CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to complete	this form. 1 Filer ID (Ethics Commi- 00020051	,	2 Total pages file 75	
3 CANDIDATE /	MS / MRS / MR FI	RST	MI	OFFICE U	SE ONLY
OFFICEHOLDER NAME	The Honorable To	om		Date Received	SE ONET
				ELECTRONICA	LLY FILED
	NICKNAME LA	\ST	SUFFIX	07/17/2023	
		raddick			
4 CANDIDATE /	ADDRESS / PO BOX; APT / SI	JITE #; CITY;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	Two Lakes Dr.			Receipt #	Amount
Change of Address	Midland, TX 79705				
				Date Processed	
				Date Imaged	
5 CAMPAIGN	MS / MRS / MR FIE	RST	MI	2	
TREASURER NAME	Mrs. Bil	I			
	NICKNAME LA	ST	SUFFIX		
		eck	JUFFIX		
				CT.1	
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BO	X PLEASE); AP	T / SUITE #; CITY;	STA	TE; ZIP CODE
ADDRESS	Two Lakes Dr.				
(Residence or Business)					
	Midland, TX 79705				
7 CAMPAIGN	AREA CODE PHONE N	IUMBER EXTENSION			
TREASURER	(432) 682-3000				
PHONE	(- ,				
8 REPORT			_	-	
TYPE	January 15	30th day before election	Runoff	15th day after cam appointment (office	
	X July 15	8th day before election	Exceeded modified	Final Report (Attac	
			reporting limit	J · ·	
9 PERIOD	Month Day Year		Month Day	Year	
COVERED	01/01/2023	THROUGH	06/30/2023	3	
10 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month Day Year	Primary	Runoff	Other	
		General	Special		
11 OFFICE	OFFICE HELD (if any)	1	12 OFFICE SOUGHT	(if known)	
	State Representative District	82	State Representa		
	1		I		
		GO TO PAGE 2			
Forme provided by T	exas Ethics Commission	www.ethics.state.tx.u	c	Vorcio	n V3.5.1.a18ea2ca
i onno provided by Te		www.eumcs.state.tx.u	3	VerSIO	11 VJ.J.I.AIOEA2Ca

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 75

13 C / OH NAME	Craddick, Tom (The H	Honorable)	14 Filer ID (E 00020051	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without I officeholders are required to report this information	the candidate's or officel	nolder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	55	
	1. TOTAL UNITEM			
16 CONTRIBUTION TOTALS	N PLEDGES, LOANS, CTRONICALLY)	\$ 0.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 2,500.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 145,228.61
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 138,257.72
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT	-			
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		The Hon	orable Tom Craddick	
		Signature of	Candidate or Officehold	er
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subso	ribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of offic	er administering	Printed name of officer administering	Title of officer	administering oath
Forms provided by Tex	xas Ethics Commission	www.ethics.state.tx.us	V	ersion V3.5.1.a18ea2ca

S	UBT	OTALS - C/OH	C	OVEF	FORM C/OH R SHEET PG 3 3 of 75
	ER NAM addick,	//E Tom (The Honorable)	19 Filer ID 00020051	(Ethic	s Commission Filers)
		E SUBTOTALS SCHEDULE		5	SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	2,500.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	\$	101,169.75		
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$		
7.		ONS	\$		
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	43,568.82	
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	490.04	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 **1** Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/75 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Craddick, Tom (The Honorable) 00020051 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 06/29/2023 \$2,500.00 Brigham, Ben M. (Mr.) 6 Contributor address; City; State; Zip Code Austin, TX 78730-5027 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) **CEO/President** Brigham Exploration Co.

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	-	ense Polling Expense Printing E	xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	LER NAME			3 Filer ID (Ethics Commission Filers)						
	Sch: 1/27 Rpt: 5/75	raddick, Tom (The Hono	rable)		00020051						
4	Date 02/15/2023	ayee name merican Express									
6	Amount (\$)	ayee address; City;	State; Zip Co	de							
Ū	\$13,204.56										
		allas, TX 75265-0448									
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payment of credit card bill 									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sou	ight	Office held						
	Date	ayee name									
	03/31/2023	merican Express									
	Amount (\$) \$7,793.37	ayee address; City; O Box 650448	State; Zip Co	ode							
		allas, TX 75265-0448									
	PURPOSE OF EXPENDITURE	ategory (See Categories listed a redit Card Payment	t the top of this schedule)		outside of Texas. Complete Schedule T. , TX, officeholder living expense redit card bill						
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sou	ight	Office held						
	Date	ayee name									
	04/29/2023	merican Express									
	Amount (\$) \$6,198.54	ayee address; City; O Box 650448	State; Zip Co	ode							
		allas, TX 75265-0448									
	PURPOSE OF EXPENDITURE	ategory (See Categories listed a redit Card Payment	t the top of this schedule)		outside of Texas. Complete Schedule T. , TX, officeholder living expense redit card bill						
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sou	ight	Office held						

			EXPE	NDITURE CATEGOR	RIES FOR	BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards mittee Legal Servi	age Expense /Memorials Expense	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Travel in District Travel Out of Dist	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 2/27 Rpt: 6/75		Craddick, Tom (The	Honorable)				00020051			
4	Date 05/31/2023		Payee name American Express								
6	Amount (\$)	7	Payee address; C	ity; State;	Zip Co	le					
	\$9,927.56		PO Box 650448 Dallas, TX 75265-0448								
		<u> </u>									
8	PURPOSE OF EXPENDITURE		Category (See Categorie Credit Card Paymer		edule)		n, TX,	de of Texas. Comp officeholder living lit card bill			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder	name C	Office sou	ıht		Office he	ld		
	Date		Payee name								
	06/30/2023		American Express								
	Amount (\$)		Payee address; C	ity; State;	Zip Co	le					
	\$6,427.24		PO Box 650448 Dallas, TX 75265-04	448							
	PURPOSE OF EXPENDITURE		Category _{(See Categoria} Credit Card Paymei		edule)		n, TX,	de of Texas. Comp officeholder living lit card bill			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder	name C	Office sou	Jht		Office he	ld		
	Date		Payee name								
	01/18/2023		City of Austin								
	Amount (\$) \$20.20		-	ity; State;	Zip Co	le					
			Austin, TX 78783-2	267							
	PURPOSE OF EXPENDITURE		Category (See Categorie Office Overhead/Re		edule)	(b) Description Check if travel Check if Austir Utilities for A	ı, TX,				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder	name C	Office sou	Jht		Office he	ld		
		_			_		_				

			EXPENDITURE	CATEGO	RIES FOR	BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E	xpense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor		Travel in District Travel Out of Dist	uipment & Related Expense	
1	Total pages Schedule F1:	2 F	LER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 3/27 Rpt: 7/75	С	raddick, Tom (The Honoral	ole)				00020051		
4	Date 02/01/2023		ayee name ity of Austin							
6	Amount (\$)	7 P	ayee address; City;	State	; Zip Co	le				
-	\$253.63	Ρ	PO Box 2267 Austin, TX 78783-2267							
8	PURPOSE	(a) C	otogon			(b) Description				
0	OF	 (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. X Check if Austin, TX, officeholder living expense Utilities for Austin residence 								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ndidate/Officeholder name	C	Office sou	ht		Office he	ld	
	Date	Р	ayee name							
	03/07/2023	С	ity of Austin							
	Amount (\$)	Р	ayee address; City;	State	; Zip Co	le				
	\$105.40	A	O Box 2267 ustin, TX 78783-2267							
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the ffice Overhead/Rental Exp		nedule)	(b) Description Check if travel Check if Austir Check if Austir Utilities for A	n, TX,			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	ht		Office he	ld	
	Date	Р	ayee name							
	03/31/2023		ity of Austin							
	Amount (\$) \$82.52		ayee address; City; O Box 2267	State;	; Zip Coo	le				
		A	ustin, TX 78783-2267							
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the ffice Overhead/Rental Exp		nedule)	(b) Description Check if travel Check if Austir Utilities for A	n, TX,			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ndidate/Officeholder name	(Office soug	ht		Office he	ld	

		EXPENDITU	RE CATEGORIES FOR	BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Exper Gift/Awards/Memorial ttee Legal Services	Loan Repa Office Ove nse Polling Ex s Expense Printing Ex	yment/Reimbursement rhead/Rental Expense ense pense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	LER NAME			3 Filer ID (Ethics Commission Filers)			
	Sch: 4/27 Rpt: 8/75	raddick, Tom (The Honor	able)		00020051			
4	Date 05/01/2023	ayee name ity of Austin						
6	Amount (\$)	ayee address; City;	State; Zip Co	de				
	\$75.58	D Box 2267 ustin, TX 78783-2267						
8	PURPOSE	togon		(b) Description				
0	OF	 (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 Utilities for Austin residence 						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sou	ght	Office held			
	Date	ayee name						
	05/05/2023	ty of Austin						
	Amount (\$) \$75.58	ayee address; City; O Box 2267	State; Zip Co	de				
		ustin, TX 78783-2267						
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at ffice Overhead/Rental Ex		X Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense u stin residence			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sou	ght	Office held			
	Date	ayee name						
	06/30/2023	raddick, Thomas R.						
	Amount (\$) \$490.04	ayee address; City; Lakes Dr	State; Zip Co	de				
		idland, TX 79705-1929						
	PURPOSE OF EXPENDITURE	ategory _{(See Categories listed at} oan Repayment/Reimbur		Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense Schedule G expenditures			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sou	ght	Office held			

