallas, TX 75202-4206 X Political (a) Category (See Categories listed Office Overhead/Rental E	at the top of this schedi Expense	(b) Description Check if trave Check if Austi Campaign p	in, TX, officeholder li hone service	ving expense
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Dallas, TX 75202-4206 X Political (a) Category (See Categories listed Office Overhead/Rental E	at the top of this schedi Expense	(b) Description Check if trave Check if Austi Campaign p	in, TX, officeholder li hone service	ving expense
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Dallas, TX 75202-4206 X Political (a) Category (See Categories listed Office Overhead/Rental E	at the top of this schedi Expense	(b) Description Check if trave Check if Austi Campaign p	in, TX, officeholder li hone service	ving expense

SCHEDULE F4

	EXPENDITURE CAT	EGORIES FOR BOX 10(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repayment/Reimbursemen Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor		
	The Instruction Guide ex	plains how to complete this form.		
1 Total pages Schedule F4: Sch: 2/79 Rpt: 34/118	2 FILER NAME Turner, Christopher G. (The Hono	orable)	3 Filer ID (Ethics Commission Filers 00062790	s)
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGEI	O TO A CREDIT CARD	\$ 2,739.95	
5 Date 06/25/2023	6 Payee name AT&T			
7 Amount (\$) \$48.17	208 S Akard St	State; Zip Code		
9 TYPE OF EXPENDITURE	Dallas, TX 75202-4206 X Political	Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense	Check if trav	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense phone service	
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held	
Date 01/24/2023	Payee name AT&T			
Amount (\$) \$48.36	Payee address; City; 208 S Akard St Dallas, TX 75202-4206	State; Zip Code		
TYPE OF EXPENDITURE	X Political	Non-Political		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense	Check if tra	ovel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense phone service	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held	

SCHEDULE F4

	EXPENDITURE CAT	EGORIES FOR BOX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politice		Loan Repayment/Reimburseme Office Overhead/Rental Expens Polling Expense Printing Expense Salaries/Wages/Contract Labor	
	The Instruction Guide ex	plains how to complete this form.	
1 Total pages Schedule F4: Sch: 3/79 Rpt: 35/118	2 FILER NAME Turner, Christopher G. (The Hono	orable)	3 Filer ID (Ethics Commission Filers) 00062790
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	D TO A CREDIT CARD	\$ 2,739.95
5 Date 02/24/2023	6 Payee name AT&T		
7 Amount (\$) \$48.36	208 S Akard St	State; Zip Code	
9 TYPE OF EXPENDITURE	Dallas, TX 75202-4206 X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense	Check if tra	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense phone service
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 03/24/2023	Payee name AT&T		
Amount (\$) \$48.36	Payee address; City; 208 S Akard St Dallas, TX 75202-4206	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense	Check if tra	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense phone service
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards/Memorials Expense	Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide explains		
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 4/79 Rpt: 36/118	Turner, Christopher G. (The Honorable	e)	00062790
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED TO	A CREDIT CARD	\$ 2,739.95
5 Date 02/20/2023	6 Payee name Amazon		
7 Amount (\$) \$10.81	8 Payee address; City; State 440 Terry Ave N	; Zip Code	
\$10.01	Seattle, WA 98109-5210		
9 TYPE OF			
EXPENDITURE	X Political	Non-Political	
10 PURPOSE	(a) Category (See Categories listed at the top of this sch	nedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense		outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Office suppli	
11 Complete ONLY if direct expenditure to benefit C/Ol		Office sought	Office held
Date	Payee name		
01/06/2023	Amazon		
Amount (\$)	Payee address; City; State	; Zip Code	
\$17.29	440 Terry Ave N		
	Seattle, WA 98109-5210		
TYPE OF	X Political	Non-Political	
EXPENDITURE	X 1 51111541		
PURPOSE OF	(a) Category (See Categories listed at the top of this sch	l '	outside of Toyon, Complete Cabadula T
EXPENDITURE	Office Overhead/Rental Expense		outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Office suppli	
Complete ONLY if direct expenditure to benefit C/O		Office sought	Office held

EXPENDITURE CATEGORIES FOR BOX 10(a)

SCHEDULE F4

	EXPENDITURE CAT	EGORIES FOR BOX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	·	plains how to complete this form.	o mentioned address, not noted above,
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 5/79 Rpt: 37/118	Turner, Christopher G. (The Hond	orable)	00062790
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$ 2,739.95
5 Date 06/21/2023	6 Payee name Amazon		
7 Amount (\$) \$29.01	8 Payee address; City; 440 Terry Ave N Seattle, WA 98109-5210	State; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense	Check if trave	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense ieS
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 02/20/2023	Payee name Amazon		
Amount (\$) \$31.58	Payee address; City; 440 Terry Ave N Seattle, WA 98109-5210	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense	Check if trave	I outside of Texas. Complete Schedule T. n, TX, officeholder living expense leS
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

	EXPENDITURE CAT	EGORIES FOR BOX 10(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Salaries/Wages/Contrac	Expense ct Labor	Travel in District Travel Out of Dis	quipment & Related Expense
		plains how to complete this			
1 Total pages Schedule F4: Sch: 6/79 Rpt: 38/118	Turner, Christopher G. (The Hono	orable)	3	Filer ID 00062790	(Ethics Commission Filers)
TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	O TO A CREDIT CAF	RD \$		2,739.95
5 Date 04/19/2023	6 Payee name Amazon				
7 Amount (\$) \$37.50	8 Payee address; City; 440 Terry Ave N Seattle, WA 98109-5210	State; Zip Code			
9 TYPE OF EXPENDITURE	X Political	Non-Political			
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense	☐ Ch	eck if travel outsi	de of Texas. Comp officeholder living	
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought		Office he	ld
Date	Payee name				
05/22/2023	Amazon				
Amount (\$) \$37.50	Payee address; City; 440 Terry Ave N Seattle, WA 98109-5210	State; Zip Code			
TYPE OF EXPENDITURE	X Political	Non-Political			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense	Ch	eck if travel outsi	de of Texas. Comp , officeholder living	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought		Office he	ld

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 7/79 Rpt: 39/118 Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 05/23/2023 Amazon Amount (\$) Payee address; State; Zip Code City; \$37.50 440 Terry Ave N Seattle, WA 98109-5210 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office supplies 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 8/79 Rpt: 40/118 Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 06/13/2023 Amazon Amount (\$) Payee address; State; Zip Code City; \$49.64 440 Terry Ave N Seattle, WA 98109-5210 **TYPE OF** Political Non-Political Х **EXPENDITURE**

SCHEDULE F4

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 10(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Food/Beverage Expense Gift/Awards/Memorials Expens Legal Services	Office Ov Polling Ex Printing E		Travel i Travel	ortation Equipment & Related Expense in District Out of District R (enter a category not listed above)
			The Instruction Guide ex	plains how to co	omplete this form.		
1	Total pages Schedule F4:	2 FILER NAM	E			3 Filer I	D (Ethics Commission Filers)
	Sch: 9/79 Rpt: 41/118	Turner, Ch	ristopher G. (The Hon	orable)		0006	2790
4	TOTAL OF UNITEMIZ	ZED EXPEND	DITURES CHARGEI	O TO A CRE	DIT CARD	\$	2,739.95
5	Date	6 Payee name	?				
L	05/11/2023	Amazon					
7	Amount (\$) \$75.00	8 Payee addre		State; Zip Co	ode		
		Seattle, W	A 98109-5210				
9	TYPE OF EXPENDITURE	X	Political	Non-Pol	itical		
10		(a) Category (S	See Categories listed at the top of	this schedule)	(b) Description		
	OF EXPENDITURE	Office Over	rhead/Rental Expense		I -	n, TX, officeho	xas. Complete Schedule T. Ider living expense
11	Complete ONLY if direct expenditure to benefit C/Ol		ficeholder name	Office sou	I ught	С	office held
	Date	Payee name)				
	06/13/2023	Amazon					
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode		
	\$104.01	440 Terry A	Ave N				
		Seattle, W	4 98109-5210				
	TYPE OF EXPENDITURE	Seattle, W	A 98109-5210 Political	Non-Pol	itical		
_	EXPENDITURE PURPOSE	X			(b) Description		
	EXPENDITURE	(a) Category (S	Political	this schedule)	(b) Description Check if travel		xas. Complete Schedule T.
	PURPOSE OF	(a) Category (S	Political See Categories listed at the top of	this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeho	xas. Complete Schedule T. Ider living expense
	PURPOSE OF	(a) Category (S	Political See Categories listed at the top of	this schedule)	(b) Description Check if travel	n, TX, officeho	·
	PURPOSE OF	(a) Category (s Office Over	Political See Categories listed at the top of	this schedule)	(b) Description Check if travel Check if Austir Office supplie	n, TX, officeho es	·
	PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (s Office Over	Political See Categories listed at the top of the ad/Rental Expense	this schedule)	(b) Description Check if travel Check if Austir Office supplie	n, TX, officeho es	lder living expense
	PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (s Office Over	Political See Categories listed at the top of the ad/Rental Expense	this schedule)	(b) Description Check if travel Check if Austir Office supplie	n, TX, officeho es	lder living expense
	PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (s Office Over	Political See Categories listed at the top of the ad/Rental Expense	this schedule)	(b) Description Check if travel Check if Austir Office supplie	n, TX, officeho es	lder living expense
	PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (s Office Over	Political See Categories listed at the top of the ad/Rental Expense	this schedule)	(b) Description Check if travel Check if Austir Office supplie	n, TX, officeho es	lder living expense
	PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (s Office Over	Political See Categories listed at the top of the ad/Rental Expense	this schedule)	(b) Description Check if travel Check if Austir Office supplie	n, TX, officeho es	lder living expense
	PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (s Office Over	Political See Categories listed at the top of the ad/Rental Expense	this schedule)	(b) Description Check if travel Check if Austir Office supplie	n, TX, officeho es	lder living expense
	PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (s Office Over	Political See Categories listed at the top of the ad/Rental Expense	this schedule)	(b) Description Check if travel Check if Austir Office supplie	n, TX, officeho es	lder living expense
	PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (s Office Over	Political See Categories listed at the top of the ad/Rental Expense	this schedule)	(b) Description Check if travel Check if Austir Office supplie	n, TX, officeho es	lder living expense
	PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (s Office Over	Political See Categories listed at the top of the ad/Rental Expense	this schedule)	(b) Description Check if travel Check if Austir Office supplie	n, TX, officeho es	lder living expense
	PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (s Office Over	Political See Categories listed at the top of the ad/Rental Expense	this schedule)	(b) Description Check if travel Check if Austir Office supplie	n, TX, officeho es	lder living expense

