

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00058340	2 Total pages filed: 20
3 COMMITTEE NAME Texans for Toll-free Highways		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/14/2023	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 317 Sidney Baker S, Suite 400-308 Kerrville, TX 78028		
	5 CAMPAIGN TREASURER NAME	MS / MRS / MR NICKNAME	FIRST Sudie LAST Sartor
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3530 Eva Jane San Antonio, TX 78261		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 488-5412		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year Month Day Year 01/01/2023 THROUGH 06/30/2023		
11 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Texans for Toll-free Highways	13 Filer ID (Ethics Commission Filers) 00058340
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
EXPENDITURE TOTALS	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,790.00
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	4. TOTAL POLITICAL EXPENDITURES	\$ 1,352.25
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 4,180.15
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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

Sudie Sartor

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - GPAC

17 COMMITTEE NAME Texans for Toll-free Highways		18 Filer ID (Ethics Commission Filers) 00058340
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,790.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,352.25
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/11 Rpt: 4/20
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 01/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, MARY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions)
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYAS, FORREST <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) ZEIT ENERGY
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulger, Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulger, Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulger, Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/11 Rpt: 5/20
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 04/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulger, Linda <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78258	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulger, Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulger, Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Chris <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78261	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Chris <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78261	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/11 Rpt: 6/20
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 03/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Chris	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78261	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Chris	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78261	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Chris	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78261	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Chris	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78261	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, ANN E	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78261	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/11 Rpt: 7/20
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 01/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTOK, JOHN PATRICK	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code PORT CHARLOTTE, FL 33592		
8 Principal occupation / Job title (See Instructions) JANITOR		9 Employer (See Instructions) WALMART
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTOK, JOHN PATRICK	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PORT CHARLOTTE, FL 33592		
Principal occupation / Job title (See Instructions) JANITOR		Employer (See Instructions) WALMART
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTOK, JOHN PATRICK	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PORT CHARLOTTE, FL 33592		
Principal occupation / Job title (See Instructions) JANITOR		Employer (See Instructions) WALMART
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTOK, JOHN PATRICK	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PORT CHARLOTTE, FL 33592		
Principal occupation / Job title (See Instructions) JANITOR		Employer (See Instructions) WALMART
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTOK, JOHN PATRICK	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PORT CHARLOTTE, FL 33592		
Principal occupation / Job title (See Instructions) JANITOR		Employer (See Instructions) WALMART