			EXPE	NDITURE CATEG	ORIES FOR	R BOX 8	(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Award ee Legal Serv	rage Expense s/Memorials Expense	Office Ove Polling Ex Printing E Salaries/V	erhead/Rent pense xpense Vages/Contr	act Labor		Travel in District Travel Out of Dis	quipment & Related	
1	Total pages Schedule F1:	2 FII		•		· ·		3	Filer ID	(Ethics Commis	sion Filers)
-	Sch: 5/27 Rpt: 9/75		addick, Tom (The	e Honorable)					00020051		Sion Fileroy
4	Date 05/02/2023		/ee name dley Group								
6	Amount (\$) \$5,487.66	81	vee address; C 5 Brazos St Ste 7 stin, TX 78701-2	701A	te; Zip Co	ode					
8	PURPOSE OF EXPENDITURE		egory _{(See Categori} avel Out of Distric	es listed at the top of this : Ct	schedule)		Check if travel o Check if Austin,	, TX, c	officeholder living	plete Schedule T. expense avioral Health	event
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder	name	Office sou	ght			Office he	eld	
	Date	Pay	/ee name								
	06/19/2023	Du	dley Group								
	Amount (\$)	Pay	/ee address; C	ity; Sta	te; Zip Co	de					
	\$5,260.51	-	5 Brazos St Ste 7 stin, TX 78701-2	-							
	PURPOSE OF EXPENDITURE		egory (See Categori avel Out of Distric	es listed at the top of this : Ct	schedule)		Check if travel o Check if Austin,	, TX, c	officeholder living	plete Schedule T. expense officials in Mic	lland
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder	name	Office sou	ght			Office he	eld	
	Date	Pay	/ee name								
	06/06/2023	Eri	ckson Demel & 0	Co., PLLC							
	Amount (\$) \$13,387.00	-	vee address; C 00 N Mopac Exp		te; Zip Co	ode					
			stin, TX 78759-8								
	PURPOSE OF EXPENDITURE		egory _{(See Categori} counting/Banking	es listed at the top of this :	schedule)		Check if travel o	, TX, c	officeholder living	plete Schedule T. expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder	name	Office sou	ght			Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	· · · · · ·	Filer ID (Ethics Commission Filers)							
-	Sch: 6/27 Rpt: 10/75	Craddick, Tom (The Honorable)	00020051							
4	Date 02/10/2023	5 Payee name HEB Credit Receivables								
6	Amount (\$) \$101.79	7 Payee address; City; State; Zip Code PO Box 839988 San Antonio, TX 78283-3988								
8	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. 'X, officeholder living expense Nents							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	05/04/2023	HEB Credit Receivables								
	Amount (\$) \$430.79	Payee address;City;State;ZipCodePO Box 839988								
		San Antonio, TX 78283-3988								
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense Nents							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/08/2023	HEB Credit Receivables								
	Amount (\$) \$196.82	Payee address;City;State;ZipCodePO Box 839988								
		San Antonio, TX 78283-3988								
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. 'X, officeholder living expense Nents							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Office Overhead/Rental Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
-	Sch: 7/27 Rpt: 11/75	Craddick, Tom (The Honorable)	00020051
4	Date 04/12/2023	Payee name HEB	
6	Amount (\$) \$391.41	Payee address; City; State; Zip Code Po Box 839988 San Antonio, TX 78283-3988 San Antonio, TX 78283-3988	
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense 2 S
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/31/2023	Herb and Kitchen	
	Amount (\$) \$18.53	Payee address; City; State; Zip Code 815 Main St	
	PURPOSE OF EXPENDITURE	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense orkshop meal
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/31/2023	Herb and Kitchen	
	Amount (\$) \$4.36	Payee address; City; State; Zip Code 815 Main St	
		Fort Worth, TX 76102-5408	
	PURPOSE OF EXPENDITURE	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense orkshop meal
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Loan Repayment/Reir Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr is how to complete th	al Expense Transportation Equipment & Related Expense Travel in District Travel Out of District act Labor OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	LER NAME		3 Filer ID (Ethics Commission Filers)						
	Sch: 8/27 Rpt: 12/75	raddick, Tom (The Honorable)		00020051						
4	Date 06/01/2023	ayee name erb and Kitchen								
6	Amount (\$) \$7.63	ayee address; City; Sta 15 Main St ort Worth, TX 76102-5408	te; Zip Code							
8	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this s bod/Beverage Expense		cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Jislative workshop meal						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sought	Office held						
	Date	ayee name								
	05/31/2023	ilton Fort Worth								
	Amount (\$) \$5.41	ayee address; City; Sta 15 Main St	te; Zip Code							
	PURPOSE OF EXPENDITURE	ort Worth, TX 76102-5408 ategory (See Categories listed at the top of this s ood/Beverage Expense		cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Jislative workshop meal						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sought	Office held						
	Date	ayee name								
	01/13/2023	unnicutt, Retha								
	Amount (\$) \$1,459.44	ayee address; City; Sta 902 W Ohio Ave	te; Zip Code							
		idland, TX 79701-5944								
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this a alaries/Wages/Contract Labor		cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sist with campaign and office holder duties						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sought	Office held						

			EXPENDITURE	CATEGO	RIES FOR	BOX 8	(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Git/Awards/Memorials E Legal Services The Instruction Gui	xpense	Office Over Polling Exp Printing Ex Salaries/W	head/Rent ense pense ages/Contr			Transportation E Travel in District Travel Out of Dis		
1	Total pages Schedule F1:	2 F						3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 9/27 Rpt: 13/75		Craddick, Tom (The Honoral	ole)					00020051	(
4	Date	5 F	Payee name								
	02/11/2023	ŀ	lunnicutt, Retha								
6	Amount (\$)	7 F	Payee address; City;	State;	; Zip Coo	le					
	\$1,459.43	1	.902 W Ohio Ave								
		N	/idland, TX 79701-5944								
8	PURPOSE	(a) (Category (See Categories listed at the	top of this sch	(aluba	(b) Des	cription				
	OF		Salaries/Wages/Contract La		icuaic)			outsic	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		J J						officeholder living		
						Ass	sist with ca	amp	aign and of	fice holder du	ties
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	C	Office soug	lht			Office h	eld	
	Date	F	ayee name								
	03/15/2023		lunnicutt, Retha								
_	Amount (\$)	F	Payee address; City;	State:	; Zip Coo	le					
	\$1,459.44		.902 W Ohio Ave	,	,						
	φ1,+00.++										
		Ν	/idland, TX 79701-5944								
	PURPOSE OF	(a) (Category (See Categories listed at the	top of this sch	edule)	(b) Des	•				
	EXPENDITURE		Salaries/Wages/Contract La	oor					de of Texas. Com officeholder living	plete Schedule T.	
										ffice holder du	tios
						////		μηρ	aigh and of		100
	Complete ONLY if direct		andidate/Officeholder name		Office soug	uht			Office h	old	
	expenditure to benefit C/OI			C C	Jince Sout	ji it			Office In	eiu	
		1									
	Date		Payee name								
	04/14/2023		lunnicutt, Retha								
	Amount (\$)		Payee address; City;	State;	; Zip Coo	le					
	\$1,459.43	1	.902 W Ohio Ave								
		N	/lidland, TX 79701-5944								
	PURPOSE	(a) (Category (See Categories listed at the	top of this sch	iedule)	(b) Des	cription				
	OF EXPENDITURE	5	Salaries/Wages/Contract La	oor						plete Schedule T.	
	EXFENDITORE								officeholder living		
						Ass	sist with ca	amp	aign and of	fice holder du	ues
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	C	Office soug	lht			Office h	eld	
	Superioration to benefit 0/01										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 10/27 Rpt: 14/75	Craddick, Tom (The Honorable)	00020051							
4	Date 05/13/2023	 Payee name Hunnicutt, Retha 								
6	Amount (\$) \$1,459.44	Payee address; City; State; Zip Code 1902 W Ohio Ave								
		Midland, TX 79701-5944								
8	PURPOSE OF EXPENDITURE	OF Salaries/Wages/Contract Labor								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/15/2023	Hunnicutt, Retha								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$1,459.43	1902 W Ohio Ave Midland, TX 79701-5944								
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Salaries/Wages/Contract Labor Check if travel or Check if Austin, Ch	utside of Texas. Complete Schedule T. TX, officeholder living expense mpaign and office holder duties							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	01/04/2023	Keel Systems								
	Amount (\$) \$786.96	Payee address; City; State; Zip Code 23812 Tres Coronas								
		Spicewood, TX 78669-1631								
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense Compliance services							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Git/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)							
	Sch: 11/27 Rpt: 15/75	Craddick, Tom (The Honorable)	00020051							
4	Date	Payee name								
	02/02/2023	Keel Systems								
6	Amount (\$) \$786.96	Payee address;City;State;Zip Code23812 Tres Coronas								
		Spicewood, TX 78669-1631								
8	PURPOSE OF EXPENDITURE	OF Accounting/Banking								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	03/02/2023	Keel Systems								
	Amount (\$) \$786.96	Payee address; City; State; Zip Code 0.96 23812 Tres Coronas								
		Spicewood, TX 78669-1631								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense d compliance services							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	04/03/2023	Keel Systems								
	Amount (\$) \$786.96	Payee address; City; State; Zip Code 23812 Tres Coronas								
		Spicewood, TX 78669-1631								
	PURPOSE OF EXPENDITURE									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)							
-	Sch: 12/27 Rpt: 16/75	Craddick, Tom (The Honorable)	00020051							
4	Date 05/05/2023	Payee name Keel Systems								
6	Amount (\$) \$786.96	7 Payee address; City; State; Zip Code 23812 Tres Coronas Spicewood, TX 78669-1631								
8	PURPOSE OF EXPENDITURE	OF Accounting/Banking Check if travel outside of Texas. Complete Schedule T.								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/23/2023	Keel Systems								
	Amount (\$) \$786.96	Payee address; City; State; Zip Code 23812 Tres Coronas								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense I compliance services							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/09/2023	LHS Football Booster Club								
	Amount (\$) \$400.00	Payee address; City; State; Zip Code PO Box 7014								
		Midland, TX 79708-7014								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

			EXPENDITURE CATE	GORIES FOI	R BC	DX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Rep Office Ov Polling Ex Printing E Salaries/V	ayme erhea pense xpens xpens Vages	nt/Reimbursement d/Rental Expense e se //Contract Labor		Travel in District Travel Out of Distric	pment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (I	Ethics Commission Filers)	
	Sch: 13/27 Rpt: 17/75		Craddick, Tom (The Honorable)					00020051		
4	Date	5	Payee name							
	05/31/2023		Little Red Wasp Kitchen							
6	Amount (\$)	7	Payee address; City; S	tate; Zip Co	ode					
	\$135.42		808 Main St							
			Fort Worth, TX 76102-6247							
8	PURPOSE	(a)	Category (See Categories listed at the top of thi	s schedule)	(b)	Description				
	OF EXPENDITURE		Food/Beverage Expense	S Solicule)		-	outsi	de of Texas. Complet	te Schedule T.	
	EXPENDITORE							officeholder living ex	pense	
						Legislative w	ork	shop meal		
_										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ight			Office held		
	Date		Payee name							
	01/13/2023		MHS Baseball Boosters							
	Amount (\$)		Payee address; City; S	tate; Zip Co	ode					
	\$150.00		1702 Huntington St							
			Midland, TX 79705-8408							
	PURPOSE	(a)	Category (See Categories listed at the top of thi	s schedule)	(b)	Description				
	OF EXPENDITURE		Advertising Expense					de of Texas. Complet		
						Program Ad	, TX,	officeholder living ex	pense	
						Flografii Au				
_	Complete ONLY if direct		Candidate/Officeholder name	Office sou	laht			Office held		
	expenditure to benefit C/OI				igni					
_	Date	Γ	Payee name							
	06/09/2023		MHS Football Booster Club							
	Amount (\$)		Payee address; City; S	tate; Zip Co	ode					
	\$350.00		PO Box 50761	uno, <u>n</u> p et						
			Midland, TX 79710-0761							
	PURPOSE OF	(a)	Category (See Categories listed at the top of thi	s schedule)	(b)	Description				
	EXPENDITURE		Advertising Expense					de of Texas. Complet officeholder living ex		
						Program Ad	, 17,	oncenduer living ex	pense	
						. iografii Au				
-	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder name	Office sou	l Iaht			Office held		
	expenditure to benefit C/OI			2	ə			5		
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME	Filer ID (Ethics Commission Filers)							
	Sch: 14/27 Rpt: 18/75		Craddick, Tom (The Honorable)					00020051			
4	Date	5	Payee name								
	06/01/2023		Morales, Heriberto								
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$66.00		PO Box 2910								
			Austin, TX 78768-2910								
8	PURPOSE	(a)	Category (See Categories listed at the top of	of this sche	edule)	b) Description					
	OF EXPENDITURE		Gift/Awards/Memorials Expense		,	Check if travel	outsi	side of Texas. Complete Schedule T.			
	EXPENDITORE							k, officeholder living expense			
						Energy Reso	urc	ces Committee Gift			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	0	office soug	ht		Office held			
	Date		Payee name								
	01/13/2023		Optimum								
	Amount (\$)		Payee address; City;	State:	Zip Co	le					
	\$134.59		3001 W Loop 250 N Ste C113		·						
	+20.000										
			Midland, TX 79705-3210								
	PURPOSE OF	(a)	Category (See Categories listed at the top of	of this sche	edule)	b) Description					
	EXPENDITURE		Office Overhead/Rental Expense	9				side of Texas. Complete Schedule T. K, officeholder living expense			
						Office cable :					
						Office cubic :	JUI	vice			
	Complete ONLY if direct		Candidate/Officeholder name)ffice souc	ht		Office held			
	expenditure to benefit C/OI			U							
-	Date		Payee name								
	01/17/2023		Optimum								
	Amount (\$)		Payee address; City;	Stato:	Zip Coo						
	\$134.59		3001 W Loop 250 N Ste C113	Siale,	Zip Cot						
	ψ104.09		3001 W 200p 230 N 3te C113								
			Midland, TX 79705-3210								
	PURPOSE	(a)	Category (See Categories listed at the top of	of this sche	edule)	b) Description					
	OF EXPENDITURE		Office Overhead/Rental Expense	e				side of Texas. Complete Schedule T.			
								 officeholder living expense . 			
						Office cable	serv	VICE			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	0	office soug	ht		Office held			
	experience to benefit C/O	•									