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide exp	lains how to complete this form.	
1 Total pages Schedule F4: Sch: 10/79 Rpt:	2 FILER NAME Turner, Christopher G. (The Honor	rable)	3 Filer ID (Ethics Commission Filers) 00062790
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$ 2,739.95
5 Date 01/06/2023	6 Payee name Amazon		
7 Amount (\$) \$112.50	440 Terry Ave N	State; Zip Code	
9 TYPE OF EXPENDITURE	Seattle, WA 98109-5210 X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense es
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name H	Office sought	Office held
Date 02/10/2023	Payee name Amazon Payee address; City; S	State; Zip Code	
Amount (\$) \$112.50	Payee address; City; S 440 Terry Ave N Seattle, WA 98109-5210	State, Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense es
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	Office sought	Office held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

nse Event Expense Loan Repayment/Reimburs

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services	Loan Repayment/Reimburs Office Overhead/Rental Exp Polling Expense Printing Expense Salaries/Wages/Contract La	pense	Transportation E Travel in District Travel Out of Dis	
	The Instruction Guide expl	ains how to complete this fo	rm.		
1 Total pages Schedule F4: Sch: 11/79 Rpt:	2 FILER NAME Turner, Christopher G. (The Honor	able)	3	Filer ID 00062790	(Ethics Commission Filers)
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$		2,739.95
5 Date 03/30/2023	6 Payee name Amazon		·		
7 Amount (\$) \$112.50	8 Payee address; City; S 440 Terry Ave N	state; Zip Code			
	Seattle, WA 98109-5210				
9 TYPE OF EXPENDITURE	X Political [Non-Political			
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Office Overhead/Rental Expense	Check	c if travel outsi	de of Texas. Com officeholder living	iplete Schedule T. g expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought		Office he	eld
Date 04/20/2023	Payee name Amazon				
Amount (\$) \$112.50	Payee address; City; S 440 Terry Ave N Seattle, WA 98109-5210	state; Zip Code			
TYPE OF EXPENDITURE	X Political	Non-Political			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Office Overhead/Rental Expense	Check	c if travel outsion of the contract of the con	de of Texas. Com officeholder living	iplete Schedule T. g expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought		Office he	eld

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By	Event Expense Fees Food/Beverage Expense / - Gift/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District
Candidate/Officeholder/Politica	al Committee Legal Services	Salaries/Wages/Contract Labor 1s how to complete this form.	OTHER (enter a category not listed above)
1 Total pages Schedule F4:		is now to complete this form.	3 Filer ID (Ethics Commission Filers)
Sch: 12/79 Rpt:	Turner, Christopher G. (The Honoral	ole)	00062790
4	ZED EXPENDITURES CHARGED T		\$ 2,739.95
5 Date	6 Payee name		L
06/21/2023	Amazon		
7 Amount (\$) \$112.50	8 Payee address; City; Sta 440 Terry Ave N	te; Zip Code	
	Seattle, WA 98109-5210		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
05/19/2023	American Express		
Amount (\$) \$45.00	Payee address; City; Sta 200 Vesey St New York, NY 10281-5525	te; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Fees	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense nembership fee
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE **F4**

Advertishing Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Food/Beverage Expense y - Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide explains	how to complete this form.	
1 Total pages Schedule F4:		-)	3 Filer ID (Ethics Commission Filers)
Sch: 13/79 Rpt:	Turner, Christopher G. (The Honorabl	e)	00062790
TOTAL OF UNITEMIX	ZED EXPENDITURES CHARGED TO	A CREDIT CARD	\$ 2,739.95
5 Date	6 Payee name		
06/07/2023	American Express		
7 Amount (\$) \$392.81	8 Payee address; City; State 200 Vesey St	e; Zip Code	
	New York, NY 10281-5525		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE	(a) Category (See Categories listed at the top of this so	hedule) (b) Description	
OF EXPENDITURE	Fees	· · ·	l outside of Texas. Complete Schedule T.
		 	in, TX, officeholder living expense membership fee
		Credit card i	nembership ree
11 Complete ONLY if direct expenditure to benefit C/O		Office sought	Office held
Date	Payee name		
06/13/2023	Arlington Chamber of Commerce		
Amount (\$) \$350.00	Payee address; City; State 505 E Broad St	e; Zip Code	
	Arlington, TX 76010		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE	(a) Category (See Categories listed at the top of this so		
OF EXPENDITURE	Fees		l outside of Texas. Complete Schedule T. in, TX, officeholder living expense
		Annual dues	
		7	
Complete <u>ONLY</u> if direct expenditure to benefit C/O		Office sought	Office held
•			

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ns 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 F4:	•	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)
Sch: 14/79 Rpt:	Turner, Christopher G. (The Honoral	ble)	00062790
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED T	O A CREDIT CARD	\$ 2,739.95
5 Date 04/08/2023	6 Payee name Arlington Mansfield YMCA		
7 Amount (\$) \$1,000.00	2200 S Davis Dr	ate; Zip Code	
9 TYPE OF EXPENDITURE	Arlington, TX 76013-6243	Non-Political	
		10.	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Contributions/Donations Made By Candidate/Officeholder/Political Con	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense Ort contribution
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
05/05/2023	Bob's Steak and Chop House		
Amount (\$) \$533.83	Payee address; City; Sta 301 Lavaca St Austin, TX 78701-3936	ite; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense Ileagues
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Loan Repayment Fees Office Overhead/ Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/C	Rental Expense Transportation Equipment & Related Expense Travel in District Travel Out of District
	The Instruction Guide explains how to complet	
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 15/79 Rpt:	Turner, Christopher G. (The Honorable)	00062790
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED TO A CREDIT	CARD \$ 2,739.95
5 Date 04/17/2023	6 Payee name Clayton Spangler Photographic Design	
7 Amount (\$) \$399.00	8 Payee address; City; State; Zip Code 235 Point Lick Dr	
	Charleston, WV 25306-6785	
9 TYPE OF EXPENDITURE	X Political Non-Political	
10 PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Session photograph
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
05/03/2023	Colin Allred Campaign	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 601631 Dallas, TX 75360-1631	
TYPE OF EXPENDITURE	X Political Non-Political	
PURPOSE OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 16/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 Payee name 5 Date 03/02/2023 Cort Furniture Rental Amount (\$) Payee address; State; Zip Code \$235.21 8900 Shoal Creek Blvd Austin, TX 78757-6853 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Austin apartment furniture rental 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/04/2023 Cort Furniture Rental Amount (\$) Payee address; City; State; Zip Code \$235.21 8900 Shoal Creek Blvd Ste 400 Austin, TX 78757-6853 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** X Check if Austin, TX, officeholder living expense Austin apartment furniture rental Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 17/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 Payee name 5 Date 05/02/2023 Cort Furniture Rental Amount (\$) Payee address; State; Zip Code \$235.21 8900 Shoal Creek Blvd Austin, TX 78757-6853 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Austin apartment furniture rental 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/02/2023 Cort Furniture Rental Amount (\$) Payee address; City; State; Zip Code \$235.21 8900 Shoal Creek Blvd Ste 400 Austin, TX 78757-6853 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** X Check if Austin, TX, officeholder living expense Austin apartment furniture rental Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 18/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 Date Payee name 5 02/06/2023 Cort Furniture Rental Amount (\$) Payee address; State; Zip Code \$470.42 8900 Shoal Creek Blvd Austin, TX 78757-6853 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Austin apartment furniture rental 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/25/2023 Dashlane Amount (\$) Payee address; City; State; Zip Code \$575.64 44 W 18th St New York, NY 10011-4611 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

Office Overhead/Rental Expense

Candidate/Officeholder name

Check if Austin, TX, officeholder living expense Password storage subscription

Office held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica		Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide explains	how to complete this form.	
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 19/79 Rpt:	Turner, Christopher G. (The Honorable	e)	00062790
4 TOTAL OF UNITEMI.	ZED EXPENDITURES CHARGED TO	A CREDIT CARD	\$ 2,739.95
5 Date	6 Payee name		
03/17/2023	Elizabeth Beck Campaign		
7 Amount (\$) \$2,500.00	8 Payee address; City; State PO Box 12328	; Zip Code	
	Fort Worth, TX 76110-8328		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE	(a) Category (See Categories listed at the top of this sch	nedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Comm	<u>-</u>	outside of Texas. Complete Schedule T. TX, officeholder living expense ibution
11 Complete ONLY if direct expenditure to benefit C/O		Office sought	Office held
Date	Payee name		
06/21/2023	Erin Zwiener Campaign		
Amount (\$)	Payee address; City; State	; Zip Code	
\$1,000.00	PO Box 184		
	Driftwood, TX 78619-0184		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF	(a) Category (See Categories listed at the top of this sch		
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Comm	<u></u>	outside of Texas. Complete Schedule T. TX, officeholder living expense
	Candidate/Onicenoider/Political Comm	Political contri	
Complete ONLY if direct expenditure to benefit C/O		Office sought	Office held
		Office sought	Office held
		Office sought	Office held
		Office sought	Office held
		Office sought	Office held
		Office sought	Office held
		Office sought	Office held
		Office sought	Office held
		Office sought	Office held
		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 20/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 06/23/2023 Got Junk Austin Amount (\$) Payee address; City; State; Zip Code \$321.17 8530 Cinder Bed Rd Ste 2000 Lorton, VA 22079-1478 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Apartment move out junk removal 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/17/2023 HEB Amount (\$) Payee address; City; State; Zip Code \$14.10 2701 E 7th St Austin, TX 78702-3907

Non-Political

Office sought

(b) Description

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense Snacks and beverages for office

Political

Food/Beverage Expense

Candidate/Officeholder name

(a) Category (See Categories listed at the top of this schedule)