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/11 Rpt: 8/20
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 06/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTOK, JOHN PATRICK <hr/> 6 Contributor address; City; State; Zip Code PORT CHARLOTTE, FL 33592	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) JANITOR		9 Employer (See Instructions) WALMART
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falcon Borel , Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falcon Borel , Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falcon Borel , Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falcon Borel , Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/11 Rpt: 9/20
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 05/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falcon Borel , Linda <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78260	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) retired
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falcon Borel , Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grams, Clyde <hr/> Contributor address; City; State; Zip Code Bulverde, TX 78163	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JETTIE, MARK <hr/> Contributor address; City; State; Zip Code FT WORTH, TX 76137	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) UNEMPLOYED		Employer (See Instructions)
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JETTIE, MARK <hr/> Contributor address; City; State; Zip Code FT WORTH, TX 76137	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) UNEMPLOYED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/11 Rpt: 10/20
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 06/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMES, RALPH <hr/> 6 Contributor address; City; State; Zip Code BULVERDE, TX 78163	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marburger , Thomas <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self
Date 03/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marburger , Thomas <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marburger , Thomas <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marburger , Thomas <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/11 Rpt: 11/20
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 05/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marburger , Thomas	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78249		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) self
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORN, KINGSLEY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SHOW LOW, AZ 85901		
Principal occupation / Job title (See Instructions) AUDITOR		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORN, KINGSLEY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SHOW LOW, AZ 85901		
Principal occupation / Job title (See Instructions) AUDITOR		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phelps, Kenneth	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code San Antonio, TX 78259		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phelps, Kenneth	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code San Antonio, TX 78259		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/11 Rpt: 12/20
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 03/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phelps, Kenneth	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78259	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) retired
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phelps, Kenneth	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 05/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phelps, Kenneth	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phelps, Kenneth	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78259	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 03/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Putnam, T.W.	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Georgetown, TX 78633	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/11 Rpt: 13/20
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 01/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANFORD, JAMES C <hr/> 6 Contributor address; City; State; Zip Code MICO, TX 78058	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST ASSISTANT		9 Employer (See Instructions)
Date 01/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, DAVID <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, DAVID <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, DAVID <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, DAVID <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/11 Rpt: 14/20
2 FILER NAME Texans for Toll-free Highways		3 Filer ID (Ethics Commission Filers) 00058340
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, DAVID <hr/> 6 Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 06/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, DAVID <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, BARBARA <hr/> Contributor address; City; State; Zip Code MEDINA, TX 78055	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/6 Rpt: 15/20	2 FILER NAME Texans for Toll-free Highways	3 Filer ID (Ethics Commission Filers) 00058340
4 Date 06/30/2023	5 Payee name Anedot	
6 Amount (\$) \$25.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATION COLLECTION FEE
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/09/2023	Payee name CONSTANT CONTAC	
Amount (\$) \$10.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 TRAPELO RD WALTHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/20/2023	Payee name CONSTANT CONTAC	
Amount (\$) \$5.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 TRAPELO RD WALTHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/6 Rpt: 16/20	2 FILER NAME Texans for Toll-free Highways	3 Filer ID (Ethics Commission Filers) 00058340
4 Date 01/30/2023	5 Payee name CONSTANT CONTAC	
6 Amount (\$) \$133.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1601 TRAPELO RD WALTHAM, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/21/2023	Candidate/Officeholder name Office sought Office held	
Payee name CONSTANT CONTAC		
Amount (\$) \$5.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 TRAPELO RD WALTHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/02/2023	Candidate/Officeholder name Office sought Office held	
Payee name CONSTANT CONTAC		
Amount (\$) \$133.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 TRAPELO RD WALTHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/6 Rpt: 17/20	2 FILER NAME Texans for Toll-free Highways	3 Filer ID (Ethics Commission Filers) 00058340
4 Date 03/27/2023	5 Payee name CONSTANT CONTAC	
6 Amount (\$) \$5.33 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1601 TRAPELO RD WALTHAM, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/29/2023	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$133.25 <input type="checkbox"/> Expenditure from corporate funds	Payee name CONSTANT CONTAC Payee address; City; State; Zip Code 1601 TRAPELO RD WALTHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/12/2023	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$5.33 <input type="checkbox"/> Expenditure from corporate funds	Payee name CONSTANT CONTAC Payee address; City; State; Zip Code 1601 TRAPELO RD WALTHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/6 Rpt: 18/20	2 FILER NAME Texans for Toll-free Highways	3 Filer ID (Ethics Commission Filers) 00058340
4 Date 05/01/2023	5 Payee name CONSTANT CONTAC	
6 Amount (\$) \$133.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1601 TRAPELO RD WALTHAM, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/30/2023	Payee name CONSTANT CONTAC	
Amount (\$) \$133.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 TRAPELO RD WALTHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/29/2023	Payee name CONSTANT CONTAC	
Amount (\$) \$133.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 TRAPELO RD WALTHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/6 Rpt: 19/20	2 FILER NAME Texans for Toll-free Highways	3 Filer ID (Ethics Commission Filers) 00058340
4 Date 05/15/2023	5 Payee name FULL FUSION LLC	
6 Amount (\$) \$441.75 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3350 RIDGELAKE DRIVE #104 METAIRIE, LA 70002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/09/2023	Payee name THE SWITCH	
Amount (\$) \$21.35 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 166 HARGRAVES DRIVE, STE G100 AUSTIN, TX 78737	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense lunch
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/09/2023	Payee name Texas Capital Visitors	
Amount (\$) \$21.89 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1100 S. Congress Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PARKING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/6 Rpt: 20/20	2 FILER NAME Texans for Toll-free Highways	3 Filer ID (Ethics Commission Filers) 00058340
4 Date 02/16/2023	5 Payee name Texas Capital Visitors	
6 Amount (\$) \$10.28 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1100 S. Congress Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PARKING
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held