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		-		Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Ex Transportation Equipment Travel in District Travel Out of District OTHER (enter a category in	& Related Expense	
1	Total pages Schedule F1:	2					3	Filer ID (Ethics	Commission Filers)	
L.	Sch: 15/27 Rpt: 19/75		Craddick, Tom (The Honorable) 00020051							
4	Date	5	Payee name							
	03/27/2023		Optimum							
6	Amount (\$)	7	Payee address; City;	State;	Zip Coo	le				
	\$134.59		3001 W Loop 250 N Ste	C113						
			Midland, TX 79705-321)						
8	PURPOSE	<u> </u>				(b) Description				
ľ	OF		Category (See Categories liste Office Overhead/Rental		edule)		outsi	ide of Texas. Complete Sche	edule T.	
	EXPENDITURE			Lypense				, officeholder living expense		
						Office cable				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder nam	e C	Office soug	ht		Office held		
	Date		Payee name							
	04/27/2023	I	Optimum							
			•	Ctata	Zin Co					
	Amount (\$)	I	Payee address; City;		Zip Co	ie				
	\$134.59		3001 W Loop 250 N Ste	C113						
			Midland, TX 79705-321)						
	PURPOSE OF EXPENDITURE		Category (See Categories liste Office Overhead/Rental		edule)		ı, TX	ide of Texas. Complete Sche , officeholder living expense VICE		
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder nam	e C	Office soug	ht		Office held		
	Date		Payee name							
	05/30/2023		Optimum							
			•	Stato:	Zip Co	10				
	Amount (\$)		Payee address; City;		Zip Cu	IE				
	\$134.59		3001 W Loop 250 N Ste	C113						
			Midland, TX 79705-321)						
	PURPOSE	(a)	Category (See Categories liste	d at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Office Overhead/Rental	Expense			ı, TX	ide of Texas. Complete Sche , officeholder living expense viCe		
-	Complete ONLY if direct	<u></u>	andidate/Officeholder nam	<u>a</u> C	Office sou	iht		Office held		
	expenditure to benefit C/OI				אווכב פטענ	p i c		Onice neiu		

				EXPENDIT	URE CATEGOF	RIES 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 Ex Gift/Awards/Memo Legal Services	rials Expense	Office Ove Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
	-			The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	2						3	Filer ID (Ethics Commission Filers	3)	
	Sch: 16/27 Rpt: 20/75		Craddick, T	om (The Hon	orable)				00020051		
4	Date 06/25/2023	5	Payee name Optimum								
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	le				
	\$134.59		3001 W Loop 250 N Ste C113								
			Midland, T>	(79705-3210							
8	PURPOSE OF	(a)			at the top of this sche	edule)	(b) Description				
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office cable service									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	e C	Dffice sou	ht		Office held		
	Date		Payee name								
	01/13/2023		Paychex								
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	le				
	\$337.21		4242 Wood	cock Dr Ste 1	.00						
			San Antonio	o, TX 78228-2	1359						
	PURPOSE OF EXPENDITURE	(a)		ee Categories listed ages/Contrac	at the top of this scho t Labor	edule)	Check if Austir	ı, TX	side of Texas. Complete Schedule T. K, officeholder living expense tax withholding		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi	iceholder name	e C	Dffice sou	ht		Office held		
	Date		Payee name								
	01/13/2023		Paychex								
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	le				
	\$306.20		4242 Wood	cock Dr Ste 1	.00						
				o, TX 78228-:							
	PURPOSE OF EXPENDITURE	(a)	Category (S Accounting		at the top of this sch	edule)		ι, TX	side of Texas. Complete Schedule T. K, officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	iceholder name	e C	Dffice sou	ht		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Ex Gift/Awards/Memo Legal Services	rials Expense	Office Ove Polling Exp Printing Exp Salaries/W	rhead/Ren ense pense ages/Cont	imbursement Ital Expense tract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
_	Tatal same Oshadula Et.			The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1: Sch: 17/27 Rpt: 21/75			om (The Hor	norable)					Filer ID 00020051	(Ethics Commission Filers	5)
4	Date	5	Payee name									
	02/15/2023		Paychex									
6	Amount (\$) \$337.22			ss; City; cock Dr Ste : o, TX 78228-	100	; Zip Co	de					
8	PURPOSE	(a)		0.1.1.1.1.1			(h) Dog	ecription				
0	OF	(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 Federal income tax withholding										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	e (Office sou	ght			Office he	eld	
	Date		Payee name									
	02/15/2023		Paychex									
	Amount (\$)		Payee addres	ss; City;	State;	; Zip Co	de					
	\$151.63		San Antonic	cock Dr Ste	1359							
	PURPOSE OF EXPENDITURE		Category _{(Se} Accounting/		d at the top of this sch	iedule)			, TX,	le of Texas. Com officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	e C	Office sou	ght			Office he	eld	
	Date		Payee name	-		_				-		_
	03/15/2023		Paychex									
	Amount (\$) \$337.21		Payee addres 4242 Wood	ss; City; cock Dr Ste		; Zip Co	de					
			San Antonic	o, TX 78228-	1359							
	PURPOSE OF EXPENDITURE			ee Categories liste ages/Contrac	d at the top of this sch t Labor	iedule)		Check if Austin,	, TX,	de of Texas. Com officeholder living ax withhold		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	e (Office sou	ght			Office he	eld	

		EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 18/27 Rpt: 22/75	Craddick, Tom (The Honorable)	00020051						
4	Date 03/15/2023	5 Payee name Paychex							
6	Amount (\$) \$151.63	 Payee address; City; State; Zip Code 4242 Woodcock Dr Ste 100 San Antonio, TX 78228-1359 							
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	04/14/2023	Paychex							
	Amount (\$) \$335.55	Payee address; City; State; Zip Code 4242 Woodcock Dr Ste 100 San Antonio, TX 78228-1359							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Ie tax withholding						
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	04/14/2023	Paychex							
	Amount (\$) \$167.62	Payee address; City; State; Zip Code 4242 Woodcock Dr Ste 100							
		San Antonio, TX 78228-1359							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

			E	XPENDITURE O	CATEGOR	RIES FOF	R BO	X 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food Gift/A Imittee Lega	t Expense /Beverage Expense .wards/Memorials Exp ! Services Instruction Guide		Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pense (ages/	e 'Contract Labor		Solicitation/Fund Transportation E Travel in District Travel Out of Dis OTHER (enter a	quipment & Relat	
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Comn	nission Filers)
1	Sch: 19/27 Rpt: 23/75		Craddick, Tom	(The Honorable	e)				-	00020051		113310111 11613)
4	Date 05/15/2023		Payee name Paychex									
6	Amount (\$)		Payee address;	City;	State [.]	Zin Co	do					
U	\$330.13		 7 Payee address; City; State; Zip Code 4242 Woodcock Dr Ste 100 San Antonio, TX 78228-1359 									
8	PURPOSE OF EXPENDITURE		Category _{(See Ca} Salaries/Wages			edule)			, TX,	de of Texas. Com officeholder living tax withhold	expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeho	lder name	C	Office sou	ght			Office he	eld	
	Date		Payee name									
	05/15/2023		Paychex									
	Amount (\$)		Payee address;	City;	State:	Zip Co	de					
	\$151.63		4242 Woodcocl San Antonio, TX			·						
	PURPOSE OF EXPENDITURE		Category _{(See Ca} Accounting/Bar		op of this sch	edule)			, TX,	de of Texas. Com officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeho	older name	C	Office sou	ght			Office he	eld	
	Date		Payee name									
	06/15/2023		Paychex									
	Amount (\$) \$324.97		Payee address; 4242 Woodcocl	City; City Dr Ste 100	State;	Zip Co	de					
			San Antonio, T	K 78228-1359								
	PURPOSE OF EXPENDITURE		Category _{(See Ca} Salaries/Wages			edule)			, TX,	de of Texas. Com officeholder living tax withhold	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeho	lder name	C	Office sou	ght			Office he	eld	

		EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 20/27 Rpt: 24/75	Craddick, Tom (The Honorable)	00020051						
4	Date 06/15/2023	Payee name Paychex							
6	Amount (\$) \$155.91	7 Payee address; City; State; Zip Code 4242 Woodcock Dr Ste 100 San Antonio, TX 78228-1359							
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Ə						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	01/18/2023	Paymentus							
	Amount (\$) \$2.79	Payee address; City; State; Zip Code 18390 NE 68th St Redmond, WA 98052-5057							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense VICE						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	03/07/2023	Paymentus							
	Amount (\$) \$2.79	Payee address; City; State; Zip Code 18390 NE 68th St							
		Redmond, WA 98052-5057							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense VICE						
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

		EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
_	Sch: 21/27 Rpt: 25/75	Craddick, Tom (The Honorable)	00020051						
4	-	Payee name							
	05/01/2023	Paymentus							
6	Amount (\$) \$2.79	7 Payee address; City; State; Zip Code \$2.79 18390 NE 68th St Redmond, WA 98052-5057							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bill paying service									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	01/13/2023	Raines, Abby							
	Amount (\$) \$461.75	Payee address; City; State; Zip Code 100 Pin Oak St Dripping Springs, TX 78620-4367							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense mpaign and office holder duties						
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	02/11/2023	Raines, Abby							
	Amount (\$) \$461.75	Payee address; City; State; Zip Code 100 Pin Oak St							
		Dripping Springs, TX 78620-4367							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense mpaign and office holder duties						
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Relat Food/Beverage Expense Polling Expense Travel in District Gitt/Awards/Memorials Expense Printing Expense Travel out of District Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not liste The Instruction Guide explains how to complete this form.						quipment & Related Expense		
_	Tatal yang Oshadula Et.				ians nov		nete this form.		Files ID	(Ethics Oceanication File	
1	Total pages Schedule F1: Sch: 22/27 Rpt: 26/75		FILER NAME Craddick, Tom (Th	e Honorable)					Filer ID 00020051	(Ethics Commission File	ers)
4	Date	5	Payee name								
	03/15/2023		Raines, Abby								
6	Amount (\$)	7	Payee address;	City;	State; Z	ip Code					
	\$461.75		100 Pin Oak St								
			Dripping Springs,	FX 78620-4367							
8	PURPOSE	(a)	Catagony) Description				
ľ	OF		Category (See Catego Salaries/Wages/C		his schedul	e) (~		outsic	le of Texas. Com	plete Schedule T.	
	EXPENDITURE		Salaries/ Wayes/C						officeholder living		
							Assist with ca	amp	aign and off	fice holder duties	
									-		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholde	r name	Offic	ce sough	t		Office he	eld	
	Date		Payee name								
	04/16/2023		Raines, Abby								
_					Stata: 7	Vin Code					
	Amount (\$)		-	City;	State; Z	ip Code					
	\$461.75		100 Pin Oak St								
			Dripping Springs,	FX 78620-4367							
	PURPOSE OF EXPENDITURE		Category (See Catego Salaries/Wages/C		his schedul	_{le)} (b	Check if Austin	, TX,	de of Texas. Comp officeholder living aign and off		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholde	r name	Offic	ce sough	t		Office he	eld	
	Date		Payee name								
	05/13/2023		Raines, Abby								
_				City	State; Z	in Code					
	Amount (\$)			City;	State, Z	ip Coue					
	\$461.75		100 Pin Oak St								
			Dripping Springs,	FX 78620-4367							
	PURPOSE	(a)	Category (See Catego	ries listed at the top of t	his schedul	(b	Description				
	OF EXPENDITURE		Salaries/Wages/C	ontract Labor			Check if Austin	, TX,	le of Texas. Comp officeholder living	expense	
							Assist with Ca	amp	aign and off	fice holder duties	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholde	r name	Offic	ce sough	t		Office he	eld	
⊢	•										