Χ

TYPE OF

PURPOSE

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursen Office Overhead/Rental Exper Polling Expense Printing Expense Salaries/Wages/Contract Labo (plains how to complete this form	rransportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 21/79 Rpt:	Turner, Christopher G. (The Hon	orable)	00062790
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	D TO A CREDIT CARD	\$ 2,739.95
5 Date 03/14/2023	6 Payee name HEB		•
7 Amount (\$) \$23.01	8 Payee address; City; 2701 E 7th St	State; Zip Code	
	Austin, TX 78702-3907		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	Check if	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense and beverages for office
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
05/19/2023	HEB		
Amount (\$) \$23.04	Payee address; City; 2701 E 7th St Austin, TX 78702-3907	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top o Food/Beverage Expense	Check if	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense and beverages for office
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Accounting/Banking Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Food/Beverage Expense Gift/Awards/Memorials Expen Legal Services The Instruction Guide e	Office Over Polling Exp se Printing Exp Salaries/Wi	pense ages/Contract Labor	Transportatior Travel in Distr Travel Out of	
1 Total pages Schedule F4:				3 Filer ID	(Ethics Commission Filers)
Sch: 22/79 Rpt:	Turner, Christopher G. (The Hor	norable)		00062790)
TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	D TO A CREI	DIT CARD	\$	2,739.95
5 Date 04/04/2023	6 Payee name HEB				
7 Amount (\$) \$23.19	8 Payee address; City; 2701 E 7th St	State; Zip Coo	le		
	Austin, TX 78702-3907				
9 TYPE OF EXPENDITURE	X Political	Non-Politi	cal		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	of this schedule)	—	, TX, officeholder liv	• •
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	ht	Office	held
Date 01/22/2023	Payee name HEB				
Amount (\$) \$24.78	Payee address; City; 2701 E 7th St Austin, TX 78702-3907	State; Zip Coo	le		
TYPE OF EXPENDITURE	X Political	Non-Politi	cal		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	of this schedule)		, TX, officeholder liv	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office soug	ht	Office	held

SCHEDULE F4

Advertusing Experise Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Food/Beverage Expense Fold/Awards/Memorials Expense Fees Food/Beverage Expense Figure 1 Food/Beverage Expense Frees Food/Beverage Expense Frees Food/Beverage Expense Food/	Office Ove Polling Ex se Printing E Salaries/V	kpense /ages/Contract Labor	Transportat Travel in Di Travel Out o	
1 Total pages Schedule F4:		xpiams now to co	implete unis formi	3 Filer ID	(Ethics Commission Filers)
Sch: 23/79 Rpt:	Turner, Christopher G. (The Hor	norable)		0006279	90
TOTAL OF UNITEMIA	ZED EXPENDITURES CHARGE	D TO A CRE	DIT CARD	\$	2,739.95
5 Date 02/12/2023	6 Payee name HEB				
7 Amount (\$) \$31.49	8 Payee address; City; 2701 E 7th St	State; Zip Co	de		
0 TVD5 05	Austin, TX 78702-3907				
9 TYPE OF EXPENDITURE	X Political	Non-Poli	tical		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	of this schedule)	—	n, TX, officeholder	- '
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Offic	e held
Date 04/02/2023	Payee name HEB				
Amount (\$) \$35.47	Payee address; City; 2701 E 7th St Austin, TX 78702-3907	State; Zip Co	de		
TYPE OF EXPENDITURE	X Political	Non-Poli	tical		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	of this schedule)		n, TX, officeholder	
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name H	Office sou	ght	Offic	e held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B	Event Expense Fees Food/Beverage Expense y - Gftf/Awards/Memorials Expense	Office Over Polling Exp			
Candidate/Officeholder/Politica	al Committee Legal Services	Salaries/W	ages/Contract Labor		a category not listed above)
4 Tatal manage Oak adula 54.	The Instruction Guide exp	olains how to con	nplete this form.	a Elemin	(Fabine Commission Filess)
1 Total pages Schedule F4: Sch: 24/79 Rpt:	Turner, Christopher G. (The Hono	orable)		3 Filer ID 00062790	(Ethics Commission Filers)
4 TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED) TO A CREI	DIT CARD	\$	2,739.95
5 Date 01/30/2023	6 Payee name HEB				
7 Amount (\$) \$46.18	8 Payee address; City; 2701 E 7th St	State; Zip Coo	de		
	Austin, TX 78702-3907				
9 TYPE OF EXPENDITURE	X Political	Non-Politi	ical		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	this schedule)	Check if Austir	outside of Texas. Com n, TX, officeholder living beverages for c	g expense
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	jht	Office h	eld
Date	Payee name				
01/16/2023	HEB				
Amount (\$) \$58.06	2701 E 7th St	State; Zip Coo	de		
TVPE OF	Austin, TX 78702-3907				
TYPE OF EXPENDITURE	X Political	Non-Politi			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	this schedule)	Check if Austir	outside of Texas. Com n, TX, officeholder living beverages for c	g expense
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	jht	Office h	eld

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Overl Polling Exp se Printing Exp Salaries/Wa	oense ages/Contract Labor	Transportat Travel in Di Travel Out	
1 Total pages Schedule F4:		<u>·</u>	·	3 Filer ID	(Ethics Commission Filers)
Sch: 25/79 Rpt:	Turner, Christopher G. (The Hon	iorable)		0006279	90
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	D TO A CRED	DIT CARD	\$	2,739.95
5 Date 02/25/2023	6 Payee name HEB				
7 Amount (\$) \$61.57	8 Payee address; City; 2701 E 7th St	State; Zip Cod	le		
	Austin, TX 78702-3907				
9 TYPE OF EXPENDITURE	X Political	Non-Politi	cal		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	if this schedule)	ш	n, TX, officeholder	- ·
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office soug	ht	Offic	e held
Date	Payee name				
03/01/2023	HEB				
Amount (\$) \$70.75	Payee address; City; 2701 E 7th St	State; Zip Cod	le		
	Austin, TX 78702-3907				
TYPE OF EXPENDITURE	X Political	Non-Politi	cal		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	f this schedule)	ш	n, TX, officeholder	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office soug	ht	Offic	e held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made	Event Expense Fees Food/Beverage Expense By - Gift/Awards/Memorials Expense	Loan Repayment/Reimburseme Office Overhead/Rental Expens Polling Expense Printing Expense	
Candidate/Officeholder/Politi	cal Committee Legal Services	Salaries/Wages/Contract Labor	r OTHER (enter a category not listed above)
4. Tatal manage Calculus E4	-	ains how to complete this form.	<u> </u>
1 Total pages Schedule F4 Sch: 26/79 Rpt:	Turner, Christopher G. (The Honor	able)	3 Filer ID (Ethics Commission Filers) 00062790
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$ 2,739.95
5 Date 06/15/2023	6 Payee name HEB		•
7 Amount (\$) \$93.61	1 '	State; Zip Code	
	Austin, TX 78702-3907		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of th Food/Beverage Expense	Check if to	ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense nd beverages for office
11 Complete ONLY if direct expenditure to benefit C/G	Candidate/Officeholder name DH	Office sought	Office held
Date	Payee name		
04/13/2023	HEB		
Amount (\$) \$93.85	2701 E 7th St	state; Zip Code	
TVDE OF	Austin, TX 78702-3907		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Food/Beverage Expense	Check if tr	ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense nd beverages for office
Complete ONLY if direct expenditure to benefit C/0	Candidate/Officeholder name DH	Office sought	Office held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica		Polling Exper Printing Expe		Travel in Distric	
	The Instruction Guide expla	ins how to comp	olete this form.		
1 Total pages Schedule F4:		-1-1-)		3 Filer ID	(Ethics Commission Filers)
Sch: 27/79 Rpt:	Turner, Christopher G. (The Honora	able)		00062790	
	ZED EXPENDITURES CHARGED	TO A CRED	IT CARD	\$	2,739.95
5 Date	6 Payee name				
02/06/2023	HEB				
7 Amount (\$) \$94.22	8 Payee address; City; St 2701 E 7th St	tate; Zip Code)		
	Austin, TX 78702-3907				
9 TYPE OF EXPENDITURE	X Political	Non-Politic	al		
10 PURPOSE	(a) Category (See Categories listed at the top of this	s schedule) (h) Description		
OF EXPENDITURE	Food/Beverage Expense		<u> </u>	outside of Texas. Cor	
			Snacks and b	TX, officeholder livin	
11 Complete ONLY if direct expenditure to benefit C/O	 Candidate/Officeholder name 	Office sough	it	Office h	neld
Date	Payee name				
03/12/2023	HEB				
Amount (\$) \$94.65	Payee address; City; Si 2701 E 7th St	tate; Zip Code)		
	Austin, TX 78702-3907				
TYPE OF EXPENDITURE	X Political	Non-Politic	al		
PURPOSE OF	(a) Category (See Categories listed at the top of this	s schedule) (b	Description		
EXPENDITURE	Food/Beverage Expense		=	outside of Texas. Cor TX, officeholder livin	
			Snacks and b		
				J	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	t	Office h	neld

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Over Polling Exp se Printing Exp Salaries/Wa	oense ages/Contract Labor	Transportation Travel in Dis Travel Out o	
1 Total pages Schedule F4:		<u> </u>	·	3 Filer ID	(Ethics Commission Filers)
Sch: 28/79 Rpt:	Turner, Christopher G. (The Hon	iorable)		0006279	0
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	D TO A CREI	DIT CARD	\$	2,739.95
5 Date 01/06/2023	6 Payee name HEB				
7 Amount (\$) \$99.15	8 Payee address; City; 2701 E 7th St	State; Zip Coo	le		
	Austin, TX 78702-3907				
9 TYPE OF EXPENDITURE	X Political	Non-Politi	cal		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	f this schedule)	ш	ı, TX, officeholder li	- '
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office soug	ht	Office	e held
Date	Payee name				
05/19/2023	HEB				
Amount (\$) \$126.17	Payee address; City; 2701 E 7th St	State; Zip Coo	le		
	Austin, TX 78702-3907				
TYPE OF EXPENDITURE	X Political	Non-Politi	cal		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	f this schedule)		ı, TX, officeholder li	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office soug	ht	Office	e held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Overho Polling Expe se Printing Expe Salaries/Wag	ense ges/Contract Labor	Transportatior Travel in Distri Travel Out of I	
1 Total pages Schedule F4:		<u>·</u>		3 Filer ID	(Ethics Commission Filers)
Sch: 29/79 Rpt:	Turner, Christopher G. (The Hon	orable)		00062790	
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	D TO A CRED	IT CARD	\$	2,739.95
5 Date 04/28/2023	6 Payee name HEB				
7 Amount (\$) \$151.99	8 Payee address; City; 2701 E 7th St	State; Zip Code)		
	Austin, TX 78702-3907				
9 TYPE OF EXPENDITURE	X Political	Non-Politic	al		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	f this schedule) (k	<u></u>	outside of Texas. Cc , TX, officeholder livi Deverages for	ing expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sough	nt	Office	held
Date	Payee name				
03/23/2023	HEB				
Amount (\$) \$155.87	Payee address; City; 2701 E 7th St	State; Zip Code	9		
TYPE OF	Austin, TX 78702-3907				
EXPENDITURE	X Political	Non-Politic	al		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top o Food/Beverage Expense	f this schedule) (k	—	outside of Texas. Co , TX, officeholder livi Deverages for	ing expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sough	nt	Office	held