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Event Expense Fees/ Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Legal Ser			d/Rental Expense e /Contract Labor		Solicitation/Fund Transportation E Travel in District Travel Out of Di OTHER (enter a	Equipment & F	Related Expense	
	The Instruction Guide explains how to complete this form.											
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Co	ommission Filers)
	Sch: 23/27 Rpt: 27/75		Craddick, T	om (The Hon	orable)					00020051		
4	Date	5	Payee name									
	06/15/2023		Raines, Ab	су								
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de					
	\$461.75		100 Pin Oa	k St								
			Dripping Sp	orings, TX 786	620-4367							
8	PURPOSE	(a)					(h)	Description				
ľ	OF	(4)		ee Categories listed ages/Contrac	at the top of this sch	nedule)	(5)	Description	outsi	de of Texas. Corr	plete Schedu	le T.
	EXPENDITURE		Suluries/ W	iges/contrac	Labor					officeholder living		
								Assist with ca	amp	aign and of	fice holde	er duties
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	ceholder name	. (Office sou	ght			Office h	eld	
	Date		Payee name									
	05/25/2023		Ready Refr	esh By Nestle	è							
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$148.01		6661 Dixie			, 1						
				,,								
			Louisville, ł	(Y 40258-395	0							
	PURPOSE OF	(a)			at the top of this sch	nedule)	(b)	Description				-
	EXPENDITURE		Food/Bever	age Expense						de of Texas. Com officeholder living		le T.
								Office refresh			gespense	
-	Complete ONLY if direct		Candidate/Off	ceholder name	(Office sou	aht			Office h	eld	
	expenditure to benefit C/Oł						9			0	014	
_	Data	_										
	Date		Payee name									
	06/30/2023			esh By Nestle								
	Amount (\$)		Payee addre		State	; Zip Co	de					
	\$175.00		6661 Dixie	Hwy Ste 4								
			Louisville, k	(Y 40258-395	0							
	PURPOSE	(a)	Category (S	ee Categories listed	at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Food/Bever	age Expense						de of Texas. Com		le T.
										officeholder living	g expense	
								Office refresh	ime	ents		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	ceholder name	(Office sou	ght			Office h	eld	
		•										

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense e By - Gift/Awards/Memorials Expense titcal Committee Legal Services Salaries/Wages/Contract Labor				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2		•		·	3	Filer ID (Ethics Commission Filers)	
	Sch: 24/27 Rpt: 28/75	[Craddick, Tom (The Honorable)				00020051	
4	Date	5	Payee name						
	01/31/2023		Ready Refresh						
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le			
	\$107.48		PO Box 856680						
			Louisville, KY 40285-6680						
8	PURPOSE OF	(a)	Category (See Categories listed at the top		iedule)	(b) Description			
	EXPENDITURE		Office Overhead/Rental Expense	se				ide of Texas. Complete Schedule T. , officeholder living expense	
						Office refrest			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	Dffice soug	ht		Office held	
	Date		Payee name						
	02/28/2023		Ready Refresh						
	Amount (\$)		Payee address; City;	State;	; Zip Coo	le			
	\$107.48		PO Box 856680						
			Louisville, KY 40285-6680						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Office Overhead/Rental Expense		edule)		I, TX	ide of Texas. Complete Schedule T. , officeholder living expense HentS	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Dffice soug	ht		Office held	
	Date		Payee name						
	03/27/2023		Ready Refresh						
	Amount (\$)		Payee address; City;	State:	; Zip Coo	le			
	\$143.42		PO Box 856680		•				
			Louisville, KY 40285-6680						
	PURPOSE OF		Category (See Categories listed at the top		edule)	(b) Description			
	EXPENDITURE		Office Overhead/Rental Expens	se			n, TX	ide of Texas. Complete Schedule T. , officeholder living expense EntS	
	Complete ONLY if direct	- (Candidate/Officeholder name	C	Dffice soug	ht		Office held	
	expenditure to benefit C/OI	Н							

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense By - Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2			•	3	Filer ID (Ethics Commission Filers)	
-	Sch: 25/27 Rpt: 29/75		Craddick, Tom (The Honorable)				00020051	
4	Date	5	Payee name					
	04/24/2023		Ready Refresh					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de			
	\$107.48		PO Box 856680					
			Louisville, KY 40285-6680					
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Food/Beverage Expense	suulo)		outsi	de of Texas. Complete Schedule T.	
	EXPENDITORE						officeholder living expense	
					Office Refres	hm	lents	
_								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	gnt		Office held	
	Date		Payee name					
	06/29/2023		Square Inc.					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$87.65		1455 Market St Fl 8					
			San Francisco, CA 94103-1332					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	EXPENDITURE		Solicitation/Fundraising Expense				de of Texas. Complete Schedule T. , officeholder living expense	
					Credit card p			
							C .	
	Complete ONLY if direct		Candidate/Officeholder name C)ffice sou	ght		Office held	
	expenditure to benefit C/OI	Н						
	Date		Payee name					
	02/10/2023		Tarry House, Inc.					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$324.76		PO Box 5583					
			Austin, TX 78763-5583					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	EXPENDITURE		Fees				de of Texas. Complete Schedule T. officeholder living expense	
					Membership			
					membersnip	aut		
	Complete ONLY if direct	Ļ	Candidate/Officeholder name C	Office sou	abt		Office held	
	expenditure to benefit C/OI			3000	gin			

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhea Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	se Travel Out of District s/Contract Labor OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)						
-	Sch: 26/27 Rpt: 30/75	raddick, Tom (The Honorable)	00020051						
4	Date 03/07/2023	ayee name arry House, Inc.							
6	Amount (\$) \$162.38	ayee address; City; State; Zip Code O Box 5583 ustin, TX 78763-5583							
8	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule) (b) eeS	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership dues						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sought	Office held						
	Date	ayee name							
	04/11/2023	arry House, Inc.							
	Amount (\$) \$162.38	ayee address; City; State; Zip Code O Box 5583 ustin, TX 78763-5583							
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule) (b) ees	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership dues						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sought	Office held						
	Date	ayee name							
	04/11/2023	arry House, Inc.							
	Amount (\$) \$5,444.47	ayee address; City; State; Zip Code O Box 5583							
		ustin, TX 78763-5583							
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule) (b) leeting	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 20th Year Speaker Reunion						
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sought	Office held						

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Poling Expense tical Committee Exp - Legal Services Exp - The Instruction Guide explains how to complete this form.			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
							iipiete					
	Total pages Schedule F1:								3	Filer ID		(Ethics Commission Filers)
	Sch: 27/27 Rpt: 31/75	C	raddick,	Tom (The Honor	rable)					0002005	51	
4	Date	5 Pá	ayee nam	e								
	02/21/2023			- nservative Coalit	ion							
6 /	Amount (\$) \$2,000.00		ayee addr O Box 26		State;	Zip Co	de					
		A	ustin, TX	78768-2659								
8	PURPOSE OF EXPENDITURE		ategory ₍ ees	(See Categories listed at	the top of this sch	edule)		escription Check if travel Check if Austin Iembership	ı, TX,	officeholder I	living	•
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ndidate/O	fficeholder name	C	Dffice sou	ght			Office	e he	eld
	Date	D:	ayee nam	<u>م</u>								
	02/22/2023			use Republican (
	Amount (\$) \$1,000.00	P	ayee addr O Box 13 ustin, TX		State;	; Zip Co	Je					
	PURPOSE OF EXPENDITURE		ategory ₍ ees	(See Categories listed at	the top of this sch	edule)		escription Check if travel Check if Austin 023 Dues				olete Schedule T. expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/O	fficeholder name	C	Office sou	ght			Office	e he	ld

EXPENDITUR	ES MADE BY CREDI	T CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic	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: Sch: 1/42 Rpt: 32/75	2 FILER NAME Craddick, Tom (The Honorab	le)	3 Filer ID (Ethics Commission Filers) 00020051
⁴ TOTAL OF UNITEM	ZED EXPENDITURES CHAR	GED TO A CREDIT CARD	\$
5 Date 01/04/2023	6 Payee name Alonti Cafe & Catering		
7 Amount (\$) \$864.89	8 Payee address; City; 1001 Fannin St Houston, TX 77002-6706	State; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Food/Beverage Expense	Check if trav	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense related meeting
11 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name H	Office sought	Office held
Date 01/10/2023	Payee name Alonti Cafe & Catering		
Amount (\$) \$193.90	Payee address; City; 1001 Fannin St	State; Zip Code	
TYPE OF	Houston, TX 77002-6706		
EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Food/Beverage Expense	Check if trav	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense related meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name	Office sought	Office held

	EXPENDITURE	ES MADE BY CREDIT	T CARD	SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense / - Gift/Awards/Memorials Exp al Committee Legal Services	CATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursemen Office Overhead/Rental Expense Polling Expense pense Printing Expense Salaries/Wages/Contract Labor e explains how to complete this form.	
1	Total pages Schedule F4: Sch: 2/42 Rpt: 33/75	2 FILER NAME Craddick, Tom (The Honorabl	le)	3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMI	ZED EXPENDITURES CHARC	GED TO A CREDIT CARD	\$
5	02/07/2023	6 Payee name Alonti Cafe & Catering		
7	Amount (\$) \$108.68	 8 Payee address; City; 1001 Fannin St Houston, TX 77002-6706 	State; Zip Code	
9	TYPE OF EXPENDITURE	X Political	Non-Political	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Food/Beverage Expense	Check if tra	vel outside of Texas. Complete Schedule T. Istin, TX, officeholder living expense related meeting
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
	Date 03/06/2023	Payee name Alonti Cafe & Catering		
	Amount (\$) \$228.14	Payee address; City; 1001 Fannin St Houston, TX 77002-6706	State; Zip Code	
	TYPE OF EXPENDITURE	X Political	Non-Political	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Food/Beverage Expense	Check if tra	vel outside of Texas. Complete Schedule T. Istin, TX, officeholder living expense related meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

EXPENDITUR	ES MADE BY CREDI	IT CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made I Candidate/Officeholder/Politi	t 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 Sch: 3/42 Rpt: 34/75	2 FILER NAME Craddick, Tom (The Honoral	ble)	3 Filer ID (Ethics Commission Filers) 00020051
⁴ TOTAL OF UNITEM	IZED EXPENDITURES CHAR	GED TO A CREDIT CARD	\$
5 Date 03/07/2023	6 Payee name Alonti Cafe & Catering		
7 Amount (\$) \$136.56	8 Payee address; City; 1001 Fannin St Houston, TX 77002-6706	State; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Food/Beverage Expense	Check if trav	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense related meeting
11 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name DH	Office sought	Office held
Date 03/07/2023	Payee name Alonti Cafe & Catering		
Amount (\$) \$193.90	Payee address; City; 1001 Fannin St	State; Zip Code	
TYPE OF EXPENDITURE	Houston, TX 77002-6706	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Food/Beverage Expense	Check if trav	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense related meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name DH	Office sought	Office held

EXPENDITUR	ES MADE BY CRED	IT CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Poli	t 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 F ² Sch: 4/42 Rpt: 35/75	: 2 FILER NAME Craddick, Tom (The Honoral	ble)	3 Filer ID (Ethics Commission Filers) 00020051
⁴ TOTAL OF UNITEN	IIZED EXPENDITURES CHAR	RGED TO A CREDIT CARD	\$
5 Date 03/14/2023	6 Payee name Alonti Cafe & Catering		
7 Amount (\$) \$244.4:	8 Payee address; City; 1001 Fannin St Houston, TX 77002-6706	State; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Food/Beverage Expense	Check if trav	rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense related meeting
11 Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate/Officeholder name OH	Office sought	Office held
Date 04/20/2023	Payee name Alonti Cafe & Catering		
Amount (\$) \$217.75		State; Zip Code	
TYPE OF EXPENDITURE	Houston, TX 77002-6706	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Food/Beverage Expense	Check if trav	rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense related meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate/Officeholder name OH	Office sought	Office held

I	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Rej Office Ov Polling E ense Printing B Salaries/	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Total pages Schedule F4: Sch: 5/42 Rpt: 36/75	2 FILER NAME Craddick, Tom (The Honorable	e)		3 Filer ID (Ethics Commission Filers) 00020051
4 -	TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	ED TO A CRE	EDIT CARD	\$
	Date 04/27/2023	6 Payee name Amazon.com			
7 /	Amount (\$) \$8.22	8 Payee address; City; 1200 12Th Ave S Seattle, WA 98144-2712	State; Zip C	ode	
9	TYPE OF EXPENDITURE	X Political	Non-Po	litical	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Office Overhead/Rental Expen			outside of Texas. Complete Schedule T. n, TX, officeholder living expense ES
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	I Candidate/Officeholder name H	Office so	ught	Office held
	Date 02/10/2023	Payee name American Express			
ļ	Amount (\$) \$39.00	Payee address; City; PO Box 650448	State; Zip C	ode	
		Dallas, TX 75265-0448			
	TYPE OF EXPENDITURE	X Political	Non-Po	litical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Fees	p of this schedule)	Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense redit card fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	ught	Office held

	EXPENDITUR	ES MADE BY CREDI	IT CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense / - Gift/Awards/Memorials E al Committee Legal Services	Office Ov Polling Expense Printing E	ayment/Reimbursement erhead/Rental Expense pense xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 6/42 Rpt: 37/75	2 FILER NAME Craddick, Tom (The Honoral	ble)		3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMI	ZED EXPENDITURES CHAR	GED TO A CRE	DIT CARD	\$
5	Date 02/13/2023	6 Payee name American Express			
7	Amount (\$) \$159.67	8 Payee address; City; PO Box 650448 Dallas, TX 75265-0448	State; Zip Co	ode	
9	TYPE OF EXPENDITURE	X Political	Non-Pol	tical	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Fees	e top of this schedule)	Check if Austi	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense redit card fees
11	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held
	Date 03/16/2023	Payee name American Express			
	Amount (\$) \$8.20	Payee address; City; PO Box 650448	State; Zip Co	ode	
		Dallas, TX 75265-0448			
	TYPE OF EXPENDITURE	X Political	Non-Pol		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Fees	e top of this schedule)	Check if Austi	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense redit card fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held

	EXPENDITURE	ES MADE BY CREDIT	CARD	SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense - Gift/Awards/Memorials Expe I Committee Legal Services	CATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
L	Total pages Schedule F4: Sch: 7/42 Rpt: 38/75	2 FILER NAME Craddick, Tom (The Honorable	2)	3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARG	ED TO A CREDIT CARD	\$
5	Date 05/28/2023	6 Payee name Capital Grille		
7	Amount (\$) \$86.38	 8 Payee address; City; 1338 Chestnut St Philadelphia, PA 19107-4525 	State; Zip Code	
9	TYPE OF EXPENDITURE	X Political	Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Food/Beverage Expense	Check if trave	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense related meeting
11	. Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
	Date 04/13/2023	Payee name Capitol Gift Shop		
	Amount (\$) \$335.58	Payee address; City; 1400 Congress Ave	State; Zip Code	
╞	TYPE OF EXPENDITURE	Austin, TX 78701-1932	Non-Political	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Office Overhead/Rental Expen	ISE Check if trave	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense lies
F	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

EXPENDITUR	ES MADE BY CREDIT	CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Politi	Event Expense Fees Food/Beverage Expense By - Gift/Awards/Memorials Exp cal Committee Legal Services	CATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursemen Office Overhead/Rental Expense Polling Expense ense Printing Expense Salaries/Wages/Contract Labor e explains how to complete this form.	
1 Total pages Schedule F4 Sch: 8/42 Rpt: 39/75	2 FILER NAME Craddick, Tom (The Honorable	e)	3 Filer ID (Ethics Commission Filers) 00020051
⁴ TOTAL OF UNITEM	IZED EXPENDITURES CHARG	ED TO A CREDIT CARD	\$
5 Date 04/19/2023	6 Payee name Capitol Gift Shop		
7 Amount (\$) \$238.15	8 Payee address; City; 1400 Congress Ave Austin, TX 78701-1932	State; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Gift/Awards/Memorials Expens	Se Check if trav	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense jislative pages
11 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name DH	Office sought	Office held
Date 05/09/2023	Payee name Cathy Eastham Jewelry		
Amount (\$) \$377.79	Payee address; City; 2101 W Wadley Ave Ste 31 Midland, TX 79705-6439	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Gift/Awards/Memorials Expens	Se Check if trav	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense Staff giftS
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name DH	Office sought	Office held

EXPENDITUR	ES MADE BY CREDIT	CARD		SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repay Office Over Polling Exp se Printing Exp Salaries/Wa	ment/Reimbursement head/Rental Expense ense gense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 9/42 Rpt: 40/75	2 FILER NAME Craddick, Tom (The Honorable)			3 Filer ID (Ethics Commission Filers) 00020051
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARGE	D TO A CREE	DIT CARD	\$
5 Date 03/20/2023	6 Payee name Chinatown			
7 Amount (\$) \$231.66	 8 Payee address; City; 3300 Bee Cave Rd Ste 200 West Lake Hills, TX 78746-6662 	State; Zip Coc	e	
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)	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense elated meeting
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	ht	Office held
Date 02/02/2023	Payee name Cort Furniture Rental			
Amount (\$) \$534.67	Payee address; City; 8940 Research Blvd Ste C Austin, TX 78758-6036	State; Zip Coc	le	
TYPE OF EXPENDITURE	X Political	Non-Politi	cal	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense		X Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense office holder Austin living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	ht	Office held

	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repa Office Over Polling Exp Ise Printing Exp Salaries/Wa	yment/Reimbursement rhead/Rental Expense ense pense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 10/42 Rpt: 41/75	2 FILER NAME Craddick, Tom (The Honorable)			3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	D TO A CREI	DIT CARD	\$
	Date 03/02/2023	6 Payee name Cort Furniture Rental			
7	Amount (\$) \$534.67	 8 Payee address; City; 8940 Research Blvd Ste C Austin, TX 78758-6036 	State; Zip Coo	le	
9	TYPE OF EXPENDITURE	X Political	Non-Politi	ical	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top o Office Overhead/Rental Expense		X Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense office holder Austin living expense
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office soug	Jht	Office held
F	Date 04/04/2023	Payee name Cort Furniture Rental			
	Amount (\$) \$534.67	Payee address; City; 8940 Research Blvd Ste C Austin, TX 78758-6036	State; Zip Coo	le	
\vdash	TYPE OF EXPENDITURE	X Political	Non-Politi	ical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense		X Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense office holder Austin living expense
F	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office soug	ıht	Office held

	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	EXPENDITURE C. Event Expense Fees Food/Beverage Expense d Committee Legal Services The Instruction Guide	Loan Repa Office Ove Polling Exp ense Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 11/42 Rpt: 42/75	2 FILER NAME Craddick, Tom (The Honorable))		3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGI	ED TO A CREI	DIT CARD	\$
5	Date 05/02/2023	6 Payee name Cort Furniture Rental			
7	Amount (\$) \$534.67	8 Payee address; City; 8940 Research Blvd Ste C Austin, TX 78758-6036	State; Zip Co	le	
9	TYPE OF EXPENDITURE	X Political	Non-Polit	ical	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens		X Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense office holder Austin living expense
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sou	pht	Office held
	Date 06/02/2023	Payee name Cort Furniture Rental			
	Amount (\$) \$534.67	Payee address; City; 8940 Research Blvd Ste C Austin, TX 78758-6036	State; Zip Co	de	
F	TYPE OF EXPENDITURE	X Political	Non-Polit	ical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens		X Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense office holder Austin living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sou	yht	Office held

	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Rep Office Ov Polling Ex ense Printing E Salaries/	ayment/Reimbursement erhead/Rental Expense pense xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
L	Total pages Schedule F4: Sch: 12/42 Rpt: 43/75	2 FILER NAME Craddick, Tom (The Honorable	2)		3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARG	ED TO A CRE	DIT CARD	\$
	Date 03/13/2023	6 Payee name David Kurio Floral Designs			
7	Amount (\$) \$914.71	 8 Payee address; City; 2003 Wheless Ln Austin, TX 78723-1914 	State; Zip Co	de	
9	TYPE OF EXPENDITURE	X Political	Non-Pol	tical	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expen		Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense egislative office
11	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held
	Date 04/21/2023	Payee name David Kurio Floral Designs			
	Amount (\$) \$149.14	Payee address; City; 2003 Wheless Ln Austin, TX 78723-1914	State; Zip Co	ode	
	TYPE OF EXPENDITURE	X Political	Non-Pol	tical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expen		Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense egislative office
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held

	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repa Office Over Polling Exp nse Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 13/42 Rpt: 44/75	2 FILER NAME Craddick, Tom (The Honorable)			3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMI	ZED EXPENDITURES CHARGE	ED TO A CREI	DIT CARD	\$
	Date 04/25/2023	6 Payee name David Kurio Floral Designs			
7	Amount (\$) \$136.94	 8 Payee address; City; 2003 Wheless Ln Austin, TX 78723-1914 	State; Zip Coo	le	
9	TYPE OF EXPENDITURE	X Political	Non-Polit	cal	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens		Check if Austi	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense egislative office
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	ht	Office held
	Date 01/11/2023	Payee name DoorDash			
	Amount (\$) \$90.14	Payee address; City; 116 New Montgomery St	State; Zip Coo	le	
	TYPE OF	San Francisco, CA 94105-3622			
	EXPENDITURE	X Political	Non-Polit		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	of this schedule)		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense Ce meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	lht	Office held

	EXPENDITUR	ES MADE BY CREDIT	Γ CARD	SCHEDULE F4
┡				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Exp al Committee Legal Services	CATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor e explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
L	Sch: 14/42 Rpt: 45/75	Craddick, Tom (The Honorable	e)	00020051
4		ZED EXPENDITURES CHARG	GED TO A CREDIT CARD	\$
5	Date 03/29/2023	6 Payee name		
<u>–</u>	Amount (\$)	DoorDash 8 Payee address; City;	State: Zip Code	
ľ	\$25.54	116 New Montgomery St	State, Zip Code	
	\$20.0 T			
		San Francisco, CA 94105-362	22	
9	TYPE OF EXPENDITURE	X Political	Non-Political	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Food/Beverage Expense	Check if trave	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense elated meeting
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
	Date 05/09/2023	Payee name DoorDash		
	Amount (\$) \$123.62	Payee address; City; 116 New Montgomery St	State; Zip Code	
		San Francisco, CA 94105-362	22	
	TYPE OF EXPENDITURE	X Political	Non-Political	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Food/Beverage Expense	Check if trave	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense elated meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