SCHEDULE F4

Advertusing Experise Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Food/Beverage Expense Gift/Awards/Memorials Expen Legal Services The Instruction Guide e	Office Ov Polling Ex se Printing E Salaries/V	kpense /ages/Contract Labor	Transporta Travel in I Travel Ou	infrunciasing Expense attion Equipment & Related Expense District it of District enter a category not listed above)
1 Total pages Schedule F4: Sch: 30/79 Rpt:				3 Filer ID 000627	
4	ZED EXPENDITURES CHARGE		DIT CARD	\$	2,739.95
5 Date 05/28/2023	6 Payee name HEB			1	
7 Amount (\$) \$595.34	8 Payee address; City; 2701 E 7th St	State; Zip Co	de		
9 TYPE OF	Austin, TX 78702-3907				
EXPENDITURE	X Political	Non-Pol	tical		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	of this schedule)	<u> </u>	n, TX, officeholde	• .
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sou	ght	Offi	ice held
Date 03/16/2023	Payee name Hertz				
Amount (\$) \$664.93	Payee address; City; 8501 Williams Rd Estero, FL 33928-3325	State; Zip Co	de		
TYPE OF EXPENDITURE	X Political	Non-Pol	tical		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Travel Out of District	of this schedule)		n, TX, officeholde	
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name	Office sou	ght	Offi	ice held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Ov Polling Ex Printing E			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
		The Instruction Guide ex	plains how to co	mplete this form.		
1 Total pages Schedule F4:	2 FILER NAM	1E			3	Filer ID (Ethics Commission Filers)
Sch: 31/79 Rpt:	Turner, Cl	nristopher G. (The Hone	orable)			00062790
4 TOTAL OF UNITEMI	ZED EXPEN	DITURES CHARGEI	O TO A CRE	DIT CARD	\$	2,739.95
5 Date	6 Payee nam	е				
04/15/2023	Hertz					
7 Amount (\$) \$664.93	8 Payee addi 8501 Willi		State; Zip Co	ode		
	Estero, FL	. 33928-3325				
9 TYPE OF EXPENDITURE	X	Political	Non-Pol	itical		
10 PURPOSE	(a) Category	See Categories listed at the top of	this schedule)	(b) Description		
OF EXPENDITURE	Travel Ou	t of District		l <u>—</u>		de of Texas. Complete Schedule T. officeholder living expense
				🗀		stin during session
11 Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office sou	<u>l</u> ight		Office held
Date	Payee nam	e				
05/15/2023	Hertz					
Amount (\$)	Payee addı	ress; City;	State; Zip Co	ode		
\$664.93	8501 Willi	ams Rd				
	Estero, FL	. 33928-3325				
TYPE OF EXPENDITURE	X	Political	Non-Pol	itical		
PURPOSE	(a) Category	See Categories listed at the top of	this schedule)	(b) Description		
OF EXPENDITURE	Travel Ou	t of District		l <u>—</u>		de of Texas. Complete Schedule T.
				🗀		officeholder living expense
				Rental cal in	Au	stin during session
Complete <u>ONLY</u> if direct expenditure to benefit C/O		fficeholder name	Office sou	<u> </u> ight		Office held

SCHEDULE F4

	Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense	Loan Repa Office Ove Polling Ex	ayment/Reimbursement rhead/Rental Expense pense		undraising Expense on Equipment & Related Expense trict
	Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards/Memorials Expense al Committee Legal Services		xpense /ages/Contract Labor	Travel Out of OTHER (ente	District er a category not listed above)
		The Instruction Guide exp	olains how to co	mplete this form.		
1	Total pages Schedule F4:				3 Filer ID	(Ethics Commission Filers)
	Sch: 32/79 Rpt:	Turner, Christopher G. (The Hono	rable)		0006279	0
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED) TO A CRE	DIT CARD	\$	2,739.95
5	Date 02/14/2023	6 Payee name Hertz				
7	Amount (\$) \$717.95	8 Payee address; City; 8501 Williams Rd	State; Zip Co	de		
		Estero, FL 33928-3325				
9	TYPE OF EXPENDITURE	X Political	Non-Poli	iical		
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Travel Out of District	this schedule)	Check if Austin	outside of Texas. C n, TX, officeholder lin Austin durinq	
11	. Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office	held
	Date	Payee name				
	03/01/2023	Hill Country Springs				
	Amount (\$) \$8.66	Payee address; City; 10019 S I 35	State; Zip Co	de		
		Austin, TX 78747				
	TYPE OF EXPENDITURE	X Political	Non-Poli	tical		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Food/Beverage Expense	this schedule)	Check if Austin	outside of Texas. C n, TX, officeholder live water delive	- ·
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office	held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 33/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 01/02/2023 Hill Country Springs Amount (\$) Payee address; State; Zip Code \$29.15 10019 S I 35 Austin, TX 78747 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Capitol office water delivery Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Hill Country Springs 02/02/2023 Amount (\$) Payee address; City; State; Zip Code \$29.15 10019 S I 35 Austin, TX 78747 **TYPE OF** Non-Political Χ Political **EXPENDITURE**

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 34/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 05/01/2023 Hill Country Springs Amount (\$) Payee address; State; Zip Code \$54.90 10019 S I 35 Austin, TX 78747 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Capitol office water delivery 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Hill Country Springs 04/03/2023 Amount (\$) Payee address; City; State; Zip Code \$69.15 10019 S I 35 Austin, TX 78747 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense

Forms provided by Texas Ethics Commission

Complete ONLY if direct

expenditure to benefit C/OH

Candidate/Officeholder name

www.ethics.state.tx.us

Office sought

Version V3.5.1.a18ea2ca

Capitol office water delivery

Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 35/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 06/01/2023 Hill Country Springs Amount (\$) Payee address; State; Zip Code \$109.39 10019 S I 35 Austin, TX 78747 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Capitol office water delivery 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 01/19/2023 IT Caucus Amount (\$) Payee address; City; State; Zip Code \$250.00 1108 Lavaca St Ste Pm 110 Austin, TX 78701-2110 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Caucus dues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political	l Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide exp	lains how to complete this form.	
1 Total pages Schedule F4: Sch: 36/79 Rpt:	2 FILER NAME Turner, Christopher G. (The Hono	rable)	3 Filer ID (Ethics Commission Filers) 00062790
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$ 2,739.95
5 Date 01/18/2023	6 Payee name Intuit		
	8 Payee address; City; 2632 Marine Way	State; Zip Code	
9 TYPE OF	Mountain View, CA 94043-1126	Non-Political	
EXPENDITURE	A Tomasai	TVOIT T SINGOLI	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of t Accounting/Banking	Check if trave	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense SSING fee
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name H	Office sought	Office held
Date 02/15/2023	Payee name Intuit		
Amount (\$) \$295.51	Payee address; City; 2632 Marine Way Mountain View, CA 94043-1126	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Accounting/Banking	Check if trave	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense Software subscription
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 37/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 06/30/2023 JW Marriott Amount (\$) Payee address; City; State; Zip Code \$189.36 110 E 2nd St Austin, TX 78701-4649 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Lodging in Austin 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/29/2023 JW Marriott Amount (\$) Payee address; City; State; Zip Code \$400.00 110 E 2nd St Austin, TX 78701-4649

Non-Political

Office sought

(b) Description

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense End of session gift card for staff

Political

(a) Category (See Categories listed at the top of this schedule)

Χ

Travel Out of District

Candidate/Officeholder name

TYPE OF

PURPOSE

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Contributions/ Donations Made By Candidate/Officeholder/Politica		Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide explains	s how to complete this form.	
1 Total pages Schedule F4:			3 Filer ID (Ethics Commission Filers)
Sch: 38/79 Rpt:	Turner, Christopher G. (The Honorab	le)	00062790
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED TO) A CREDIT CARD	\$ 2,739.95
5 Date 01/23/2023	6 Payee name Junior Ezeonu Campaign		
7 Amount (\$) \$250.00	8 Payee address; City; State 5332 W Cove Way	e; Zip Code	
	Grand Prairie, TX 75052-8533		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so Contributions/Donations Made By Candidate/Officeholder/Political Com	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ribution
11 Complete ONLY if direct expenditure to benefit C/Oł		Office sought	Office held
Date	Payee name		
01/26/2023	LBJ Foundation		
Amount (\$) \$86.60	2313 Red River St	e; Zip Code	
TVD= 0=	Austin, TX 78705-5737		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense nission for staff
Complete ONLY if direct expenditure to benefit C/O		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 39/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 Payee name Date 01/23/2023 LBJ Foundation Amount (\$) Payee address; State; Zip Code City; \$117.00 2313 Red River St Austin, TX 78705-5737 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Framed photograph for office Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/13/2023 Legislative Study Group

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 40/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 01/06/2023 Mansfield Area Chamber of Commerce Amount (\$) Payee address; City; State; Zip Code \$35.00 114 N Main St Mansfield, TX 76063-1724 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch ticket Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/09/2023 Mansfield Area Chamber of Commerce Amount (\$) Payee address; City; State; Zip Code \$360.00 114 N Main St

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Fees Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Polling Expense Travel in District Travel Out of District OTHER (enter a category not listed above) Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 41/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95