	EXPENDITUR	ES MADE BY CREDIT	CARD	SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Expe al Committee Legal Services	CATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Salaries/Wages/Contract Labor explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
L	Total pages Schedule F4: Sch: 15/42 Rpt: 46/75	2 FILER NAME Craddick, Tom (The Honorable	9)	3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	ED TO A CREDIT CARD	\$
	Date 05/11/2023	6 Payee name DoorDash		
7	Amount (\$) \$109.50	 8 Payee address; City; 116 New Montgomery St San Francisco, CA 94105-362; 	State; Zip Code	
9	TYPE OF EXPENDITURE	X Political	Non-Political	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Food/Beverage Expense	Check if trave	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense elated meeting
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
	Date 05/16/2023	Payee name DoorDash		
	Amount (\$) \$113.40	Payee address; City; 116 New Montgomery St	State; Zip Code	
╞	TYPE OF	San Francisco, CA 94105-362		
	EXPENDITURE	Political	Non-Political	
	OF	(a) Category (See Categories listed at the to Food/Beverage Expense	Check if trave	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense elated meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Re Office O Polling E Dense Printing f Salaries/	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
L	Total pages Schedule F4: Sch: 16/42 Rpt: 47/75	2 FILER NAME Craddick, Tom (The Honorable	e)		3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARG	GED TO A CRE	EDIT CARD	\$
	Date 01/02/2023	6 Payee name Extra Space Storage			
7	Amount (\$) \$482.00	 8 Payee address; City; 2504 N Loop 250 W Midland, TX 79707-6024 	State; Zip C	ode	
9	TYPE OF EXPENDITURE	X Political	Non-Po	litical	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Office Overhead/Rental Exper			outside of Texas. Complete Schedule T. n, TX, officeholder living expense Corage rent
11	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	ught	Office held
	Date 02/02/2023	Payee name Extra Space Storage			
	Amount (\$) \$482.00	Payee address; City; 2504 N Loop 250 W Midland, TX 79707-6024	State; Zip C	ode	
┢	TYPE OF EXPENDITURE	X Political	Non-Po	litical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Office Overhead/Rental Exper			outside of Texas. Complete Schedule T. n, TX, officeholder living expense Corage rent
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	ught	Office held

	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Re Office O Polling E Dense Printing f Salaries/	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
L	Total pages Schedule F4: Sch: 17/42 Rpt: 48/75	2 FILER NAME Craddick, Tom (The Honorable	e)		3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARG	GED TO A CRE	EDIT CARD	\$
	Date 03/02/2023	6 Payee name Extra Space Storage			
7	Amount (\$) \$482.00	 8 Payee address; City; 2504 N Loop 250 W Midland, TX 79707-6024 	State; Zip C	ode	
9	TYPE OF EXPENDITURE	X Political	Non-Po	litical	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Office Overhead/Rental Exper			outside of Texas. Complete Schedule T. n, TX, officeholder living expense Corage rent
11	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	ught	Office held
	Date 04/01/2023	Payee name Extra Space Storage			
	Amount (\$) \$482.00	Payee address; City; 2504 N Loop 250 W Midland, TX 79707-6024	State; Zip C	ode	
┢	TYPE OF EXPENDITURE	X Political	Non-Po	litical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Office Overhead/Rental Exper			outside of Texas. Complete Schedule T. n, TX, officeholder living expense Corage rent
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	ught	Office held

	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Rej Office Ov Polling E ense Printing B Salaries/	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Total pages Schedule F4: Sch: 18/42 Rpt: 49/75	2 FILER NAME Craddick, Tom (The Honorable	e)		3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARG	ED TO A CRE	EDIT CARD	\$
	Date 05/02/2023	6 Payee name Extra Space Storage			
7	Amount (\$) \$482.00	 8 Payee address; City; 2504 N Loop 250 W Midland, TX 79707-6024 	State; Zip C	ode	
9	TYPE OF EXPENDITURE	X Political	Non-Po	litical	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Office Overhead/Rental Exper			l outside of Texas. Complete Schedule T. n, TX, officeholder living expense torage rent
11	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	ught	Office held
	Date 06/02/2023	Payee name Extra Space Storage			
	Amount (\$) \$482.00	Payee address; City; 2504 N Loop 250 W	State; Zip C	ode	
	TYPE OF EXPENDITURE	Midland, TX 79707-6024	Non-Po	litical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Office Overhead/Rental Exper			l outside of Texas. Complete Schedule T. n, TX, officeholder living expense torage rent
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	ught	Office held

EXPENDITU	RES MADE BY CRED	NT CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Ma Candidate/Officeholder/F	Event Expense Fees Food/Beverage Expens de By - Gift/Awards/Memorials olitical Committee Legal Services		
1 Total pages Schedule Sch: 19/42 Rpt: 50/		able)	3 Filer ID (Ethics Commission Filers) 00020051
⁴ TOTAL OF UNITE	MIZED EXPENDITURES CHAP	RGED TO A CREDIT CARD	\$
5 Date 05/04/2023	6 Payee name Food-Food		
7 Amount (\$) \$62.	 8 Payee address; City; 2727 Exposition Blvd Ste 12 Austin, TX 78703-1227 	State; Zip Code 12	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at th Food/Beverage Expense	Check if trav	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense ISINESS MEETING
11 Complete <u>ONLY</u> if dire expenditure to benefit		Office sought	Office held
Date 04/14/2023	Payee name GrubHub		
Amount (\$) \$115.	Ŭ	State; Zip Code	
TYPE OF EXPENDITURE	Chicago, IL 60602-2703	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at th Food/Beverage Expense	Check if trav	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense related meeting
Complete <u>ONLY</u> if dire expenditure to benefit		Office sought	Office held

EXPENDITUR	ES MADE BY CREDIT	CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Expe al Committee Legal Services	CATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 20/42 Rpt: 51/75	2 FILER NAME Craddick, Tom (The Honorable	2)	3 Filer ID (Ethics Commission Filers) 00020051
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	ED TO A CREDIT CARD	\$
5 Date 05/06/2023	6 Payee name HEB		
7 Amount (\$) \$167.15	8 Payee address; City; Po Box 839988 San Antonio, TX 78283-3988	State; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Food/Beverage Expense	Check if trave	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense elated meeting
11 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name H	Office sought	Office held
Date 06/02/2023	Payee name HEB		
Amount (\$) \$46.98	Payee address; City; Po Box 839988	State; Zip Code	
TYPE OF	San Antonio, TX 78283-3988	Non-Political	
EXPENDITURE PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Food/Beverage Expense	p of this schedule) (b) Description Check if trave	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense office refreshments
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name H	Office sought	Office held

	EXPENDITURE	ES MADE BY CREDIT C	CARD	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 I Committee Legal Services	EGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Dalains 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)
	Total pages Schedule F4: Sch: 21/42 Rpt: 52/75	2 FILER NAME Craddick, Tom (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$
5	Date 04/20/2023	6 Payee name Hermes		
7	Amount (\$) \$779.40	8 Payee address; City; 125 Grant Ave San Francisco, CA 94108-5403	State; Zip Code	
9	TYPE OF EXPENDITURE	X Political	Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Gift/Awards/Memorials Expense	Check if travel	outside of Texas. Complete Schedule T. , TX, officeholder living expense aff gifts
11	. Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name I	Office sought	Office held
Γ	Date 05/10/2023	Payee name Hermes		
	Amount (\$) \$1,071.68	Payee address; City; 125 Grant Ave	State; Zip Code	
┝	TYPE OF	San Francisco, CA 94108-5403		
L	EXPENDITURE	X Political	Non-Political	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Gift/Awards/Memorials Expense	Check if travel	outside of Texas. Complete Schedule T. , TX, officeholder living expense aff gifts
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought	Office held

	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repa Office Ove Polling Exp nse Printing Ex Salaries/W	ayment/Reimbursement rhead/Rental Expense pense pense lages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Total pages Schedule F4: Sch: 22/42 Rpt: 53/75	2 FILER NAME Craddick, Tom (The Honorable))		3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMI	ZED EXPENDITURES CHARGE	ED TO A CRE	DIT CARD	\$
	Date 05/10/2023	6 Payee name Hermes			
7	Amount (\$) \$259.80	 8 Payee address; City; 125 Grant Ave San Francisco, CA 94108-5403 	State; Zip Co	de	
9	TYPE OF EXPENDITURE	X Political	Non-Polit	ical	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Gift/Awards/Memorials Expense			outside of Texas. Complete Schedule T. n, TX, officeholder living expense taff gifts
11	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held
	Date 04/27/2023	Payee name Insomnia Cookies			
	Amount (\$) \$42.76	Payee address; City; 2323 San Antonio St Austin, TX 78705-5227	State; Zip Co	de	
	TYPE OF EXPENDITURE	X Political	Non-Polit	ical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	of this schedule)	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense elated meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held

EXPENDITUR	ES MADE BY CREDI	T CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made I Candidate/Officeholder/Politie	Event Expense Fees Food/Beverage Expense By - Gift/Awards/Memorials E cal Committee Legal Services		
1 Total pages Schedule F4: Sch: 23/42 Rpt: 54/75		ble)	3 Filer ID (Ethics Commission Filers) 00020051
⁴ TOTAL OF UNITEM	IZED EXPENDITURES CHAR	GED TO A CREDIT CARD	\$
5 Date 01/23/2023	6 Payee name Jimmy John's #491		
7 Amount (\$) \$17.77	8 Payee address; City; 2410 Ranch Rd 620 S Austin, TX 78738	State; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Food/Beverage Expense	Check if trav	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense related meeting
11 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name DH	Office sought	Office held
Date 02/08/2023	Payee name Jimmy John's #491		
Amount (\$) \$67.94	Payee address; City; 2410 Ranch Rd 620 S	State; Zip Code	
TYPE OF	Austin, TX 78738		
EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Food/Beverage Expense	Check if trav	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense related meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name DH	Office sought	Office held

EXPEND	ITURE	S MADE	BY CRED	DIT CAF	RD				SCHEDULE	F4
Advertising Expens Accounting/Banking Consulting Expense Contributions/ Dona Candidate/Office	9 e ations Made By -		EXPENDITUR Event Expense Fees Food/Beverage Expen Gift/Awards/Memorials Legal Services The Instruction G	se Expense	Loan Repay Office Over Polling Exp Printing Exp Salaries/Wa	ment/Reimburseme head/Rental Expens ense ense ges/Contract Labor	e	Travel in District Travel Out of Dis	quipment & Related Exp	
1 Total pages Sch Sch: 24/42 Rp			E Tom (The Honor	able)			3	Filer ID 00020051	(Ethics Commissio	n Filers)
⁴ TOTAL OF U	JNITEMIZ	ED EXPENI	DITURES CHA	RGED TO	A CREE	OIT CARD	\$			
5 Date 02/27/2023		6 Payee nam Jimmy Joh	ın's #491							
7 Amount (\$)	\$28.34	8 Payee addr 2410 Rand Austin, TX	ch Rd 620 S	State;	Zip Cod	e				
9 TYPE OF EXPENDITURI	E	Х	Political		Non-Politi	cal				
10 PURPOSE OF EXPENDITURI		0,	See Categories listed at I erage Expense	the top of this sch	edule) (Check if A	ustin, TX,	ide of Texas. Comp , officeholder living ed meeting		
11 Complete ONLY expenditure to b			ficeholder name	C	Office soug	ht		Office he	ld	
Date 05/22/2023		Payee nam Jimmy Joh								
Amount (\$)	\$49.69		ch Rd 620 S	State;	Zip Cod	e				
TYPE OF EXPENDITURI		Austin, TX	78738 Political		Non-Politi	cal				
PURPOSE OF EXPENDITURI			See Categories listed at t erage Expense	the top of this sch	edule) (Check if A	ustin, TX,	ide of Texas. Com , officeholder living ed meeting		
Complete <u>ONLY</u> expenditure to b			ficeholder name	C	Office soug	ht		Office he	ld	

	EXPENDITURE	ES MADE BY CREDIT	CARD	SCHEDULE F4			
L							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense / - Gift/Awards/Memorials Expe Il Committee Legal Services	ATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
	Sch: 25/42 Rpt: 56/75	Craddick, Tom (The Honorable)	00020051			
4	TOTAL OF UNITEMI	ZED EXPENDITURES CHARGI	ED TO A CREDIT CARD	\$			
5	Date	6 Payee name					
L	02/06/2023	La Madeleine					
7	Amount (\$) \$70.62	8 Payee address; City; 701 S Capital Of Texas Hwy	State; Zip Code				
		West Lake Hills, TX 78746-524	3				
9	TYPE OF EXPENDITURE	X Political	Non-Political				
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check if trave	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense related meeting			
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held			
	Date 02/22/2023	Payee name La Madeleine					
	Amount (\$) \$37.51	Payee address; City; 701 S Capital Of Texas Hwy	State; Zip Code				
		West Lake Hills, TX 78746-524	.3				
	TYPE OF EXPENDITURE	X Political	Non-Political				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check if trave	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense related meeting			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held			

	EXPENDITURE	ES MADE BY CREDIT	CARD	SCHEDULE F4			
L							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politice	Event Expense Fees Food/Beverage Expense - Gift/Awards/Memorials Expen I Committee Legal Services	ATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Salaries/Wages/Contract Labor explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
	Sch: 26/42 Rpt: 57/75	Craddick, Tom (The Honorable))	00020051			
4	TOTAL OF UNITEMI	ZED EXPENDITURES CHARGE	ED TO A CREDIT CARD	\$			
5	Date	6 Payee name					
L	03/08/2023	La Madeleine					
7	Amount (\$) \$124.77	8 Payee address; City; 701 S Capital Of Texas Hwy	State; Zip Code				
		West Lake Hills, TX 78746-524	3				
9	TYPE OF EXPENDITURE	X Political	Non-Political				
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check if trave	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense related meeting			
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held			
	Date 03/13/2023	Payee name La Madeleine					
	Amount (\$) \$88.33	Payee address; City; 701 S Capital Of Texas Hwy	State; Zip Code				
		West Lake Hills, TX 78746-524	3				
	TYPE OF EXPENDITURE	X Political	Non-Political				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check if trave	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense related meeting			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held			

	EXPENDITUR	ES MADE BY CREDIT	CARD	SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expe al Committee Legal Services	ATEGORIES FOR BOX 10(a) Loan Repayment/Reimburs Office Overhead/Rental Exp Polling Expense nse Printing Expense Salaries/Wages/Contract La explains how to complete this fo	Transportation Equipment & Related Expense Travel in District Travel Out of District Abor OTHER (enter a category not listed above)
L	Total pages Schedule F4: Sch: 27/42 Rpt: 58/75	2 FILER NAME Craddick, Tom (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	ED TO A CREDIT CARD	\$
5	Date 03/23/2023	6 Payee name La Madeleine		
7	Amount (\$) \$86.31	 8 Payee address; City; 701 S Capital Of Texas Hwy West Lake Hills, TX 78746-524 	State; Zip Code	
9	TYPE OF EXPENDITURE	X Political	Non-Political	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense		on if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense tive related meeting
11	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
	Date 03/01/2023	Payee name Newks Eatery		
	Amount (\$) \$103.25	Payee address; City; 9722 Great Hills Trl Ste 130 Austin, TX 78759-7264	State; Zip Code	
	TYPE OF EXPENDITURE	X Political	Non-Political	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense		on if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense tive related meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

	EXPENDITUR	ES MADE BY CREDIT	T CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Exp al Committee Legal Services	Office Overhead Polling Expense	/Reimbursement Rental Expense Contract Labor //Reimbursement Rental Expense Travel in District Travel Out of Dis OTHER (enter a	quipment & Related Expense
L	Total pages Schedule F4: Sch: 28/42 Rpt: 59/75	2 FILER NAME Craddick, Tom (The Honorabl	le)	3 Filer ID 00020051	(Ethics Commission Filers)
4	TOTAL OF UNITEMI	ZED EXPENDITURES CHARC	GED TO A CREDIT	CARD \$	
	Date 03/14/2023	6 Payee name Panera Bread			
7	Amount (\$) \$221.40	 8 Payee address; City; 9901 N Capital Of Texas Hwy Austin, TX 78759-5852 	State; Zip Code		
9	TYPE OF EXPENDITURE	X Political	Non-Political		
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Food/Beverage Expense		Description Check if travel outside of Texas. Comp Check if Austin, TX, officeholder living Legislative related meeting	
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office he	ld
	Date 03/27/2023	Payee name Panera Bread			
	Amount (\$) \$102.94	Payee address; City; 9901 N Capital Of Texas Hwy Austin, TX 78759-5852	State; Zip Code ,		
	TYPE OF EXPENDITURE	X Political	Non-Political		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Food/Beverage Expense		Description Check if travel outside of Texas. Comp Check if Austin, TX, officeholder living Legislative related meeting	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office he	ld

EXPENDITUR	ES MADE BY CREDIT	T CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Poli	Event Expense Fees Food/Beverage Expense By - Gift/Awards/Memorials Exp ical Committee Legal Services	CATEGORIES FOR BOX 10(a Loan Repayment/Reimbu Office Overhead/Rental E Polling Expense Printing Expense Salaries/Wages/Contract e explains how to complete this t	rsement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Labor OTHER (enter a category not listed above)
1 Total pages Schedule F ² Sch: 29/42 Rpt: 60/75		le)	3 Filer ID (Ethics Commission Filers) 00020051
⁴ TOTAL OF UNITEM	IIZED EXPENDITURES CHARC	GED TO A CREDIT CAR	D \$
5 Date 04/11/2023	6 Payee name Roaring Fork		
7 Amount (\$) \$82.78	8 Payee address; City; 701 Congress Ave Austin, TX 78701-3216	State; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Food/Beverage Expense	Che	tion ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense ative related meeting
11 Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate/Officeholder name OH	Office sought	Office held
Date 01/09/2023	Payee name SPB Parking Meters		
Amount (\$) \$45.0(State; Zip Code	
TYPE OF EXPENDITURE	Austin, TX 78701	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Office Overhead/Rental Expen	nse	tion ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense parking
Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate/Officeholder name OH	Office sought	Office held

	EXPENDITURE	ES MADE BY CRE	DIT CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Exp Gift/Awards/Memoria I Committee Legal Services	ense Office Overhea Polling Expense Printing Expense	nt/Reimbursement Soli d/Rental Expense Trai e Traise Traise Traise se Traise Traise Traise	citation/Fundraising Expense isportation Equipment & Related Expense rel in District rel Out of District IER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 30/42 Rpt: 61/75	2 FILER NAME Craddick, Tom (The Hono	prable)		r ID (Ethics Commission Filers)
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CH	ARGED TO A CREDIT	CARD \$	
5	Date 05/22/2023	6 Payee name Salt Traders Coastal Coo	king	·	
7	Amount (\$) \$157.45	 8 Payee address; City; 1101 S Mo-Pac Expy Austin, TX 78746 	State; Zip Code		
9	TYPE OF EXPENDITURE	X Political	Non-Politica		
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed a Food/Beverage Expense	at the top of this schedule) (b)	Description Check if travel outside of Check if Austin, TX, office Legislative related r	
11	. Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought		Office held
Γ	Date 02/09/2023	Payee name Spectrum			
	Amount (\$) \$361.44	Payee address; City; PO Box 503478 Saint Louis, MO 63150-00	State; Zip Code		
╞	TYPE OF EXPENDITURE	X Political	Non-Politica		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed a Office Overhead/Rental E		X Check if Austin, TX, office	Texas. Complete Schedule T. cholder living expense • office holder Austin living
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought		Office held

EXPENDITUR	ES MADE BY CREDIT	CARD		SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repaym Office Overhe Polling Expensions Ise Printing Expensions Salaries/Wage	ent/Reimbursement ad/Rental Expense se ise es/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 31/42 Rpt: 62/75	2 FILER NAME Craddick, Tom (The Honorable)			3 Filer ID (Ethics Commission Filers) 00020051
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARGE	D TO A CREDI	T CARD	\$
5 Date 03/13/2023	6 Payee name Spectrum			
7 Amount (\$) \$163.61	8 Payee address; City; PO Box 503478 Saint Louis, MO 63150-0001	State; Zip Code		
9 TYPE OF EXPENDITURE	X Political	Non-Politica	ıl	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens		X Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ions for office holder Austin living
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought		Office held
Date 04/20/2023	Payee name Spectrum			
Amount (\$) \$163.61	Payee address; City; PO Box 503478 Saint Louis, MO 63150-0001	State; Zip Code		
TYPE OF EXPENDITURE	X Political	Non-Politica	l	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens		X Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ions for office holder Austin living
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought		Office held

EXPENDITURI	ES MADE BY CREDIT	CARD		SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica		Loan Repayn Office Overhe Polling Exper Ise Printing Expe Salaries/Wag	nent/Reimbursement ad/Rental Expense ise nse es/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 32/42 Rpt: 63/75	2 FILER NAME Craddick, Tom (The Honorable)			3 Filer ID (Ethics Commission Filers) 00020051
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARGE	ED TO A CRED	T CARD	\$
5 Date 05/04/2023	6 Payee name Spectrum			
7 Amount (\$) \$163.61	8 Payee address; City; PO Box 503478 Saint Louis, MO 63150-0001	State; Zip Code		
9 TYPE OF EXPENDITURE	X Political	Non-Politic	al	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens		X Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ions for office holder Austin living
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	t	Office held
Date 06/06/2023	Payee name Spectrum			
Amount (\$) \$163.61	Payee address; City; PO Box 503478	State; Zip Code		
TYPE OF EXPENDITURE	Saint Louis, MO 63150-0001	Non-Politic	al	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens		X Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ions for office holder Austin living
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	t	Office held

	EXPENDITUR	ES MADE BY CREDIT	T CARD	SCHEDULE F4
⊢				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense / - Gift/Awards/Memorials Exp d Committee Legal Services	CATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor e explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 33/42 Rpt: 64/75	Craddick, Tom (The Honorabl	le)	00020051
4		ZED EXPENDITURES CHARC	GED TO A CREDIT CARD	\$
5	Date	6 Payee name		
L	02/07/2023	Taco Deli		
7	Amount (\$)	8 Payee address; City;	State; Zip Code	
	\$76.89	301 Congress Ave		
		Austin, TX 78701-2905		
9	TYPE OF EXPENDITURE	X Political	Non-Political	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Food/Beverage Expense	Check if trave	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense elated meeting
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
	Date 02/07/2023	Payee name Target		
	Amount (\$) \$227.96	Payee address; City; 5621 N Ih 35	State; Zip Code	
		Austin, TX 78723-2431		
	TYPE OF EXPENDITURE	X Political	Non-Political	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Office Overhead/Rental Exper	nse Check if trave	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense İES
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

E	XPENDITUR	ES MADE	BY CREDI	T CAR	2D			SCHEDULE	F4
Ac Co	Vertising Expense counting/Banking nsulting Expense ntributions/ Donations Made B Candidate/Officeholder/Politica		EXPENDITURE Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guid	pense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor	Transpor Travel in Travel O	on/Fundraising Expense tation Equipment & Related Expe District ut of District 'enter a category not listed above	
Sc	al pages Schedule F4: h: 34/42 Rpt: 65/75		E Tom (The Honorabl	le)			3 Filer ID 00020		ı Filers)
⁴ тс	TAL OF UNITEMI	ZED EXPENI	DITURES CHARG	GED TO	A CREI	DIT CARD	\$		
	/06/2023	6 Payee name Terrazas, 0	George						
7 Am	ount (\$) \$481.25	8 Payee addre 6509 Melro Austin, TX		State;	Zip Co	le			
9 EX	TYPE OF (PENDITURE	X	Political		Non-Polit	cal			
10 E)	PURPOSE OF KPENDITURE	(a) Category (a) Travel Out	See Categories listed at the t of District	top of this sch	edule)		tin, TX, officehold		
	mplete <u>ONLY</u> if direct benditure to benefit C/O		ficeholder name	C)ffice sou	Jht	Of	ice held	
Dat 02/	ie /16/2023	Payee name Texas Mor							
Am	ount (\$) \$70.85	Payee addr PO Box 15	669	State;	Zip Coo	le			
E)	TYPE OF (PENDITURE	Austin, TX	78767-1569 Political		Non-Polit	ical			
	PURPOSE OF (PENDITURE		See Categories listed at the t rhead/Rental Expe		edule)		tin, TX, officehold	s. Complete Schedule T. er living expense	
	mplete <u>ONLY</u> if direct penditure to benefit C/O		ficeholder name	C)ffice sou	ıht	Of	ïce held	