5	Date	6 Payee name
L	06/23/2023	Michael's
7	Amount (\$)	8 Payee address; City; State; Zip Code
	\$43.29	3201 Bee Caves Rd
		Austin, TX 78746-6771
Ļ	TVDE OF	Austili, 1 \(\tau \) 10140-0111
9	TYPE OF EXPENDITURE	X Political Non-Political
10		(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Certificate frames
		Certificate frames
11	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/21/2023	Michael's
	Amount (\$)	Payee address; City; State; Zip Code
	\$72.50	3201 Bee Caves Rd
		Austin, TX 78746-6771
	TYPE OF EXPENDITURE	X Political Non-Political
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
		Check if Austin, TX, officeholder living expense Certificate frames
		Certificate frames
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
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EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 42/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 01/21/2023 Michael's Amount (\$) Payee address; City; State; Zip Code \$83.32 3201 Bee Caves Rd Austin, TX 78746-6771 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Certificate frames 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/11/2023 Michael's Amount (\$) Payee address; City; State; Zip Code \$84.85 3201 Bee Caves Rd Austin, TX 78746-6771 **TYPE OF** Non-Political Political Χ

(b) Description

Office sought

Frames for office

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense

PURPOSE

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

(a) Category (See Categories listed at the top of this schedule)

Gift/Awards/Memorials Expense

Candidate/Officeholder name

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 43/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 02/11/2023 Michael's Amount (\$) Payee address; City; State; Zip Code 3201 Bee Caves Rd \$128.82 Austin, TX 78746-6771 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Certificate frames 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/21/2023 Mihaela Plesa Campaign Amount (\$) Payee address; City; State; Zip Code \$1,000.00 PO Box 796311 Dallas, TX 75379-6311 **TYPE OF** Non-Political Political Χ **EXPENDITURE**

(b) Description

Office sought

Political donation

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense

PURPOSE

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

(a) Category (See Categories listed at the top of this schedule)

Candidate/Officeholder/Political Committee

Contributions/Donations Made By

Candidate/Officeholder name

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 44/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 03/01/2023 NGP Van Amount (\$) Payee address; State; Zip Code City; \$469.04 655 15th St NW Ste 650 Washington, DC 20005-5738 **TYPE OF** Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign database service 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/01/2023 NGP Van Payee address: Amount (\$) City; State; Zip Code \$469.04 655 15th St NW Ste 650 Washington, DC 20005-5738 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign database service Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 45/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 05/01/2023 NGP Van Amount (\$) Payee address; State; Zip Code City; \$469.04 655 15th St NW Ste 650 Washington, DC 20005-5738 **TYPE OF** Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign database service 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/01/2023 NGP Van Payee address: Amount (\$) City; State; Zip Code \$469.04 655 15th St NW Ste 650 Washington, DC 20005-5738 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign database service Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 46/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 02/23/2023 NGP Van Amount (\$) Payee address; State; Zip Code City; \$938.08 655 15th St NW Ste 650 Washington, DC 20005-5738 TYPE OF Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign database service 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date Nordstrom 05/24/2023 Amount (\$) Payee address; City; State; Zip Code \$250.00 2901 S Capital Of Texas Hwy Austin, TX 78746-8101 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense

Forms provided by Texas Ethics Commission

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Candidate/Officeholder name

www.ethics.state.tx.us

Office sought

Version V3.5.1.a18ea2ca

Check if Austin, TX, officeholder living expense

Office held

End of session gift for staff

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Accounting/Banking Fees Office Overhead/Rental Expense		
	The Instruction Guide explai	ins how to complete this form.	
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 47/79 Rpt:	Turner, Christopher G. (The Honora	ıble)	00062790
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED 1	TO A CREDIT CARD	\$ 2,739.95
5 Date 01/18/2023	6 Payee name Planned Parenthood Texas Votes		
7 Amount (\$) \$250.00	8 Payee address; City; Sta PO Box 41646	ate; Zip Code	
	Austin, TX 78704-0028		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Contributions/Donations Made By Candidate/Officeholder/Political Cor	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ribution
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
01/17/2023	Polvo's Downtown		
Amount (\$) \$97.52	Payee address; City; Sta 360 Nueces St Austin, TX 78701-4195	ate; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ns 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 Cabadula F4	<u> </u>	is now to complete this form.	3 Filer ID (Ethics Commission Filers)
1 Total pages Schedule F4: Sch: 48/79 Rpt:	Turner, Christopher G. (The Honoral	3 Filer ID (Ethics Commission Filers) 00062790	
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED T	O A CREDIT CARD	\$ 2,739.95
5 Date 03/13/2023	6 Payee name Polvo's Downtown		
7 Amount (\$) \$141.08	8 Payee address; City; Sta 360 Nueces St Austin, TX 78701-4195	te; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE	(a) Category (See Categories listed at the top of this	schedule) (b) Description	
OF EXPENDITURE	Food/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
01/02/2023	Public Storage		
Amount (\$) \$129.00	Payee address; City; Sta 1800 S Lamar Blvd Austin, TX 78704-3328	te; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. 1, TX, officeholder living expense Orage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Fees Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Polling Expense Travel in District Travel Out of District OTHER (enter a category not listed above) Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 49/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95

5 Date	6 Payee name	
02/02/2023	Public Storage	
7 Amount (\$)	8 Payee address; City; State;	Zip Code
\$129.00	1800 S Lamar Blvd	
·		
	Austin, TX 78704-3328	
9 TYPE OF		
EXPENDITURE	X Political	Non-Political
10 PURPOSE	(a) Category (See Categories listed at the top of this sche	dule) (b) Description
OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Office Overflead/Refital Expense	Check if Austin, TX, officeholder living expense
		Campaign storage
11 Complete ONLY if direct	Candidate/Officeholder name O	ffice sought Office held
expenditure to benefit C/O		
Data	Davies name	
Date	Payee name	
03/02/2023	Public Storage	
Amount (\$)		Zip Code
\$150.00	1800 S Lamar Blvd	
	Austin, TX 78704-3328	
TYPE OF	X Political	Non-Political
EXPENDITURE		
PURPOSE	(a) Category (See Categories listed at the top of this sche	
PURPOSE OF		dule) (b) Description Check if travel outside of Texas. Complete Schedule T.
PURPOSE	(a) Category (See Categories listed at the top of this sche	dule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
PURPOSE OF	(a) Category (See Categories listed at the top of this sche	dule) (b) Description Check if travel outside of Texas. Complete Schedule T.
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche	dule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this sche Office Overhead/Rental Expense Candidate/Officeholder name	dule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Office Overhead/Rental Expense Candidate/Officeholder name	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign storage
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this sche Office Overhead/Rental Expense Candidate/Officeholder name	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign storage
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this sche Office Overhead/Rental Expense Candidate/Officeholder name	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign storage
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this sche Office Overhead/Rental Expense Candidate/Officeholder name	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign storage
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this sche Office Overhead/Rental Expense Candidate/Officeholder name	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign storage
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this sche Office Overhead/Rental Expense Candidate/Officeholder name	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign storage
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this sche Office Overhead/Rental Expense Candidate/Officeholder name	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign storage
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this sche Office Overhead/Rental Expense Candidate/Officeholder name	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign storage
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this sche Office Overhead/Rental Expense Candidate/Officeholder name	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign storage
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this sche Office Overhead/Rental Expense Candidate/Officeholder name	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign storage
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this sche Office Overhead/Rental Expense Candidate/Officeholder name	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign storage
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this sche Office Overhead/Rental Expense Candidate/Officeholder name	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign storage

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 50/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 04/02/2023 Public Storage Amount (\$) Payee address; City; State; Zip Code \$150.00 1800 S Lamar Blvd Austin, TX 78704-3328 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign storage 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 51/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 06/02/2023 Public Storage Amount (\$) Payee address; City; State; Zip Code \$150.00 1800 S Lamar Blvd Austin, TX 78704-3328 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign storage 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/06/2023 Southern University Foundation Amount (\$) Payee address; City; State; Zip Code \$2,500.00 3100 Cleburne St Houston, TX 77004-4501 TYPE OF Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation

Forms provided by Texas Ethics Commission

Complete ONLY if direct

expenditure to benefit C/OH

Candidate/Officeholder name

www.ethics.state.tx.us

Office sought

Version V3.5.1.a18ea2ca

Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor S 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 F4:	2 EILED NAME	·	3 Filer ID (Ethics Commission Filers)
Sch: 52/79 Rpt:	Turner, Christopher G. (The Honorab	le)	00062790
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED TO	A CREDIT CARD	\$ 2,739.95
5 Date 01/03/2023	6 Payee name Spectrum		
7 Amount (\$) \$46.13	8 Payee address; City; State 2344 Rutland Dr	e; Zip Code	
9 TYPE OF	Austin, TX 78758-5236		
EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Austin apartr	ment utilities
11 Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
02/24/2023	Spectrum		
Amount (\$) \$178.57	Payee address; City; State 2344 Rutland Dr	e; Zip Code	
	Austin, TX 78758-5236		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ment utilities
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense	Office Ov Polling Ex	ayment/Reimbursement erhead/Rental Expense pense		ndraising Expense Equipment & Related Expense ct		
Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Salaries/\	/ages/Contract Labor	Travel Out of D OTHER (enter	District a category not listed above)		
	The Instruction Guide exp	plains how to co	mplete this form.				
1 Total pages Schedule F4: Sch: 53/79 Rpt:		2 FILER NAME Turner, Christopher G. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00062790					
4	Tamor, ermotopher er (me mene			00002100			
TOTAL OF UNITEMIZ	ED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95						
5 Date	6 Payee name						
03/24/2023	Spectrum						
7 Amount (\$) \$178.57	8 Payee address; City; 2344 Rutland Dr	State; Zip Co	de				
	Austin, TX 78758-5236						
9 TYPE OF	<u> </u>						
EXPENDITURE	X Political	Non-Pol					
10 PURPOSE OF	(a) Category (See Categories listed at the top of	this schedule)	(b) Description				
EXPENDITURE	Office Overhead/Rental Expense		=	outside of Texas. Co , TX, officeholder livir			
			X Check if Austin Austin apartn		ng expense		
			rastiii apaitii	none dunico			
11 Complete ONLY if direct	Candidate/Officeholder name	Office sou	aht	Office h	neld		
expenditure to benefit C/Ol		0.1100 000	giii	0.1100 1	1010		
Date	Payee name						
04/24/2023	Spectrum						
Amount (\$)	Payee address; City;	State; Zip Co	de				
\$178.57	2344 Rutland Dr						
	Austin, TX 78758-5236						
TYPE OF EXPENDITURE	X Political	Non-Pol	tical				
PURPOSE	(a) Category (See Categories listed at the top of	this schedule)	(b) Description				
OF EXPENDITURE	Office Overhead/Rental Expense			outside of Texas. Co	•		
LXI LINDITORE				, TX, officeholder livir	ng expense		
			Austin apartn	nent utilities			
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ght	Office h	neld		
l							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	ll Committee Legal Services	Polling Expense Printing Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide expl	ains how to complete this form.	
1 Total pages Schedule F4: Sch: 54/79 Rpt:	2 FILER NAME Turner, Christopher G. (The Honor	rable)	3 Filer ID (Ethics Commission Filers) 00062790
4	ZED EXPENDITURES CHARGED	·	\$ 2,739.95
	6 Payee name		
05/24/2023	Spectrum		
7 Amount (\$) \$178.57	2344 Rutland Dr	State; Zip Code	
	Austin, TX 78758-5236		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF	(a) Category (See Categories listed at the top of the		
EXPENDITURE	Office Overhead/Rental Expense	X Check if Aus	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense tment utilities
11 Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
06/24/2023	Spectrum		
Amount (\$) \$178.57	Payee address; City; S 2344 Rutland Dr	State; Zip Code	
	Austin, TX 78758-5236		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF	(a) Category (See Categories listed at the top of the	_ ·	olovskih of Tours Complete School II T
EXPENDITURE	Office Overhead/Rental Expense	<u> </u>	rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
			tment utilities
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 55/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 01/24/2023 Spectrum Amount (\$) Payee address; State; Zip Code City; \$332.62 2344 Rutland Dr Austin, TX 78758-5236 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Austin apartment utilities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 Store More Storage Payee address: Amount (\$) City; State; Zip Code \$167.00 466 S SH 360 Grand Prairie, TX 75052 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign storage

Complete ONLY if direct

expenditure to benefit C/OH

Candidate/Officeholder name

Office sought

Office held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Ove Polling Ex Printing E		Tra Tra	ansportation Equipment & Related Expense avel in District avel Out of District THER (enter a category not listed above)
			The Instruction Guide exp				
1	Total pages Schedule F4:	2 FILER NAMI	Ξ			3 Fil	er ID (Ethics Commission Filers)
	Sch: 56/79 Rpt:	Turner, Ch	ristopher G. (The Hono	rable)		00	0062790
4	TOTAL OF UNITEMIZ	ZED EXPEND	ITURES CHARGED	TO A CRE	DIT CARD	\$	2,739.95
5	Date	6 Payee name					
	02/15/2023	Store More	Storage				
7	Amount (\$) \$167.00	8 Payee addre 466 S SH 3	•	State; Zip Co	de		
		Grand Prai	rie, TX 75052				
9	TYPE OF EXPENDITURE	X	Political	Non-Poli	tical		
10		(a) Category (S	ee Categories listed at the top of	this schedule)	(b) Description		
	OF EXPENDITURE	Office Over	head/Rental Expense		<u> </u>	n, TX, offi	of Texas. Complete Schedule T. ceholder living expense
11	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ght		Office held
	Date	Payee name					
	03/15/2023	Store More	Storage				
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de		
	\$167.00	466 S SH 3	860				
		Grand Prai	rie, TX 75052				
	TYPE OF EXPENDITURE	X	Political	Non-Poli	tical		
	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b) Description		
	OF EXPENDITURE	Office Over	head/Rental Expense		<u> </u>		of Texas. Complete Schedule T.
					Campaign st		ceholder living expense
					Campaign si	orage	
	Complete ONLY if direct expenditure to benefit C/O	 Candidate/Off H	iceholder name	Office sou	ght		Office held
Г							

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense		ayment/Reimbursement erhead/Rental Expense	Solicitation/Fund Transportation E Travel in District	quipment & Related Expense
Contributions/ Donations Made By Candidate/Officeholder/Politica	 Gift/Awards/Memorials Expense 	e Printing E		Travel Out of Dis	
	The Instruction Guide ex			(, , , ,	, 3 .,
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID	(Ethics Commission Filers)
Sch: 57/79 Rpt:	Turner, Christopher G. (The Hono	orable)		00062790	
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED) TO A CRE	DIT CARD	\$	2,739.95
5 Date 04/15/2023	6 Payee name Store More Storage				
7 Amount (\$) \$167.00	8 Payee address; City; 466 S SH 360	State; Zip Co	de		
	Grand Prairie, TX 75052				
9 TYPE OF EXPENDITURE	X Political	Non-Poli	tical		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense	this schedule)	<u> </u>	outside of Texas. Com , TX, officeholder living Orage	
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ght	Office he	eld
Date	Payee name				
05/15/2023	Store More Storage				
Amount (\$) \$167.00	Payee address; City; 466 S SH 360	State; Zip Co	de		
	Grand Prairie, TX 75052				
TYPE OF EXPENDITURE	X Political	Non-Poli	tical		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense	this schedule)	<u> </u>	outside of Texas. Com , TX, officeholder living Orage	•
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sou	ght	Office he	eld

SCHEDULE F4

Advertising Expense Accounting/Banking	Fees	Loan Repayment/Reimbursement Office Overhead/Rental Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense
Consulting Expense Contributions/ Donations Made By	Gift/Awards/Memorials Expense	Polling Expense Printing Expense	Travel in District Travel Out of District
Candidate/Officeholder/Politica		Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
1 Total marine Cohodule E4.	The Instruction Guide explains h	ow to complete this form.	2 Files ID (Ethios Commission Files)
1 Total pages Schedule F4: Sch: 58/79 Rpt:	Turner, Christopher G. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062790
4	ZED EXPENDITURES CHARGED TO A		\$ 2,739.95
5 Date	6 Payee name		
06/15/2023	Store More Storage		
7 Amount (\$)	8 Payee address; City; State;	Zip Code	
\$167.00	466 S SH 360		
	Crond Projeto TV 75052		
0 TVDE 05	Grand Prairie, TX 75052		
9 TYPE OF EXPENDITURE	X Political N	Ion-Political	
10 PURPOSE	(a) Category (See Categories listed at the top of this sched	dule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	I 🗀	outside of Texas. Complete Schedule T.
		Campaign st	n, TX, officeholder living expense
		Campaign	orage
11 Complete ONLY if direct	Candidate/Officeholder name Of	fice sought	Office held
expenditure to benefit C/OI	1		
Date	Payee name		
05/24/2023	Target		
Amount (\$)	Payee address; City; State;	Zip Code	
\$21.09	554 W Interstate 20		
	Grand Prairie, TX 75052-6932		
TYPE OF EXPENDITURE	X Political N	Non-Political	
PURPOSE	(a) Category (See Categories listed at the top of this sched		
OF EXPENDITURE	Office Overhead/Rental Expense		outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Office supplie	• •
		J.mes earpp	
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		fice sought	Office held
I			

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	cal 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)			
	The Instruction Guide explai	ns how to complete this form.				
1 Total pages Schedule F4: Sch: 59/79 Rpt:		Priler NAME Turner, Christopher G. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00062790				
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED T	O A CREDIT CARD	\$ 2,739.95			
5 Date 05/10/2023	6 Payee name Target					
7 Amount (\$) \$38.13	-	ate; Zip Code				
	Grand Prairie, TX 75052-6932					
9 TYPE OF EXPENDITURE	X Political	Non-Political				
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. , TX, officeholder living expense PS			
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sought	Office held			
Date 01/07/2023	Payee name Target					
Amount (\$) \$305.23	Payee address; City; Sta 554 W Interstate 20 Grand Prairie, TX 75052-6932	ate; Zip Code				
TYPE OF EXPENDITURE	X Political	Non-Political				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel X Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense Austin apartment			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought	Office held			

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Overho Polling Exper Printing Exper Salaries/Wag	ense ges/Contract Labor	Transportatio Travel in Dist Travel Out of	
1 Total pages Schedule F4:			<u>'</u>	3 Filer ID	(Ethics Commission Filers)
Sch: 60/79 Rpt:	Turner, Christopher G. (The Hono	orable)		0006279	
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED) TO A CRED	IT CARD	\$	2,739.95
5 Date 03/01/2023	6 Payee name Texas Democratic Party				
7 Amount (\$) \$250.00	8 Payee address; City; PO Box 15707	State; Zip Code	;		
a TYPE OF	Austin, TX 78761-5707				
9 TYPE OF EXPENDITURE	X Political	Non-Politic	al		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Contributions/Donations Made By Candidate/Officeholder/Political C	,	<u> </u>	ı, TX, officeholder liv	omplete Schedule T. ving expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sough	nt	Office	held
Date	Payee name				
05/09/2023	Texas Democratic Party				
Amount (\$) \$1,300.00	Payee address; City; PO Box 15707 Austin, TX 78761-5707	State; Zip Code	;		
TYPE OF EXPENDITURE	X Political	Non-Politic	al		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Fees	this schedule) (k		ı, TX, officeholder liv	omplete Schedule T. ving expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sough	nt	Office	held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ins 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 F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 61/79 Rpt:	Turner, Christopher G. (The Honora	ble)	00062790
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED T	O A CREDIT CARD	\$ 2,739.95
5 Date 02/20/2023	6 Payee name Texas House Early Childhood Cauc	us	
7 Amount (\$) \$250.00	6531 San Pedro Ave	ate; Zip Code	
9 TYPE OF EXPENDITURE	San Antonio, TX 78216-7214 X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Fees	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
01/23/2023	Texas Selfie Museum		
Amount (\$) \$311.76	Payee address; City; Sta 503 Neches St Austin, TX 78701-3709	ate; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense uilding activity
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
	The Instruction Guide explain	ns how to complete this form.	
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 62/79 Rpt:	Turner, Christopher G. (The Honora	ble)	00062790
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED 1	O A CREDIT CARD	\$ 2,739.95
5 Date 02/03/2023	6 Payee name Texas Women's Health Caucus		
7 Amount (\$) \$500.00	1100 Congress Ave	ate; Zip Code	
	Austin, TX 78701-2539		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Fees	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
06/28/2023	The Roaring Fork		
Amount (\$) \$96.11	Payee address; City; Sta 701 Congress Ave Austin, TX 78701-3216	ate; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name H	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 63/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 Date Payee name 05/16/2023 The Roaring Fork Amount (\$) Payee address; State; Zip Code City; \$312.88 701 Congress Ave Austin, TX 78701-3216 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meal with colleagues Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 06/21/2023 Turo Inc.

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 64/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 06/21/2023 Turo Inc. Amount (\$) Payee address; City; State; Zip Code \$112.72 111 Sutter St FI 12 San Francisco, CA 94104-4541 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment & Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Car rental for 4th of July parade Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/11/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$3.00 1544 Market St

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 65/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 04/06/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$3.00 1544 Market St Ste 400 San Francisco, CA 94102-6007 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment & Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Ground transportation 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/21/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$3.00 1544 Market St Ste 400 San Francisco, CA 94102-6007

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 66/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 03/29/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$3.00 1544 Market St Ste 400 San Francisco, CA 94102-6007 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment & Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Ground transportation 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/06/2023 Uber

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 67/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 05/03/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$4.84 1544 Market St Ste 400 San Francisco, CA 94102-6007 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment & Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Ground transportation 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/10/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$6.97 1544 Market St Ste 400 San Francisco, CA 94102-6007 **TYPE OF** Non-Political Political Χ **EXPENDITURE**

(b) Description

Office sought

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense

Ground transportation

PURPOSE

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

(a) Category (See Categories listed at the top of this schedule)

Transportation Equipment & Related

Candidate/Officeholder name

Expense

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 68/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 05/25/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$7.30 1544 Market St Ste 400 San Francisco, CA 94102-6007 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment & Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Ground transportation Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 04/21/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$7.48 1544 Market St Ste 400 San Francisco, CA 94102-6007 **TYPE OF** Non-Political Political Χ **EXPENDITURE**

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 69/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 05/04/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$7.48 1544 Market St Ste 400 San Francisco, CA 94102-6007 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment & Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Ground transportation 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/21/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$7.60 1544 Market St Ste 400 San Francisco, CA 94102-6007 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Transportation Equipment & Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Ground transportation Complete ONLY if direct Candidate/Officeholder name

expenditure to benefit C/OH

Office sought

Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 70/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 Date 5 Payee name 03/08/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$7.62 1544 Market St Ste 400 San Francisco, CA 94102-6007 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment & Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Ground transportation Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 04/05/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$8.58 1544 Market St Ste 400 San Francisco, CA 94102-6007

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 71/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 03/08/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$10.57 1544 Market St Ste 400 San Francisco, CA 94102-6007 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment & Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Ground transportation 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/25/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$11.06 1544 Market St

Non-Political

Office sought

(b) Description

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense

Ground transportation

Ste 400

Expense

Χ

TYPE OF

PURPOSE

EXPENDITURE

Complete ONLY if direct

San Francisco, CA 94102-6007

Political

Candidate/Officeholder name

(a) Category (See Categories listed at the top of this schedule)

Transportation Equipment & Related

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 72/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 03/01/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$11.76 1544 Market St Ste 400 San Francisco, CA 94102-6007 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment & Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Ground transportation Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/29/2023 Uber Amount (\$) Payee address; City; State; Zip Code

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 73/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 06/10/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$14.55 1544 Market St Ste 400 San Francisco, CA 94102-6007 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment & Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Ground transportation 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 06/11/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$15.33 1544 Market St Ste 400 San Francisco, CA 94102-6007 TYPE OF Non-Political

Political

Candidate/Officeholder name

(a) Category (See Categories listed at the top of this schedule)

Transportation Equipment & Related

Χ

Expense

Forms provided by Texas Ethics Commission

EXPENDITURE PURPOSE

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

www.ethics.state.tx.us

(b) Description

Office sought

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense

Ground transportation

Version V3.5.1.a18ea2ca

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 74/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 06/10/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$15.59 1544 Market St Ste 400 San Francisco, CA 94102-6007 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment & Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Ground transportation 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/06/2023 Uber

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 75/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 03/29/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$23.43 1544 Market St Ste 400 San Francisco, CA 94102-6007 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment & Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Ground transportation 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 06/11/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$28.78 1544 Market St Ste 400 San Francisco, CA 94102-6007 TYPE OF Non-Political Political Χ

(b) Description

Office sought

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense

Ground transportation

PURPOSE

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

(a) Category (See Categories listed at the top of this schedule)

Transportation Equipment & Related

Candidate/Officeholder name

Expense

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	ll Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
	·	ins how to complete this form.								
1 Total pages Schedule F4: Sch: 76/79 Rpt:	2 FILER NAME Turner, Christopher G. (The Honora	.ble)	3 Filer ID (Ethics Commission Filers) 00062790							
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED T	O A CREDIT CARD	\$ 2,739.95							
5 Date 06/29/2023	6 Payee name Uber		I							
7 Amount (\$) \$32.40		Payee address; City; State; Zip Code 1544 Market St Ste 400								
9 TYPE OF EXPENDITURE	X Political	Non-Political								
10 PURPOSE OF EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T.									
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name	Office sought	Office held							
Date 01/04/2023	Payee name Verizon Wireless									
Amount (\$) \$94.86	Payee address; City; Sta 899 Heathrow Park Ln Lake Mary, FL 32746-5612	ate; Zip Code								
TYPE OF EXPENDITURE	X Political	Non-Political								
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. , TX, officeholder living expense otspot service							
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought	Office held							

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 77/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 02/04/2023 Verizon Wireless Amount (\$) Payee address; State; Zip Code City; \$96.42 899 Heathrow Park Ln Lake Mary, FL 32746-5612 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign hotspot service 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/04/2023 Verizon Wireless Amount (\$) Payee address; City; State; Zip Code \$96.42 899 Heathrow Park Ln Lake Mary, FL 32746-5612 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description

Amount (\$) Payee address; City; State; Zip Code
899 Heathrow Park Ln

Lake Mary, FL 32746-5612

TYPE OF
EXPENDITURE

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
Campaign hotspot service

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name
Office sought
Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 78/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 04/04/2023 Verizon Wireless Amount (\$) Payee address; State; Zip Code City; \$96.42 899 Heathrow Park Ln Lake Mary, FL 32746-5612 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign hotspot service 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/04/2023 Verizon Wireless Amount (\$) Payee address; City; State; Zip Code \$96.42 899 Heathrow Park Ln Lake Mary, FL 32746-5612 TYPE OF Non-Political Political Χ **EXPENDITURE**

Amount (\$) Payee address; City; State; Zip Code

\$96.42 Payee address; City; State; Zip Code

\$99 Heathrow Park Ln

Lake Mary, FL 32746-5612

TYPE OF EXPENDITURE

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)

Office Overhead/Rental Expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name

Office sought

Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 79/79 Rpt: Turner, Christopher G. (The Honorable) 00062790 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,739.95 5 Date Payee name 06/04/2023 Verizon Wireless Amount (\$) Payee address; City; State; Zip Code \$96.42 899 Heathrow Park Ln Lake Mary, FL 32746-5612 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign hotspot service Office sought 11 Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services	Polling Ex Printing E Salaries/V	xpense Nages/Contract Labor	Transportation Equipment & Relate Travel in District Travel Out of District OTHER (enter a category not listed	·			
		The Instruction Guide explains	how to co	omplete this form.					
1	Total pages Schedule G:	2 FILER NAME			3 Filer ID (Ethics Commiss	sion Filers)			
	Sch: 1/3 Rpt: 112/118	Turner, Christopher G. (The Honorable	?)		00062790				
4	Date	5 Payee name							
	01/10/2023	AT&T							
6	Amount (\$)	7 Payee address; City; State	; Zip Co	ode					
	\$75.00	208 S Akard St	, 1						
	Reimbursement from								
	X political contributions intended	Dallas, TX 75202-4206							
				I	_				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this sch	nedule)	(b) Description	Check if travel outside of Texas. Comp				
	EXPENDITURE	Office Overhead/Rental Expense			Check if Austin, TX, officeholder living	expense			
			Campaign portion of wireless bill						
9	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name		Office sought	Office held				
	C/OH								
		T							
	Date	Payee name							
	02/10/2023	AT&T							
	Amount (\$)	Payee address; City; State	; Zip Co	ode					
	\$75.00	208 S Akard St							
	Reimbursement from political contributions								
	X political contributions intended	Dallas, TX 75202-4206							
	PURPOSE	Category (See Categories listed at the top of this sch	nedule)	Description	Check if travel outside of Texas. Comp	plete Schedule T.			
	OF	Office Overhead/Rental Expense			Check if Austin, TX, officeholder living	expense			
	EXPENDITURE	·		Campaign portion	n of wireless bill				
	Complete ONLY if direct	Candidate/Officeholder name		Office sought	Office held				
	expenditure to benefit C/OH								
	C/OH								
	Date	Payee name							
	03/10/2023	AT&T							
	Amount (\$)	Payee address; City; State	; Zip Co	ode					
	\$75.00	208 S Akard St	•						
	Reimbursement from								
	X political contributions intended	Dallas, TX 75202-4206							
\vdash	PURPOSE	Category (See Categories listed at the top of this sch	odulo)	Description	Check if travel outside of Texas. Comp	nlete Schedule T			
	OF	Office Overhead/Rental Expense	icuui c)		Check if thaver outside of Texas. Comp	1			
	EXPENDITURE	Office Overflead/Nertial Experise		Campaign portion	n of wireless hill				
				2 2					
_	Complete ONLY if direct	Candidate/Officeholder name		Office sought	Office held				
	expenditure to benefit	Candidate/Officeriolider Haiffe		Onice sought	Office field				
L	C/OH								

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl		xpense Nages/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule G:	2 FILER NAM	ΛΕ			3	Filer ID (Ethics Commission Filers)			
	Sch: 2/3 Rpt: 113/118	Turner, C	nristopher G. (The Honor	able)			00062790			
4	Date	5 Payee nam	e							
	04/10/2023	AT&T								
6	Amount (\$)	7 Payee add	ress; City; S	tate; Zip Co	ode					
	\$75.00	208 S Aka	ard St							
	Reimbursement from political contributions intended	Dallas, TX	(75202-4206							
8	PURPOSE	(a) Category	(See Categories listed at the top of th	is schedule)	(b) Description	Ch	eck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	1	erhead/Rental Expense		``	Ch	eck if Austin, TX, officeholder living expense			
	EXPENDITURE			Campaign portion			of wireless bill			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Offic	eholder name		Office sought		Office held			
	Date	Payee nam	e							
	05/10/2023	AT&T								
	Amount (\$)	Payee add	ress; City; S	tate; Zip Co	ode					
	\$75.00	208 S Aka	ard St							
	Reimbursement from									
	X political contributions intended	Dallas, TX	75202-4206							
	PURPOSE	Category	(See Categories listed at the top of thi	is schedule)	Description	Ch	eck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Office Ove	erhead/Rental Expense			Ch	eck if Austin, TX, officeholder living expense			
					Campaign portion	n of	wireless bill			
	Complete ONLY if direct expenditure to benefit	Candidate/Offic	eholder name		Office sought		Office held			
	C/OH									
	Date	Dove nom								
	06/10/2023	Payee nam AT&T	е							
	Amount (\$)	Payee add	ress; City; S	tate; Zip Co	nde					
	\$75.00	208 S Aka		idio, Zip ot	Juc					
	Reimbursement from									
	political contributions intended	Dallas, T>	(75202-4206							
	PURPOSE OF	1 ,	(See Categories listed at the top of the	is schedule)	Description	=	eck if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Office Ove	erhead/Rental Expense		Compaign portion	_	eck if Austin, TX, officeholder living expense			
					Campaign portion	ıı Ul	MII CIG22 DIII			
	Complete ONLY if direct	Candidate/Offic	eholder name		Office sought		Office held			
	expenditure to benefit	Carididate/Offic	CHOIGEI HAIHE		Office Sought		Office field			
	C/OH									

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Total pages Schedule G: Filer ID (Ethics Commission Filers) Sch: 3/3 Rpt: 114/118 Turner, Christopher G. (The Honorable) 00062790 Date Payee name 01/07/2023 Costco Wholesale 6 Amount (\$) Payee address; State; Zip Code \$423.21 600 W Arbrook Blvd Reimbursement from political contributions intended Х Arlington, TX 76014-3702 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** Supplies for Austin office and apartment Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

	The Instru	ctio	on Guide explains how to complete this form.	1			ages Schedule K: /4 Rpt: 115/118	
2	FILER NAME			3			(Ethics Commission	Filers)
	Turner, Chris	stop	pher G. (The Honorable)		00	062	790	
4	Date 02/09/2023	6	Name of person from whom amount is received Amazon Address of person from whom amount is received; City; State; Zip Code				8 Amount (\$)	\$112.50
			Seattle, WA 98109					
		7	Purpose for which amount is received Check	if politi	cal c	contr	ibution returned to filer	
			Pay with points credit					
	Date		Name of person from whom amount is received				Amount (\$)	
	04/21/2023		Amazon				;	\$112.50
		ļ	Address of person from whom amount is received; City; State; Zip Code					
			0					
			Seattle, WA 98109					
			Purpose for which amount is received	if politi	cal c	contr	ibution returned to filer	
	Date 03/30/2023		Name of person from whom amount is received				Amount (\$)	t112 F0
	03/30/2023	ļ	Amazon				`	\$112.50
			Address of person from whom amount is received; City; State; Zip Code					
			Seattle, WA 98109					
			Purpose for which amount is received	if politi	cal c	contr	ibution returned to filer	
			Pay with points credit					
	Date		Name of person from whom amount is received				Amount (\$)	
	01/06/2023		Amazon				\$	\$112.50
		ļ	Address of person from whom amount is received; City; State; Zip Code					
			Seattle, WA 98109					
		H		if politi	cal c	contri	ibution returned to filer	
			Pay with points credit	•				
	Date	Ī	Name of person from whom amount is received				Amount (\$)	
	06/18/2023		Amazon					\$75.00
		ļ	Address of person from whom amount is received; City; State; Zip Code					
			0 11 114 00400					
			Seattle, WA 98109					
				if politi	cal c	contr	ibution returned to filer	
			Pay with points credit					

	The Instru	cti	on Guide explains how to complete this form.		1			ages Schedule K:	
	THE HISTIA	Cti	on datac explains now to complete this form.			Sch	: 2/	4 Rpt: 116/118	
2	FILER NAME				3			(Ethics Commission Fil	lers)
	Turner, Chris	sto	oher G. (The Honorable)			000	627	790	
4	Date	5	Name of person from whom amount is received					8 Amount (\$)	
	04/20/2023		Amazon					\$	37.50
		6	Address of person from whom amount is received; City; State; Zip Code						
			0 11 114 00400						
		L	Seattle, WA 98109						
		7	Purpose for which amount is received	Check if po	litic	cal co	ntri	bution returned to filer	
			Pay with points credit						
	Date		Name of person from whom amount is received					Amount (\$)	
	06/22/2023		Amazon					\$	329.01
		ļ	Address of person from whom amount is received; City; State; Zip Code						
			Seattle, WA 98109						
			Purpose for which amount is received	Check if po	litic	cal co	ntri	bution returned to filer	
			Pay with points credit						
	Date		Name of person from whom amount is received					Amount (\$)	
	01/06/2023	ļ	Amazon					\$	317.29
		[Address of person from whom amount is received; City; State; Zip Code						
			Caattle, WA 00100						
		<u> </u>	Seattle, WA 98109						
			Purpose for which amount is received	Check if po	olitic	cal co	ntri	bution returned to filer	
		<u> </u>	Pay with points credit						
	Date		Name of person from whom amount is received					Amount (\$)	
	06/07/2023	<u> </u>	American Express					\$3	392.81
			Address of person from whom amount is received; City; State; Zip Code						
			New York, NY 10285						
				Observatority as a	1141.	1		busine askument to Elec	
			Purpose for which amount is received Fee refund	Спеск іт ро	OIITIC	cai co	ntri	bution returned to filer	
		Ļ					_		
	Date		Name of person from whom amount is received					Amount (\$)	
	02/08/2023	ļ	American Express					\$	\$10.00
			Address of person from whom amount is received; City; State; Zip Code						
			New York, NY 10285						
		\vdash		Chook if = -		201	nt::	hution roturned to fler	
			Purpose for which amount is received Wireless credit	спеск іт ро	HILL	ai co	rıtri	bution returned to filer	
			vincioss orcuit						
•									

	The Instru	ion Guide explains how to comp	olete this form.	1		ages Schedule K:	
		·			Sch: 3	8/4 Rpt: 117/118	
2	FILER NAME			3		(Ethics Commission I	-ilers)
	Turner, Chris	opher G. (The Honorable)			00062	790	
4	Date	Name of person from whom amount is re	eceived			8 Amount (\$)	
	03/09/2023	American Express					\$10.00
		Address of person from whom amount is	received; City; State; Zip Co	de			
		·					
		New York, NY 10285					
		Purpose for which amount is received		Check if polit	ical cont	ribution returned to filer	
		Wireless credit					
\vdash						T	
	Date	Name of person from whom amount is re	eceived			Amount (\$)	# 40.00
	05/12/2023	American Express					\$10.00
		Address of person from whom amount is	received; City; State; Zip Co	de			
		New York, NY 10285					
		Purpose for which amount is received		☐ Check if polit	ical cont	ribution returned to filer	
		Wireless credit					
	Date	Name of person from whom amount is re	eceived			Amount (\$)	
	04/09/2023	American Express				, ,	\$10.00
			received: City: State: 7in Co			-	
		Address of person from whom amount is	received, Oity, Otate, Zip Oo	uc			
		New York, NY 10285					
		Purpose for which amount is received		Check if nolit	ical cont	Iribution returned to filer	
		Wireless credit		Criccik ii point	icai com	ibation retained to mer	
						T	
	Date	Name of person from whom amount is re	eceived			Amount (\$)	
	01/08/2023	American Express					\$10.00
		Address of person from whom amount is					
		New York, NY 10285					
		Purpose for which amount is received		Check if polit	ical cont	ribution returned to filer	
		Wireless credit					
	Date	Name of person from whom amount is re	eceived			Amount (\$)	
	06/11/2023	American Express				, ,	\$10.00
			received: City: State: 7in Co			-	
		, ladress of person from whom amount is	710001100, Oldy, Oldio, 21p 00				
		New York, NY 10285					
		Purpose for which amount is received		Check if nolit	ical cont	<u> </u> ribution returned to filer	
		Wireless credit		Check ii polit	icai cuill	ibudon returned to iller	
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l							

	The Instru	ction Guide explains how to complete this form.	1			ages Schedule K: I/4 Rpt: 118/118	
2	FILER NAME		3	F	iler ID	(Ethics Commission F	ilers)
	Turner, Chris	stopher G. (The Honorable)		0	0062	2790	
4	Date 01/08/2023	Name of person from whom amount is received American Express Address of person from whom amount is received; City; State; Zip Code				8 Amount (\$)	\$90.92
		New York, NY 10285					
		7 Purpose for which amount is received Check if p	oliti	ica	l cont	ribution returned to filer	
		Pay with points credit					
F	Date	Name of person from whom amount is received				Amount (\$)	
	01/08/2023	American Express					\$64.92
	01,00,1010	Address of person from whom amount is received; City; State; Zip Code					+002
		Address of person from whom amount is received, City, State, 2ip Code					
		New York, NY 10285					
			oliti	ica	l cont	ribution returned to filer	
		Pay with points credit					
F	Date	Name of person from whom amount is received				Amount (\$)	
	01/08/2023	American Express				` ′	\$38.96
		Address of person from whom amount is received; City; State; Zip Code					, , , , , ,
		Address of person from whom amount is received, Gity, State, 2 p code					
		New York, NY 10285					
		Purpose for which amount is received	oliti	ica	l cont	ribution returned to filer	
		Pay with points credit					
F	Date	Name of person from whom amount is received				Amount (\$)	
	06/30/2023	American Express					\$16.47
		Address of person from whom amount is received; City; State; Zip Code		••••		•	
		New York, NY 10285					
		Purpose for which amount is received	oliti	ica	l cont	ribution returned to filer	
		Account interest					
Г	Date	Name of person from whom amount is received				Amount (\$)	
	06/30/2023	Cort Business Services				;	\$54.88
		Address of person from whom amount is received; City; State; Zip Code		••••		1	
		Baltimore, MD 21207					
		Purpose for which amount is received	oliti	ica	cont	ribution returned to filer	
L		Refund			_		