	EXPENDITURE	ES MADE BY CREDIT CARD	SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	EXPENDITURE CATEGORIES FOR BOX 10(a) Event Expense Loan Repayment/Reimburs Fees Office Overhead/Rental Exp Food/Beverage Expense Polling Expense I Committee Legal Services Salaries/Wages/Contract Li The Instruction Guide explains how to complete this fo	sement Solicitation/Fundraising Expense pense Transportation Equipment & Related Expense Travel in District Travel Out of District abor OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 35/42 Rpt: 66/75	2 FILER NAME Craddick, Tom (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
	Date 01/27/2023	6 Payee name Texas State History Museum	· ·
7	Amount (\$) \$279.00	8 Payee address; City; State; Zip Code 1800 Congress Ave Austin, TX 78701-1342	
9	TYPE OF EXPENDITURE	X Political Non-Political	
10) PURPOSE OF EXPENDITURE		ion k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense tuent services
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 01/03/2023	Payee name The Boulevard At Town Lake	
	Amount (\$) \$4,379.75	Payee address; City; State; Zip Code 2600 Lake Austin Blvd Austin, TX 78703-4427	
\vdash	TYPE OF EXPENDITURE	X Political Non-Political	
	PURPOSE OF EXPENDITURE		ion k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense or Office Holder Austin Living Expenses
F	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repa Office Ove Polling Ex nse Printing E Salaries/M	ayment/Reimbursement rrhead/Rental Expense pense xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 36/42 Rpt: 67/75	2 FILER NAME Craddick, Tom (The Honorable))		3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	ED TO A CRE	DIT CARD	\$
5	Date 02/03/2023	6 Payee name The Boulevard At Town Lake			
7	Amount (\$) \$4,152.87	 8 Payee address; City; 2600 Lake Austin Blvd Austin, TX 78703-4427 	State; Zip Co	de	
9	TYPE OF EXPENDITURE	X Political	Non-Poli	tical	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens		X Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense Ce Holder Austin Living Expenses
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	L Candidate/Officeholder name H	Office sou	ght	Office held
F	Date 03/01/2023	Payee name The Boulevard At Town Lake			
	Amount (\$) \$4,180.99	Payee address; City; 2600 Lake Austin Blvd Austin, TX 78703-4427	State; Zip Co	de	
┢	TYPE OF EXPENDITURE	X Political	Non-Poli	tical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens		X Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense Ce Holder Austin Living Expenses
F	Complete <u>ONLY</u> if direct expenditure to benefit C/O	L Candidate/Officeholder name H	Office sou	ght	Office held

	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Rep Office Ove Polling Ex nse Printing E Salaries/M	ayment/Reimbursement brhead/Rental Expense pense xpense /ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 37/42 Rpt: 68/75	2 FILER NAME Craddick, Tom (The Honorable))		3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	ED TO A CRE	DIT CARD	\$
	Date 04/03/2023	6 Payee name The Boulevard At Town Lake			
7	Amount (\$) \$4,201.95	 8 Payee address; City; 2600 Lake Austin Blvd Austin, TX 78703-4427 	State; Zip Co	de	
9	TYPE OF EXPENDITURE	X Political	Non-Poli	tical	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens		X Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense Ce Holder Austin Living Expenses
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sou	ght	Office held
	Date 05/04/2023	Payee name The Boulevard At Town Lake			
	Amount (\$) \$4,204.83	Payee address; City; 2600 Lake Austin Blvd Austin, TX 78703-4427	State; Zip Co	de	
\vdash	TYPE OF EXPENDITURE	X Political	Non-Poli	tical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens		X Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense Ce Holder Austin Living Expenses
F	Complete <u>ONLY</u> if direct expenditure to benefit C/O	L Candidate/Officeholder name H	Office sou	ght	Office held

	EXPENDITUR	ES MADE BY CREDIT	r card		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Exp	Office O Polling E pense Printing Salaries/	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Fotal pages Schedule F4: Sch: 38/42 Rpt: 69/75	2 FILER NAME Craddick, Tom (The Honorable	e)		3 Filer ID (Ethics Commission Filers) 00020051
4 _	TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	GED TO A CRE	EDIT CARD	\$
	Date 06/06/2023	6 Payee name The Boulevard At Town Lake			
7 /	Amount (\$) \$4,594.01	8 Payee address; City; 2600 Lake Austin Blvd Austin, TX 78703-4427	State; Zip C	ode	
9	TYPE OF EXPENDITURE	X Political	Non-Po	litical	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Office Overhead/Rental Exper		X Check if Austi	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense ce Holder Austin Living Expenses
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	ught	Office held
	Date 02/23/2023	Payee name The Soup Pedler			
/	Amount (\$) \$31.73	Payee address; City; 2801 S Lamar Blvd	State; Zip C	ode	
	TYPE OF EXPENDITURE	Austin, TX 78704-4716	Non-Po	litical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Food/Beverage Expense	op of this schedule)	Check if Austi	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense elated meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	ught	Office held

	EXPENDITUR	ES MADE BY CREDIT	CARD	SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Expe al Committee Legal Services	ATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Total pages Schedule F4: Sch: 39/42 Rpt: 70/75	2 FILER NAME Craddick, Tom (The Honorable	:)	3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	ED TO A CREDIT CARD	\$
5	Date 05/23/2023	6 Payee name Uber Eats		
7	Amount (\$) \$105.62	 8 Payee address; City; 1455 Market St Fl 4 San Francisco, CA 94103-1355 	State; Zip Code	
9	TYPE OF EXPENDITURE	X Political	Non-Political	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check if travel	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense elated meeting
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
	Date 05/23/2023	Payee name Uber Eats		
	Amount (\$) \$13.73	Payee address; City; 1455 Market St Fl 4	State; Zip Code	
╞	TYPE OF	San Francisco, CA 94103-1355	5 Non-Political	
	EXPENDITURE PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	p of this schedule) (b) Description Check if travel Check if Austin	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense elated meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

	EXPENDITUR	ES MADE BY CREDIT	CARD	SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Expe al Committee Legal Services	ATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Total pages Schedule F4: Sch: 40/42 Rpt: 71/75	2 FILER NAME Craddick, Tom (The Honorable	:)	3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	ED TO A CREDIT CARD	\$
5	Date 05/24/2023	6 Payee name Uber Eats		
7	Amount (\$) \$175.55	 8 Payee address; City; 1455 Market St Fl 4 San Francisco, CA 94103-1355 	State; Zip Code	
9	TYPE OF EXPENDITURE	X Political	Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check if trave	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense elated meeting
11	Complete <u>ONLY</u> if direct expenditure to benefit C/O	L Candidate/Officeholder name H	Office sought	Office held
	Date 05/24/2023	Payee name Uber Eats		
	Amount (\$) \$17.55	Payee address; City; 1455 Market St Fl 4	State; Zip Code	
	TYPE OF	San Francisco, CA 94103-1355		
	EXPENDITURE	X Political	Non-Political	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check if trave	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense related meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

	EXPENDITURE	ES MADE BY CREDIT	CARD	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 I Committee Legal Services	ATEGORIES FOR BOX 10(a) Loan Repayment/Reimbur Office Overhead/Rental Exp Polling Expense Printing Expense Salaries/Wages/Contract I explains how to complete this for	sement Solicitation/Fundraising Expense ransportation Equipment & Related Expense Travel in District Travel Out of District abor OTHER (enter a category not listed above)
L	Total pages Schedule F4: Sch: 41/42 Rpt: 72/75	2 FILER NAME Craddick, Tom (The Honorable))	3 Filer ID (Ethics Commission Filers) 00020051
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	ED TO A CREDIT CARI	\$
L	Date 06/18/2023	6 Payee name Uber		
7	Amount (\$) \$17.55	 8 Payee address; City; 1455 Market St Ste 4 San Francisco, CA 94103-1332 	State; Zip Code	
9	TYPE OF EXPENDITURE	X Political	Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Transportation Equipment & Re Expense		ion k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense to airport
11	. Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
	Date 05/06/2023	Payee name Vistaprint		
	Amount (\$) \$40.05	Payee address; City; 275 Wyman St	State; Zip Code	
		Waltham, MA 02451-1200		
	TYPE OF EXPENDITURE	X Political	Non-Political	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Printing Expense		ion k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense reporduction
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held

EXPENDITURI	SCHEDULE F4					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	y - al Committee	EXPENDITURE CA Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide ex	Loan Rep Office Ov Polling E Se Printing E Salaries/	ayment/Reimbursement erhead/Rental Expense kpense xpense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1 Total pages Schedule F4: Sch: 42/42 Rpt: 73/75		IE Tom (The Honorable)			3 Filer ID (Ethics Commission Filers) 00020051	
⁴ TOTAL OF UNITEMI	\$					
5 Date 01/04/2023	6 Payee nam Walmart.c					
7 Amount (\$) \$570.37	8 Payee address; City; State; Zip Code 702 Sw 8Th St					
9 TYPE OF	Bentonville	e, AR 72712-6209 Political	Non-Pol	itical		
EXPENDITURE 10 PURPOSE OF EXPENDITURE	(a) Category	See Categories listed at the top or rhead/Rental Expense			l outside of Texas. Complete Schedule T. in, TX, officeholder living expense ieS	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office sou	ught	Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G							
	ccounting/Banking Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense onsulting Expense Food/Bevrage Expense Polling Expense Travel in District ontributions/ Donations Made By - Gitt/Awards/Memorials Expense Printing Expense Travel of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)						
1 Total pages Schedule G: Sch: 1/2 Rpt: 74/75	2 FILER NAME 3 Filer ID (Ethics Commission Fi Craddick, Tom (The Honorable) 00020051						
4 Date 01/26/2023	5 Payee name AT&T Mobility						
6 Amount (\$) \$81.87 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 650574 Dallas, TX 75265-0574						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Telecommunications		heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense				
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Complete Only if direct Office held							
Date 02/16/2023	Payee name AT&T Mobility						
Amount (\$) \$81.69 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 650574 Dallas, TX 75265-0574						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Telecommunications	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Telephone service					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH C/OH C/OH C/OH C/OH							
Date 03/22/2023	Payee name AT&T Mobility						
Amount (\$) \$81.62	Payee address; City; State; Zip Code PO Box 650574						
X Reimbursement from political contributions intended	Dallas, TX 75265-0574						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Telecommunications		heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH							

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G							
	ccounting/Banking Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense onsulting Expense Food/Beverage Expense Polling Expense Travel in District ontributions/ Donations Made By - Gift/Awards/Memorials Expense Printing Expense Travel of District candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)						
1 Total pages Schedule G: Sch: 2/2 Rpt: 75/75	2 FILER NAME 3 Filer ID (Ethics Commission File Craddick, Tom (The Honorable) 00020051						
4 Date 04/25/2023	5 Payee name AT&T Mobility						
6 Amount (\$) \$81.62 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 650574 Dallas, TX 75265-0574						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Telecommunications	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office held							
Date 05/24/2023	Payee name AT&T Mobility						
Amount (\$) \$81.62 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 650574 Dallas, TX 75265-0574						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Telecommunications	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Telephone service					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office held Office held							
Date 06/30/2023	Payee name AT&T Mobility						
Amount (\$) \$81.62	Payee address; City; State; Zip Code PO Box 650574						
X Reimbursement from political contributions intended	Dallas, TX 75265-0574						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Telecommunications	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH							