# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commi 00082156		2 Total pages filed: 71	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ON	NLY
OFFICEHOLDER NAME	The Honorable	Cody J.			Date Received	
10 101					ELECTRONICALLY FIL	ED
					07/17/2023	LLD
	NICKNAME	LAST		SUFFIX	07/11/2023	
		Harris				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postn	narked
OFFICEHOLDER MAILING	1007 N. Mallard St.					
ADDRESS					Receipt # Amount	
Change of Address	Palestine, TX 75801					
LJ	Talestine, 177 10001				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	<u> </u>	
TREASURER	Ms.	Patricia		IVII		
NAME	IVIS.	Patricia				
	NICKNAME	LAST		SUFFIX		
	"Pat"	Redding				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO	BOX PLEASE);	AP	T / SUITE #; CITY	; STATE;	ZIP CODE
ADDRESS	312 Glenwood Dr.					
(Residence or Business)						
,	Palestine, TX 75801					
Z CAMBAION	4DE4 00DE - DUO	IE NII IMBED - E	VTENICIONI			
7 CAMPAIGN TREASURER		IE NUMBER E	EXTENSION			
PHONE	(214) 535-6615					
8 REPORT						
TYPE	January 15	30th day before	election	Runoff	15th day after campaign trea	asurer
	L Canada L		. о.оодо <u>П</u>	L	appointment (officeholder or	
	X July 15	8th day before 6	election	Exceeded modified	Final Report (Attach C/OH-F	FR)
				reporting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2023	TH	IROUGH	06/30/202	23	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	rimary	Runoff	Other	
		│ □G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGH	T (if known)	
11 011102	State Representative Distr	rict 8		12 011102 000011	(II Kilowii)	
	Ctate i topi dedittati e 2 ioti					
		GO T	O PAGE 2			

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 71

13 C / OH NAME	Harris, Cody J. (The	Honorable)	<b>14</b> Filer ID ( 00082156	Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.						
Additional Pages	COMMITTEE TYPE   COMMITTEE NAME						
	X GENERAL	Texans for Opportunity & Prosperity PAC					
		COMMITTEE ADDRESS					
	SPECIFIC	1108 Lavaca, Ste 110-265					
		Austin, TX 78701					
		COMMITTEE CAMPAIGN TREASURER NAME					
		Gantt, Charles					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
		1108 Lavaca, Ste 110-265					
		Austin, TX 78701					
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00			
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 500.00			
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		<b>\$</b> 1,418.14			
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 112,748.22			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	<b>\$</b> 211,987.79			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00			
<b>17</b> AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.					
		The Hono	orable Cody J. Harris	S			
		Signature of	Candidate or Officehole	der			
AFFIX NO	TARY STAMP / SEAL AB	DVE					
Sworn to and subs	cribed before me, by the s	aid	, this the	day			
of	, 20, to co	ertify which, witness my hand and seal of office.					
Signature of officers	cer administering	Printed name of officer administering	Title of officer	administering oath			
g 01 01111		g	1.23 01 0111001	9 5441			

### **SUBTOTALS - C/OH**

## FORM C/OH COVER SHEET PG 3

			C	OVEF	R SHEET PG 3 3 of 71
18 FILE			19 Filer ID	(Ethics	s Commission Filers)
		ndy J. (The Honorable)	00082156		
		E SUBTOTALS SCHEDULE		S	SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	500.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	112,748.22
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	7. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS				50,000.00
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	TARY POLITICAL CONTRIBUTION	NS	5		SCHEDULE A1
	The Instru	action Guide explains how to complete this	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/71		
2	FILER NAME Harris, Cody	y J. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00082156
4	Date 06/29/2023	Date 5 Full name of contributor out-of-state PAC (ID#:)			7	Amount of Contribution (\$) \$500.00
		Austin, TX 78701				
8	Principal occu Consultant	upation / Job title (See Instructions)		imployer (See Instructions Self employed	)	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Credit Card Payment	The Instruction Guide explains how to com	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 1/66 Rpt: 5/71	Harris, Cody J. (The Honorable)		00082156
4	Date	5 Payee name		·
	01/17/2023	AT&T		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	de	
	\$122.73	PO Box 536216		
		Atlanta, GA 30353		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Campaign cell phone service
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/O			
	Date	Payee name		
	02/14/2023	AT&T		
	Amount (\$)	Payee address; City; State; Zip Cod	de	
	\$122.82	PO Box 536216		
		Atlanta, GA 30353		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE			Campaign cell phone service
				Campaign cen phone service
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/O		•	
	Date	Payee name		
	03/14/2023	AT&T		
	Amount (\$)	Payee address; City; State; Zip Cod	de	
	\$122.58	PO Box 536216		
		Atlanta, GA 30353		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	·		Check if Austin, TX, officeholder living expense
				Campaign cell phone service
	Complete ONLY if dies -t	Condidate/Officeholder name	•b±	Office hald
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office soug	ınt	Office held

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Credit Card Payment	The Instruction Guide explains how to comple	te this form.
1	Total pages Schedule F1: Sch: 2/66 Rpt: 6/71	FILER NAME     Harris, Cody J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00082156
4	Date 04/14/2023	5 Payee name AT&T	
6	Amount (\$) \$122.58	7 Payee address; City; State; Zip Code PO Box 536216	
		Atlanta, GA 30353	
8	PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign cell phone service
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 05/15/2023	Payee name AT&T	
	Amount (\$) \$122.50	Payee address; City; State; Zip Code PO Box 536216	
		Atlanta, GA 30353	
	PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign cell phone service
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 06/14/2023	Payee name AT&T	
	Amount (\$) \$122.50	Payee address; City; State; Zip Code PO Box 536216	
		Atlanta, GA 30353	
	PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign cell phone service
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/66 Rpt: 7/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	01/26/2023	Adobe
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$59.53	151 S Almaden Blvd
		San Jose, CA 95113
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign software subscription
		Campaigh software subscription
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	02/27/2023	Adobe
	Amount (\$)	Payee address; City; State; Zip Code
	\$59.53	151 S Almaden Blvd
		San Jose, CA 95113
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign software subscription
		Campaign solivare substription
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	03/28/2023	Adobe
	Amount (\$)	Payee address; City; State; Zip Code
	\$59.53	151 S Almaden Blvd
		San Jose, CA 95113
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Campaign software subscription
	Complete ONII V if allows:	Condidate/Officeholder name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/66 Rpt: 8/71	Harris, Cody J. (The Honorable) 00082156
4 Date	5 Payee name
04/26/2023	Adobe
6 Amount (\$) \$59.53	7 Payee address; City; State; Zip Code 151 S Almaden Blvd San Jose, CA 95113
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign software subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
05/26/2023	Adobe
Amount (\$) \$59.53	Payee address; City; State; Zip Code 151 S Almaden Blvd
	San Jose, CA 95113
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign software subscription
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
06/26/2023	Adobe
Amount (\$) \$59.53	Payee address; City; State; Zip Code 151 S Almaden Blvd
	San Jose, CA 95113
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign software subscription
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/66 Rpt: 9/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	02/15/2023	Alonti Cafe & Catering
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$736.79	701 S Lamar Blvd Ste B
		Austin, TX 78704
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Constituent Group Lunch
		Constituent Group Eurich
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
⊨	Date	Payee name
	03/15/2023	Alonti Cafe & Catering
L		-
	Amount (\$)	Payee address; City; State; Zip Code
	\$757.67	701 S Lamar Blvd Ste B
L		Austin, TX 78704
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Constituent Group Lunch
		Constituent Group Euron
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	04/19/2023	Alonti Cafe & Catering
L	Amount (\$)	Payee address; City; State; Zip Code
	\$806.62	701 S Lamar Blvd Ste B
	\$800.02	701 S Lamai Bivu Ste B
		A
		Austin, TX 78704
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Constituent Group Lunch
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ense Event Expense Loan Repayment/Reimbu

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 6/66 Rpt: 10/71	Harris, Cody J. (The Honorable) 00082156
4 Date	5 Payee name
04/01/2023	Anderson County Blankets and Bears
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,300.00	701 E Lacy St
	Palestine, TX 75801
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Donation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/O	
Date	Payee name
04/01/2023	Anderson County Blankets and Bears
Amount (\$)	Payee address; City; State; Zip Code
\$150.00	701 E Lacy St
	Palestine, TX 75801
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/06/2023	Anderson County Buyer's Club
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	750 US 287
	Palestine, TX 75803
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LA LIBITORE	Candidate/Officeholder/Political Committee
	Donation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	• • • • • • • • • • • • • • • • • • •
,	

#### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Total name - Oct - 1 1 E1	
1	Total pages Schedule F1: Sch: 7/66 Rpt: 11/71	2 FILER NAME Harris, Cody J. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00082156
4	Date	5 Payee name
	03/09/2023	Anderson County Youth Livestock Assoc (ACYLA)
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 750 N US Hwy 287
		Palestine, TX 75803
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/20/2023	Anderson County Youth Livestock Assoc (ACYLA)
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	750 N US Hwy 287
		Palestine, TX 75803
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation
		Bonadon
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/23/2023	Atchley & Associates LLP
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,714.54	1005 La Posada Dr
		Austin, TX 78752
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign accounting and reporting services
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Leaal Services Salaries/Waacs/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/66 Rpt: 12/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	02/17/2023	Athens Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$275.00	201 W. Corsicana St Ste 1
		Athens, TX 75751
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Dues Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Membership dues
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/02/2023	Austin Land & Cattle
H	Amount (\$)	Payee address; City; State; Zip Code
	\$318.72	1205 N Lamar
	40202	
		Austin, TX 78703
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Dinner with Constituents
		Sillioi Will Collection
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
H		
	Date	Payee name
	01/24/2023	Carlson, Jeff
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1100 Terrier Cove
		Round Rock, TX 78664
$\vdash$	PURPOSE	
	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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign contract labor
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
I	expenditure to benefit C/O	<del>1</del>
H		
Ī		

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/66 Rpt: 13/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	02/14/2023	Carlson, Jeff
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1100 Terrier Cove
		Round Rock, TX 78664
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  Campaign contract labor
		Campaign contract labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/01/2023	Carlson, Jeff
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1100 Terrier Cove
		Round Rock, TX 78664
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign contract labor
		Campaign contract ason
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	04/03/2023	Carlson, Jeff
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	1100 Terrier Cove
		Round Rock, TX 78664
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign contract labor
		Campaign contract ason
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/66 Rpt: 14/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	04/03/2023	Carlson, Jeff
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$600.00	1100 Terrier Cove
		Round Rock, TX 78664
8	PURPOSE	
ľ	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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign contract labor
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitire to beliefit C/OI	
	Date	Payee name
	04/24/2023	Carlson, Jeff
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	1100 Terrier Cove
		Round Rock, TX 78664
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	LAFLINDITORE	Check if Austin, TX, officeholder living expense
		Campaign contract labor
	Computate ONLY if disport	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	
L		
	Date	Payee name
	05/26/2023	Carlson, Jeff
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	1100 Terrier Cove
		Round Rock, TX 78664
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign contract labor
		Campaign contraction
		l l
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
		<b>o</b>
		<b>o</b>

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
l	Sch: 11/66 Rpt: 15/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
l	06/01/2023	Carlson, Jeff
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$500.00	1100 Terrier Cove
l		
		Round Rock, TX 78664
8	PURPOSE	
ľ	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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign contract labor
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experientare to benefit 6/61	
	Date	Payee name
	06/21/2023	Carlson, Jeff
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$343.27	1100 Terrier Cove
		Round Rock, TX 78664
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  Campaign contract labor
		Campaign contract labor
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
l	expenditure to benefit C/O	
H	Date	Davisa nama
l	06/27/2023	Payee name Carlson, Jeff
┝		
l	Amount (\$) \$500.00	Payee address; City; State; Zip Code 1100 Terrier Cove
l	Ψ300.00	1100 Tellier Cove
l		Dound Dook, TV 70664
L		Round Rock, TX 78664
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign contract labor
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г		
ı		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
-	Sch: 12/66 Rpt: 16/71	Harris, Cody J. (The Honorable)  00082156
4	Date	5 Payee name
	06/12/2023	Cavalry Court
6	Amount (\$) \$268.12	<ul><li>7 Payee address; City; State; Zip Code</li><li>200l Century Ct</li></ul>
		College Station, TX 77840
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Lodging for Legislative Meeting
		Lodging for Logiolative Meeting
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/15/2023	Cherokee County Republicans
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	PO Box 23
		Jacksonville, TX 75766
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Donation
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/01/2023	Cherokeean Herald
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	PO Box 348
		Rusk, TX 75785
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
TTHER (order a cotogony pet listed above)

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/66 Rpt: 17/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	02/08/2023	Cherokeean Herald
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$441.00	PO Box 348
		Rusk, TX 75785
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign advertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	04/11/2023	Clayton Sangler Photograhic Design
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	301 12th St
		Dunbar, WV 25064
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign photography services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/07/2023	Coover, Tyler
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	715 Graham Pl
		Austin, TX 78705
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
		Campaign contract labor
		Sampaigh sontast labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

Solicitation/Fundraising Expense

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Transportation Equipment & Related Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 14/66 Rpt: 18/71 Harris, Cody J. (The Honorable) 00082156 4 Date Payee name 03/06/2023 Coover, Tyler 6 Amount (\$) Payee address; City; State; Zip Code \$200.00 715 Graham Pl Austin, TX 78705 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign contract labor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/03/2023 Coover, Tyler Amount (\$) Payee address; City; State; Zip Code \$200.00 715 Graham Pl Austin, TX 78705 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign contract labor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/01/2023 Coover, Tyler Amount (\$) Payee address: City: State; Zip Code \$200.00 715 Graham Pl Austin, TX 78705 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign contract labor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE F1

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

Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contra  The Instruction Guide explains how to complete thi	· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 15/66 Rpt: 19/71	Harris, Cody J. (The Honorable)	00082156
4	Date	5 Payee name	
	05/26/2023	Coover, Tyler	
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 715 Graham Pl Austin, TX 78705	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	cription
	OF EXPENDITURE	Salaries/Wages/Contract Labor	heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense npaign contract labor
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	06/05/2023	Coover, Tyler	
	Amount (\$) \$200.00	Payee address; City; State; Zip Code 715 Graham Pl	
		Austin, TX 78705	
	PURPOSE OF EXPENDITURE	Salaries/Wages/Somilater Easter	cription heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense npaign contract labor
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/03/2023	Copper Safe Storage	
	Amount (\$) \$82.00	Payee address; City; State; Zip Code 2003 Crockett Rd	
		Palestine, TX 75801	
	PURPOSE OF EXPENDITURE		cription heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense npaign storage building rent
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica			Legal Services		Salaries/W		e /Contract Labor		OTHER (enter a	category not listed abo	ove)
	Credit Card Payment			The Instruction G	uide explains ho	w to con	nple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commissi	on Filers)
	Sch: 16/66 Rpt: 20/71		Harris, Cody	J. (The Hono	rable)					00082156		
4	Date	5	Payee name									
	02/03/2023		Copper Safe	e Storage								
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Cod	de					
	\$82.00		2003 Crocke									
			Palestine, T	X 75801								
8	PURPOSE	(a)				[	(h)	Description				
ľ	OF	(")		e Categories listed at nead/Rental Ex		ule)	(12)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		011100 01011	ioda/i toritai E/	.porioo			Check if Austin,	, TX,	officeholder living	g expense	
								Campaign sto	ora	ge building ı	rent	
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name	Off	ice soug	ght			Office he	eld	
	experioritire to beriefit C/Or											
	Date		Payee name									
	03/03/2023		Copper Safe	e Storage								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Cod	de					
	\$82.00		2003 Crocke	ett Rd								
			Palestine, T	X 75801								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sched	ule)	(b)	Description				
	OF EXPENDITURE			nead/Rental Ex		,		<b>=</b>			plete Schedule T.	
	LXI LINDITORE							<b>—</b>		officeholder living		
								Campaign sto	Jia	ge bullaling i	ent	
	Complete ONL V if direct	<u> </u>	Candidate/Offic	oholder name	Off	ice soug	nht.			Office he	ald	
	Complete ONLY if direct expenditure to benefit C/O		Januluale/Onic	enoluei name	Oii	ice souç	JIIL			Office fi	eiu	
_		_										
	Date		Payee name	Ctorogo								
	04/03/2023		Copper Safe									
	Amount (\$)		Payee addres	-	State;	Zip Coo	de					
	\$82.00		2003 Crocke	ett Ka								
			Palestine, T	X 75801								
	PURPOSE OF	(a)		e Categories listed at		ule)	(b)	Description				
	EXPENDITURE		Office Overh	nead/Rental Ex	pense			ш		de of Texas. Com officeholder living	plete Schedule T.	
								Campaign sto				
								1 9 300	;	g		
$\vdash$	Complete ONLY if direct	Щ	Candidate/Offic	ceholder name	Off	ice soug	ght			Office he	eld	
	expenditure to benefit C/OI						-					
l												

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/66 Rpt: 21/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
L	05/03/2023	Copper Safe Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$82.00	2003 Crockett Rd
		Palestine, TX 75801
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign storage building rent
		Sampaign storage saliding tone
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
Г	Date	Payee name
	06/05/2023	Copper Safe Storage
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$82.00	2003 Crockett Rd
		Palestine, TX 75801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign storage building rent
		Sampaign storage saliding tone
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	01/11/2023	Doubletree Suites by Hilton
H	Amount (\$)	Payee address; City; State; Zip Code
	\$638.02	303 W 15th St
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Lodging for Legislative Meeting
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		

#### SCHEDULE F1

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/66 Rpt: 22/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	03/01/2023	Elkhart Youth Athletic Association
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$350.00	P.O. Box 725
		Elkhart, TX 75839
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/18/2023	Fixe Southern House
	Amount (\$)	Payee address; City; State; Zip Code
	\$211.45	500 W 5th St
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense  Dinner with Constituents
		Diffiel with Constituents
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>y</b>
	Date	Payee name
	05/26/2023	Fixe Southern House
	Amount (\$)	Payee address; City; State; Zip Code
	\$667.22	500 W 5th St
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Staff Dinner
	Complete ONLY if direct	Candidate/Officeholder name Office county Office hold
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/66 Rpt: 23/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	06/26/2023	French, Amy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$48.47	15 Anderson Drive
		Palestine, TX 75801
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Political mileage to attend meetings in the district
		(74mi*.655). Not reimbursed by state.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	01/02/2023	French, Amy
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	15 Anderson Drive
		Palestine, TX 75801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign contract labor
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	<del>1</del>
	Date	Payee name
	01/03/2023	French, Amy
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.54	15 Anderson Drive
		Palestine, TX 75801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	_	Check if Austin, TX, officeholder living expense Political mileage to attend meetings in the district
		(68mi*.655). Not reimbursed by state.
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
-	Total pages Cabadala E4	<u>_</u>
1	Total pages Schedule F1: Sch: 20/66 Rpt: 24/71	2 FILER NAME Harris, Cody J. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00082156
4	Date	5 Payee name
	01/11/2023	French, Amy
6	Amount (\$) \$234.49	7 Payee address; City; State; Zip Code 15 Anderson Drive  Palestine, TX 75801
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense Political mileage to attend meetings in the district (358mi*.655). Not reimbursed by state.
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/12/2023	French, Amy
	Amount (\$)	Payee address; City; State; Zip Code
	\$238.42	15 Anderson Drive
		Palestine, TX 75801
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Political mileage to attend meetings in the district (364mi*.655). Not reimbursed by state.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/25/2023	French, Amy
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.47	15 Anderson Drive
		Palestine, TX 75801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LAFLINDITURE	Check if Austin, TX, officeholder living expense
		Political mileage to attend meetings in the district (74mi*.655). Not reimbursed by state.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	·	

#### SCHEDULE F1

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

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

	Credit Card Payment	The Instruction Guide explains how to comp		· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 21/66 Rpt: 25/71	Harris, Cody J. (The Honorable)		00082156
4	Date	5 Payee name		•
	01/31/2023	French, Amy		
6	Amount (\$)	7 Payee address; City; State; Zip Code	)	
	\$41.92	15 Anderson Drive		
		Palestine, TX 75801		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	)	Description
	OF EXPENDITURE	Travel In District		Check if Austin TX officeholder living evenes
				Check if Austin, TX, officeholder living expense Political mileage to attend meetings in the district
				(64mi*.655). Not reimbursed by state.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	t	Office held
	expenditure to benefit C/OI	-1		
	Date	Payee name		
	02/01/2023	French, Amy		
	Amount (\$)	Payee address; City; State; Zip Code	;	
	\$200.00	15 Anderson Drive		
		Palestine, TX 75801		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor	į	Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE			Compaign contract labor
				Campaign contract labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought	ıt	Office held
	expenditure to benefit C/OI	•	-	
	Date	Payee name		
	02/17/2023	French, Amy		
	Amount (\$)	Payee address; City; State; Zip Code	<u>,</u>	
	\$44.54	15 Anderson Drive		
		Palestine, TX 75801		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	<u> </u>	Description
	OF EXPENDITURE	Travel In District	<i>.</i>	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE			Check if Austin, TX, officeholder living expense
				Political mileage to attend meetings in the district (68mi*.655). Not reimbursed by state.
	Complete ONLY if direct	Candidate/Officeholder name Office sough		Office held
	expenditure to benefit C/OI		L	Office field

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	ore)
1	Sch: 22/66 Rpt: 26/71	2 FILER NAME Harris, Cody J. (The Honorable) 3 Filer ID (Ethics Commission File 00082156	#15)
4	Date	5 Payee name	
	02/17/2023	French, Amy	
6	Amount (\$) \$230.56	7 Payee address; City; State; Zip Code 15 Anderson Drive Palestine, TX 75801	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Travel In District Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Political mileage to attend meetings in the district (352mi*.655). Not reimbursed by state.	t
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	02/28/2023	French, Amy	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$81.22	15 Anderson Drive	
		Palestine, TX 75801	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Political mileage to attend meetings in the district (124mi*.655). Not reimbursed by state.	,l
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	02/28/2023	French, Amy	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$231.87	15 Anderson Drive	
		Palestine, TX 75801	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
	LAFLINDITURE	Check if Austin, TX, officeholder living expense	
		Political mileage to attend meetings in the district	t
		(354mi*.655). Not reimbursed by state.	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
			ĺ

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 23/66 Rpt: 27/71	Harris, Cody J. (The Honorable)
4 Date	5 Payee name
03/01/2023	French, Amy
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 15 Anderson Drive Palestine, TX 75801
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign contract labor
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/02/2023	French, Amy
Amount (\$)	Payee address; City; State; Zip Code
\$231.87	15 Anderson Drive
	Palestine, TX 75801
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Political mileage to attend meetings in the district
	(354mi*.655). Not reimbursed by state.
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/31/2023	French, Amy
Amount (\$)	Payee address; City; State; Zip Code
\$52.40	15 Anderson Drive
	Palestine, TX 75801
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Political mileage to attend meetings in the district (80mi*.655). Not reimbursed by state.
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/66 Rpt: 28/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	03/31/2023	French, Amy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$233.18	15 Anderson Drive
		Palestine, TX 75801
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Political mileage to attend meetings in the district
		(356mi*.655). Not reimbursed by state.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/01/2023	French, Amy
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	15 Anderson Drive
		Palestine, TX 75801
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign contract labor
		Gailpaigh collinate labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/06/2023	French, Amy
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.91	15 Anderson Drive
		Palestine, TX 75801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Political mileage to attend meetings in the district (122mi*.655). Not reimbursed by state.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$		

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Total marca Cabadula E1.	2. Filer ID (Fthis Commission Filer)
1	Total pages Schedule F1: Sch: 25/66 Rpt: 29/71	2 FILER NAME Harris, Cody J. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00082156
4	Date	5 Payee name
	04/19/2023	French, Amy
6	Amount (\$) \$231.87	7 Payee address; City; State; Zip Code 15 Anderson Drive  Palestine, TX 75801
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense Political mileage to attend meetings in the district (354mi*.655). Not reimbursed by state.
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/01/2023	French, Amy
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	15 Anderson Drive
		Palestine, TX 75801
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		Campaign contract labor
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/23/2023	French, Amy
		· · · · · · · · · · · · · · · · · · ·
	Amount (\$)	
	\$73.36	15 Anderson Drive
		Palestine, TX 75801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Political mileage to attend meetings in the district
		(112mi*.655). Not reimbursed by state.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

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

	Candidate/Officenoider/Politica Credit Card Payment	al Co	The Instruction Guide ex			_	es/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			_	3 Filer ID (Ethics Commission Filers)
	Sch: 26/66 Rpt: 30/71		Harris, Cody J. (The Honorable)				00082156
4	Date	5	Payee name				
	06/01/2023		French, Amy				
6	Amount (\$)	7	Payee address; City;	State; Z	Zip Cod	 et	
	\$200.00		15 Anderson Drive				
			Palestine, TX 75801				
8	PURPOSE	(a)	Category (See Categories listed at the top of	this schedu	ıle) (	(b)	) Description
	OF EXPENDITURE		Salaries/Wages/Contract Labor				Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE						Check if Austin, TX, officeholder living expense
							Campaign contract labor
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Offi	ce soug	Jht	t Office held
	experience to benefit of or						
	Date		Payee name				
	06/07/2023		French, Amy				
	Amount (\$)		Payee address; City;	State; Z	Zip Cod	Je	
	\$3,000.00		15 Anderson Drive				
			Palestine, TX 75801				
H	PURPOSE	(a)	Category (See Categories listed at the top of	this schedu	(مار	(b)	) Description
	OF	ľ` <i>′</i>	Salaries/Wages/Contract Labor	tilis scriedu	ile)	. ,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Canalites, trages, cominast Lass.				Check if Austin, TX, officeholder living expense
							Campaign contract labor
	Complete ONLY if direct		Candidate/Officeholder name	Offi	ce soug	jht	t Office held
	expenditure to benefit C/OI	Н					
	Date		Payee name				
	04/10/2023		GS-JJ.COM WA				
	Amount (\$)	T	Payee address; City;	State; 2	Zip Cod	de	
	\$2,825.50		20829 Valley Blvd				
			<del>-</del>				
			Walnut, CA 91789				
$\vdash$	PURPOSE	(2)	·		1,	(b)	) Description
	OF	<sup>(a</sup> ,	Category (See Categories listed at the top of	this schedu	ıle)	(n)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Gift/Awards/Memorials Expense				Check if Austin, TX, officeholder living expense
							Campaign gifts
		1					

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

Office held

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 27/66 Rpt: 31/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	01/03/2023	Google G Suite
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$33.84	1600 Amphitheatre Parkway
		Mountainview, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign software subscription
		Campaign contrain casespuon
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/02/2023	Google G Suite
	Amount (\$)	Payee address; City; State; Zip Code
	\$38.38	1600 Amphitheatre Parkway
		Mountainview, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign software subscription
		Campaign contrain casespuon
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/02/2023	Google G Suite
	Amount (\$)	Payee address; City; State; Zip Code
	\$38.38	1600 Amphitheatre Parkway
		Mountainview, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign software subscription
		Campaign soliware subscription
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>o</b>

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Credit Card Payment	ict ategory not listed above)
The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID	(Ethics Commission Filers)
Sch: 28/66 Rpt: 32/71         Harris, Cody J. (The Honorable)         00082156	_
4 Date 5 Payee name	
04/03/2023 Google G Suite	
6 Amount (\$) 7 Payee address; City; State; Zip Code	
\$38.38 1600 Amphitheatre Parkway	
Mountainview, CA 94043	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule)  OF  OF  OF  OF  OF  OF  OF  OF  OF  O	
Office Overhead/Rental Expense Check if travel outside of Texas. Comple Check if Austin, TX, officeholder living e	
Campaign software subscripti	
Campaign soliware subscripti	OH
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	1
orporation to solicition of our	
Date Payee name	
05/01/2023 Google G Suite	
Amount (\$) Payee address; City; State; Zip Code	
\$38.38 1600 Amphitheatre Parkway	
Mountainview, CA 94043	
PURPOSE  (a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Taxas Completed	
EXPENDITURE  Office Overhead/Rental Expense  Check if travel outside of Texas. Comple  Check if Austin, TX, officeholder living e	
Campaign software subscripti	
Campaign contrait casconpa	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	<del></del>
expenditure to benefit C/OH	,
Date Payee name	
06/02/2023 Google G Suite	
Amount (\$) Payee address; City; State; Zip Code	
\$38.38 1600 Amphitheatre Parkway	
Mountainview, CA 94043	
	ete Schedule T.
T ( )ttica ( )varhaad/Dantal Evnanca         Clieck ii diddei oulside oi Texas. Collipia	
EXPENDITURE  Office Overhead/Rental Expense  Check if travel outside of Texas. Comple  Check if Austin, TX, officeholder living e	xpense
EVDENDITURE   Office Overnead/Rental Expense   Light and the distribution of texas. Complete	
EXPENDITURE  Office Overnead/Rental Expense  Check if Austin, TX, officeholder living e	
EXPENDITURE  Office Overnead/Rental Expense  Check if Austin, TX, officeholder living e  Campaign software subscripti	ion
EXPENDITURE  Office Overnead/Rental Expense  Check if Austin, TX, officeholder living e  Campaign software subscripti	ion
EXPENDITURE  Office Overnead/Rental Expense  Check if Austin, TX, officeholder living e Campaign software subscripti  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office hold	ion
EXPENDITURE  Office Overnead/Rental Expense  Check if Austin, TX, officeholder living e Campaign software subscripti  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office hold	ion

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 29/66 Rpt: 33/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	02/27/2023	H-E-B #639
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$217.00	1801 E 51st St
		Austin, TX 78723
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Supplies for Capitol Office
		Саррностол Сариол Сто
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	03/15/2023	Hampton Inn
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$291.33	4141 Governors Row
		Austin, TX 78744
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Lodging for Legislative Meeting
		Loughing for Logislative intotally
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	01/03/2023	Hill Country Springs
H	Amount (\$)	Payee address; City; State; Zip Code
	\$31.31	10019 Interstate 35
		Austin, TX 78747
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Water for campaign office
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
ı		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to comple	te this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 30/66 Rpt: 34/71	Harris, Cody J. (The Honorable)	00082156
4	Date	5 Payee name	
	02/03/2023	Hill Country Springs	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$72.82	10019 Interstate 35	
L		Austin, TX 78747	
8	PURPOSE OF	· · · · · · · · · · · · · · · · · · ·	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living expense
			Water for campaign office
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
L	experialture to benefit C/O	1	
	Date	Payee name	
L	03/02/2023	Hill Country Springs	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$92.06	10019 Interstate 35	
		:	
L		Austin, TX 78747	
	PURPOSE OF	(	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living expense
			Water for campaign office
L			
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
L			
	Date	Payee name	
L	04/04/2023	Hill Country Springs	
	Amount (\$) \$121.30	Payee address; City; State; Zip Code 10019 Interstate 35	
	φ121.30	10019 III. lei State 33	
		Austin, TX 78747	
┝	PURPOSE		Description
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Water for campaign office
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol		Office field

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	leu above)		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Com	mission Filers)		
	Sch: 31/66 Rpt: 35/71				
4	Date	5 Payee name			
	05/02/2023	Hill Country Springs			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$88.32	10019 Interstate 35			
		Austin, TX 78747			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense	Т.		
		Check if Austin, TX, officeholder living expense  Water for campaign office			
		water for campaign office			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
9	expenditure to benefit C/OI				
	Date	Payee name			
	06/02/2023	Hill Country Springs			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$58.32	32 10019 Interstate 35			
		Austin, TX 78747			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense	Т.		
		Check if Austin, TX, officeholder living expense  Water for campaign office			
		water for eampaign office			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OH				
	Date	Davis asses			
	02/28/2023	Payee name Home Slice Pizza			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$284.34	1415 South Congress Ave			
		Austin, TX 78704			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	_		
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense	Г.		
		Lunch for Constituent Group			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI				

#### SCHEDULE F1

**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: 32/66 Rpt: 36/71	Harris, Cody J. (The Honorable)	00082156
4	Date	5 Payee name	
	03/28/2023	Home Slice Pizza	
6	Amount (\$) \$260.59	7 Payee address; City; State; Zip Code 1415 South Congress Ave Austin, TX 78704	
8	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense Istituent Group
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/18/2023	Innovation and Technology Caucus	
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 1108 Lavaca St Ste 110-701	
		Austin, TX 78701	
	PURPOSE OF EXPENDITURE	Ducs   <u></u>	utside of Texas. Complete Schedule T. TX, officeholder living expense <b>lues</b>
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date 03/06/2023	Payee name Innovation and Technology Caucus	
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 1108 Lavaca St Ste 110-701  Austin, TX 78701	
	PURPOSE	(4) 0	
	OF EXPENDITURE	Dues Check if travel or	utside of Texas. Complete Schedule T. TX, officeholder living expense lues
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

### SCHEDULE F1

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

Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 33/66 Rpt: 37/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	01/03/2023	J&B Security
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.67	112 Village St
		Palestine, TX 75801
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Security services for district office
		Cooding convices for district critics
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/01/2023	J&B Security
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.67	112 Village St
		Palestine, TX 75801
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Security services for district office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/01/2023	J&B Security
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.67	112 Village St
		Palestine, TX 75801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Security services for district office
		Security services for district office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 34/66 Rpt: 38/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	04/03/2023	J&B Security
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.67	112 Village St
		Palestine, TX 75801
8	PURPOSE 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.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Security services for district office
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experionality to benefit C/O	
	Date	Payee name
L	05/02/2023	J&B Security
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.67	112 Village St
L		Palestine, TX 75801
	PURPOSE 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.
l	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Security services for district office
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	-	
	Date	Payee name
L	06/01/2023	J&B Security
	Amount (\$) \$35.67	Payee address; City; State; Zip Code  112 Village St
	Ψ33.07	112 village St
		Palestine, TX 75801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Security services for district office
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		

### SCHEDULE F1

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:									
	Sch: 35/66 Rpt: 39/71	Harris, Cody J. (The Honorable) 00082156								
4	Date	5 Payee name								
	05/23/2023	Jacoby's Restaurant & Mercantile								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$190.04	3235 East Cesar Chavez								
		Austin, TX 78702								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.								
	EXI ENDITORE	Check if Austin, TX, officeholder living expense								
		Lunch with Staff								
_	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held								
9	Complete ONLY if direct expenditure to benefit C/Ol									
	Data	<u> </u>								
	Date	Payee name								
	01/13/2023	Mail Chimp								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$259.04	675 Ponce de Leon Ave NE, Ste 5000								
		Atlanta, GA 30308								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense								
		Camaign email service								
		Samaign Ghlair Service								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/O									
	Date	Payee name								
	02/13/2023	Mail Chimp								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$287.82	675 Ponce de Leon Ave NE, Ste 5000								
	Ψ201.02	075 T Office de Leoff 7 We NE, Sie 3000								
		Atlanta, GA 30308								
	BUBBOOF									
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Pental Expanse  (b) Description  Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense								
		Camaign email service								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/O	H								

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) ertising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Folling Expense
Salaries/Wangs/Contract Labor

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment				Legal Services Salaries/Wages/Contract Labor OTHER (enter a category)						strict category not listed above)	
, 				The Instruction Gu	uide explains how to	comp	lete this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission I	Filers)
	Sch: 36/66 Rpt: 40/71		Harris, Cody	J. (The Honor	able)				00082156		
4	Date	5	Payee name								
	03/14/2023		Mail Chimp								
6	Amount (\$)	7	Payee addres	s; City;	State; Zip	Code					
	\$287.82		675 Ponce d	e Leon Ave NE	E, Ste 5000						
			Atlanta, GA	30308							
8	PURPOSE	(a)			ne top of this schedule)	(b	) Description				
	OF	(")		e Categories listed at ti ead/Rental Exp		(~)		outsi	ide of Texas. Con	plete Schedule T.	
	EXPENDITURE		Office Over	caan tentai Exp	Serise		Check if Austin	, TX	, officeholder livin	g expense	
							Camaign em	ail s	service		
9	Complete ONLY if direct		Candidate/Offic	eholder name	Office s	ough	t		Office h	eld	
	expenditure to benefit C/OI	Н									
	Date		Payee name								
	04/13/2023		Mail Chimp								
	Amount (\$)		Payee addres	s; City;	State; Zip	Code					
	\$287.82		675 Ponce d	e Leon Ave NE	E, Ste 5000						
			Atlanta, GA	30308							
	PURPOSE	(a)	Category (co	Cotomorine listed at the	ne top of this schedule)	(b	) Description				
	OF	"		e calegories listed at the ead/Rental Exp		(*)		outsi	ide of Texas. Con	plete Schedule T.	
	EXPENDITURE				3000		Check if Austin	, TX	, officeholder living	g expense	
			Camaign e					mail service			
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	Office s	ough	t		Office h	eld	
	experiulture to beliefit C/Oi										
	Date		Payee name								
	05/15/2023		Mail Chimp								
	Amount (\$)		Payee addres	s; City;	State; Zip	Code					
	\$287.82		675 Ponce d	e Leon Ave NE	E, Ste 5000						
			Atlanta, GA	30308							
	PURPOSE	(a)	Category (Se	e Categories listed at t	ne top of this schedule)	(b	) Description				
	OF EXPENDITURE			ead/Rental Exp				outsi	ide of Texas. Con	plete Schedule T.	
	EXPENDITORE						ш		, officeholder living	g expense	
							Camaign ema	ail s	service		
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	Office	ough	t		Office h	eld	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 37/66 Rpt: 41/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	06/13/2023	Mail Chimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$287.82	675 Ponce de Leon Ave NE, Ste 5000
		Atlanta, GA 30308
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Camaign email service
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	04/11/2023	Molly's Custom Silver
H	Amount (\$)	Payee address; City; State; Zip Code
	\$2,619.97	1281 W Green Oaks Blld Ste 115
		Arlington, VA 76013
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign gifts
		Campaign gine
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	04/17/2023	Molly's Custom Silver
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.88	1281 W Green Oaks Blld Ste 115
		Arlington, VA 76013
$\vdash$	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF	Gift/Awards/Memorials Expense    Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign gifts
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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

	Credit Card Payment  The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)					
	Sch: 38/66 Rpt: 42/71	Harris, Cody J. (The Honorable)		00082156					
4	Date	5 Payee name		-					
	06/20/2023	Moncada, Robert							
6	Amount (\$)	7 Payee address; City; State; Zip Cod	le						
	\$3,000.00	610 W Rogers St							
		San Diego, TX 78384							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description					
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.					
	EXI ENDITORE			Check if Austin, TX, officeholder living expense					
				Campaign contract labor					
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held					
9	expenditure to benefit C/OI		HL	Office field					
	Data								
	Date 01/03/2023	Payee name Moncada, Robert							
		·							
	Amount (\$)	Payee address; City; State; Zip Cod	le						
	\$500.00	610 W Rogers St							
		0 0: 7/70004							
		San Diego, TX 78384							
	PURPOSE OF	c , (coo canagement and the contraction)	(b)	Description					
	EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense					
				Campaign contract labor					
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held					
	expenditure to benefit C/OI	1							
	Date	Payee name							
	02/03/2023	Moncada, Robert							
	Amount (\$)	Payee address; City; State; Zip Cod	le						
	\$500.00	610 W Rogers St							
		San Diego, TX 78384							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description					
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITORE			Check if Austin, TX, officeholder living expense					
				Campaign contract labor					
	Complete ONLY if alias -t	Condidate/Officeholder name	ht	Office held					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ΠŢ	Office held					
	•								

#### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Mages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Printing Expense Salaries/Wages/Contract Labor Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 39/66 Rpt: 43/71 00082156 Harris, Cody J. (The Honorable) 4 Date Payee name 03/06/2023 Moncada, Robert 6 Amount (\$) Payee address; State; Zip Code \$500.00 610 W Rogers St San Diego, TX 78384 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign contract labor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/03/2023 Moncada, Robert Amount (\$) Payee address; City; State; Zip Code \$500.00 610 W Rogers St San Diego, TX 78384 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign contract labor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/01/2023 Moncada, Robert Amount (\$) Payee address: City; State; Zip Code \$500.00 610 W Rogers St San Diego, TX 78384 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign contract labor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 40/66 Rpt: 44/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
l	06/05/2023	Moncada, Robert
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	610 W Rogers St
l		
l		San Diego, TX 78384
8	PURPOSE	
ľ	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.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Campaign contract labor
L		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experiantire to benefit G/O	<u> </u>
Г	Date	Payee name
l	01/23/2023	Murphy Nasica
Г	Amount (\$)	Payee address; City; State; Zip Code
l	\$2,500.00	PO Box 1648
l		
l		Austin, TX 78767
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
l	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Campaign strategy consulting
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	<b>y</b>
⊨	Date	Davida marra
l	02/03/2023	Payee name Murphy Nasica
┝		
l	Amount (\$) \$2,500.00	Payee address; City; State; Zip Code PO Box 1648
l	\$2,500.00	FO BOX 1046
l		A
L		Austin, TX 78767
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
l	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
l		Campaign strategy consulting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
l		

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 41/66 Rpt: 45/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	03/07/2023	Murphy Nasica
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,500.00	PO Box 1648
		Austin, TX 78767
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign strategy consulting
		Campaign stategy concatang
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	03/08/2023	Murphy Nasica
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$3,360.00	PO Box 1648
	φ3,300.00	FO BOX 1046
		Austin, TX 78767
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign strategy consulting
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/30/2023	Murphy Nasica
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	PO Box 1648
		Austin, TX 78767
1	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign strategy consulting
$\vdash$	Computate ONU V Station	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>		

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	Credit Card Payment  The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)						
	Sch: 42/66 Rpt: 46/71	Harris, Cody J. (The Honorable)		00082156						
4	Date	5 Payee name		•						
	04/03/2023	Murphy Nasica								
6	Amount (\$)	7 Payee address; City; State; Zip C	ode							
	\$3,360.00	PO Box 1648								
		Austin, TX 78767								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description						
	OF EXPENDITURE	Consulting Expense		Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	- '		Check if Austin, TX, officeholder living expense						
				Campaign strategy consulting						
_			<u> </u>							
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soil	ught	Office held						
	Date	Payee name								
	05/04/2023	Murphy Nasica								
	Amount (\$)	Payee address; City; State; Zip C	ode							
	\$2,500.00	PO Box 1648								
		Austin, TX 78767								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description						
	OF EXPENDITURE	Consulting Expense		Check if travel outside of Texas. Complete Schedule T.						
	-			Check if Austin, TX, officeholder living expense  Campaign strategy consulting						
				Campaign strategy consulting						
	Complete ONLY if direct	Candidate/Officeholder name Office so	laht	Office held						
	expenditure to benefit C/OI		g	56564						
	Date	Payee name								
	01/31/2023	PISD Education Foundation								
	Amount (\$)	Payee address; City; State; Zip Ci	ode							
	\$400.00	1007 E. Park Ave.	ouc							
	Ψ+00.00	1007 E. 1 dik / We.								
		Palestine, TX 75801								
			1							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee		Check if Austin, TX, officeholder living expense						
				Donation						
	Complete ONLY if direct	Candidate/Officeholder name Office sor	ught	Office held						
	expenditure to benefit C/OI	1								

#### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 43/66 Rpt: 47/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	05/10/2023	Palestine Herald Press
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	PO Box 379
		Palestine, TX 75802
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign advertising
		Campaign davordoing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
Г	Date	Payee name
	01/10/2023	Palestine Sign Company
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$330.00	500 W Main St
		Palestine, TX 75801
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign sign
		Campaign sign
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	01/02/2023	Purple Sage Strategies LLC
H	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	3002 Bryker Drive
		Austin, TX 78703
T	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign social media management
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
I		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Card Payment	The Instruction Guide explains how to com	•	,							
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)								
	Sch: 44/66 Rpt: 48/71	Harris, Cody J. (The Honorable)	00082156								
4	Date	5 Payee name	Payee name								
	02/02/2023	Purple Sage Strategies LLC									
6	Amount (\$)	7 Payee address; City; State; Zip Cod	le								
	\$1,000.00	3002 Bryker Drive									
		Austin, TX 78703									
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description							
	OF EXPENDITURE	Consulting Expense		Check if travel outside of Texas. Complete Schedule T.							
				Check if Austin, TX, officeholder living expense							
				Campaign social media management							
_	Complete ONLY if direct	Condidate/Officeholder name	ht	Office held							
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug H	nι	Office field							
	Date	Payee name									
	03/01/2023	Purple Sage Strategies LLC									
	Amount (\$)	Payee address; City; State; Zip Cod	le								
	\$1,000.00	3002 Bryker Drive									
		Austin, TX 78703									
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description							
	OF EXPENDITURE	Consulting Expense		Check if travel outside of Texas. Complete Schedule T.							
	ZA ZADITORZ		Check if Austin, TX, officeholder living expense  Campaign social media management								
				Campaign social media management							
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held							
	expenditure to benefit C/OI		1110	Office field							
	<u> </u>	<u> </u>									
	Date	Payee name									
	04/01/2023	Purple Sage Strategies LLC									
	Amount (\$)	Payee address; City; State; Zip Cod	le								
	\$1,000.00	3002 Bryker Drive									
		Austin, TX 78703									
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description							
	OF EXPENDITURE	Consulting Expense		Check if travel outside of Texas. Complete Schedule T.							
				Campaign social media management							
				Campaign social media management							
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held							
	Complete ONLY if direct expenditure to benefit C/OI	<b>9</b>	iiit	Onice field							

#### SCHEDULE F1

Advertising Expense Even
Accounting/Banking Fees
Consulting Expense Food.
Contributions/ Donations Made By - Gift/A

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			mmittee	Legal Service		Sal		ages	/Contract Labor	a category not listed al	oove)		
A Tarakanana Oshadaka Edulo EUEDA				The Instru	ction Guide	explains how	to con	nple	te this form.				
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 45/66 Rpt: 49/71		Harris, Cody	J. (The	Honorabl	le)					00082156		
4	Date	5	Payee name										
	05/01/2023	ı	Purple Sage	Strategi	ies LLC								
6	Amount (\$)	7	Payee addres	s; Cit	īy;	State; Zi	р Сос	de					
	\$1,000.00		3002 Bryker	Drive									
			Austin, TX 7	8703									
8	PURPOSE	(a)	Category (Se	e Categories	listed at the to	p of this schedule	)	(b)	Description				
	OF EXPENDITURE		Consulting E						Check if travel	outsi	de of Texas. Co	mplete Schedule T.	
	LXI LINDITORL								ш		officeholder livii		
									Campaign so	cıa	il media ma	ınagement	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder n	name	Office	e soug	ght			Office I	neld	
	experiditure to beriefit C/O												
	Date		Payee name										
	06/05/2023		Purple Sage	Strategi	ies LLC								
	Amount (\$)		Payee addres	s; Cit	īy;	State; Zi	р Сос	de					
	\$1,000.00		3002 Bryker	Drive									
			Austin, TX 7	8703									
_	PURPOSE	_	Category (Se					(b)	Description				
	OF		Consulting E		iisteu at trie to	p or tris scriedule	, [	(-,	_ `	outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE		Consulting L	-хрспэс					Check if Austin	, TX,	officeholder livi	ng expense	
									Campaign so	cia	l media ma	ınagement	
	Complete ONLY if direct		Candidate/Offic	ceholder n	name	Office	e soug	ght			Office h	neld	
	expenditure to benefit C/OI	H											
	Date		Payee name										
	01/03/2023		Richardson,	Jody									
	Amount (\$)		Payee addres	ss; Cit	:V:	State; Zi	p Coo	de					
	\$2,800.00	ı	5000 Missio	•									
	<del>+-</del> ,												
			Austin, TX 7	2735									
	BUBBOOF						- 1	/I- \					
	PURPOSE OF		Category (Se				)	(a)	Description	outci	do of Toyas Co	mplete Schedule T.	
	EXPENDITURE		Office Overh	nead/Rer	ıtaı Expen	ise			ш		officeholder livi		
									Rent for apar				
											3		
	Complete ONLY if direct		Candidate/Offic	ceholder n	name	Office	e soug	ght			Office I	neld	
	expenditure to benefit C/OI				-	20	8					-	
<u> </u>													

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

1 Total pages Schedule F1: Sch: 46/66 Rpt: 50/71 Harris, Cody J. (The Honorable)  4 Date 02/03/2023  5 Payee name Richardson, Jody  6 Amount (\$) Payee address; City; State; Zip Code 5000 Mission Oaks Blvd Unit 2  Austin, TX 78735  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 Rent for apartment during 2023 session		Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
Date   Section	1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Richardson, Jody   Richardson, Jody   Payee address; City; State; Zip Code   S2,800.00   S3,800.00		Sch: 46/66 Rpt: 50/71	Harris, Cody J. (The Honorable) 00082156
Amount (\$)   \$2,800.00   7   Payee address; City; State; Zip Code   \$2,800.00   \$2,800.0	4	Date	5 Payee name
S2,800.00 5000 Mission Oaks Blvd Unit 2  Austin, TX 78735  8 PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if Austin, TX, officehober Inling expense or Rent for apartment during 2023 session  9 Complete ONLY if direct expenditure to benefit C/OH  Date O3/14/2023 Amount (s) S5,600.00 Payee address; City; State; Zip Code S6,600.00 Office Overhead/Rental Expense  Complete ONLY if direct expenditure to benefit C/OH  Date OFFI EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Office Sought Office overhead/Rental Expense  Complete ONLY if direct expenditure to benefit C/OH  Date OFFI EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Office Sought Office overhead/Rental Expense  Office sought Office held  Date Expenditure to benefit C/OH  Date OS000 Mission Oaks Blvd Unit 2  Austin, TX 78735  PURPOSE OR S2,800.00 Office Overhead/Rental Expense  (b) Description Office held  Office held  Office held  Office overhead/Rental Expense  (b) Description Office held  Office held  Office Overhead/Rental Expense  Office Overhead/Rental Expense  Complete ONLY if direct Office Overhead/Rental Expense		02/03/2023	Richardson, Jody
Austin, TX 78735  8  PURPOSE OF EXPENDITURE  (a) Category (Sise Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description    Check if Austin, TX, officeholder No. Complete Schedule T.	6	Amount (\$)	7 Payee address; City; State; Zip Code
Complete ONLY if direct expenditure to benefit C/OH		\$2,800.00	5000 Mission Oaks Blvd Unit 2
Complete ONLY if direct expenditure to benefit C/OH			
Office Overhead/Rental Expense   Complete Solution   Complete Sol			Austin, TX 78735
Septembrium   Complete ONLY if direct expenditure to benefit C/OH	8		(a) Category (See Categories listed at the top of this schedule) (b) Description
PURPOSE Office Overhead/Rental Expense  Candidate/Officeholder name  Office sought  Office held  Office Overhead/Rental Expense  Office held  Office held  Office held  Office held  Office held  Office Overhead/Rental Expense  Office held  Office held  Office Overhead/Rental Expense  Office Nount (\$)  Office Overhead/Rental Expense  Office held  Office held  Office held  Office held  Office held			Office Overfield Expense
9 Complete ONLY if direct expenditure to benefit C/OH  Date			l
Date 03/14/2023 Payee name Richardson, Jody  Amount (s) Payee address; City; State; Zip Code 5000 Mission Oaks Blvd Unit 2  Austin, TX 78735  PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Rent for apartment during 2023 session  Complete ONLY if direct expenditure to benefit C/OH  Date Payee name Richardson, Jody  Amount (s) Payee address; City; State; Zip Code Schedule To Office held  Date Osage Payee name Richardson, Jody  Amount (s) Payee address; City; State; Zip Code Schedule To Office held Schedule To Office Overhead/Rental Expense Rent for apartment during 2023 session Office Overhead/Rental Expense Rent for apartment during 2023 session Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
Date 03/14/2023 Richardson, Jody  Amount (\$) Payee address; City; State; Zip Code \$5,600.00 Mission Oaks Blvd Unit 2  Austin, TX 78735  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense  Complete ONLY if direct expenditure to benefit C/OH  Date 05/01/2023 Richardson, Jody  Amount (\$) Payee name Richardson, Jody  Amount (\$) Payee address; City; State; Zip Code \$2,800.00 Soo Mission Oaks Blvd Unit 2  Austin, TX 78735  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule)  Office Sought  Office held  (b) Description Check if ravel outside of Texas. Complete Schedule T.  X Check if Austin, TX, Officeholder Indian Complete Code  Office held  (b) Description Check if travel outside of Texas. Complete Schedule T.  X Check if Austin, TX, Officeholder Indian Check if Indian Code Indian Code Indian Check if Indian Check	9		the state of the s
Amount (\$)		expenditure to benefit C/O	1
Amount (\$) Payee address; City; State; Zip Code  5000 Mission Oaks Blvd Unit 2  Austin, TX 78735  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense  Complete ONLY if direct expenditure to benefit C/OH  Date 05/01/2023  Amount (\$) Payee name Richardson, Jody  Amount (\$) Payee address; City; State; Zip Code  \$2,800.00  Purpose OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Office bought  Office held  (b) Description  Complete ONLY if direct expenditure to benefit C/OH  Date 05/01/2023  Amount (\$) Payee name Richardson, Jody  Amount (\$) Payee address; City; State; Zip Code  \$2,800.00  Furpose OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if Tavael outside of Texas. Complete Schedule T.  Check If Austin, TX, officeholder living expense Rent for apartment during 2023 session  Complete ONLY if direct  Candidate/Officeholder name Office sought Office held		Date	Payee name
### Sp. 600.00		03/14/2023	Richardson, Jody
Austin, TX 78735  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Rent for apartment during 2023 session  Complete ONLY if direct expenditure to benefit C/OH  Date 05/01/2023  Amount (\$) Payee name Richardson, Jody Amount (\$) Payee address; City; State; Zip Code \$2,800.00 S2,800.00  Purpose OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if Austin, TX, officeholder living expense Rent for apartment during 2023 session  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Rent for apartment during 2023 session  Complete ONLY if direct Candidate/Officeholder name Office sought Office output Office held		Amount (\$)	Payee address; City; State; Zip Code
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description		\$5,600.00	5000 Mission Oaks Blvd Unit 2
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description			
Office Overhead/Rental Expense  Office Overhead/Rental Expense  Office Overhead/Rental Expense  Office Overhead/Rental Expense  Complete ONLY if direct expenditure to benefit C/OH  Date  O5/01/2023  Amount (\$)  Payee name Richardson, Jody  Amount (\$)  Payee address; City; State; Zip Code \$2,800.00  \$2,800.00  S2,800.00  Purpose OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Complete ONLY if direct  Candidate/Officeholder name Office sought  Office Hold  Office Overhead/Rental Expense  Complete ONLY if direct  Candidate/Officeholder name Office sought  Office sought Office held			Austin, TX 78735
Complete ONLY if direct expenditure to benefit C/OH  Date OS/O1/2023 Richardson, Jody  Amount (\$) Payee address; City; State; Zip Code \$2,800.00 Mission Oaks Blvd Unit 2  Austin, TX 78735  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Complete ONLY if direct Candidate/Officeholder name Office sought Office output (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Rent for apartment during 2023 session  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
Complete ONLY if direct expenditure to benefit C/OH  Date Payee name 05/01/2023 Richardson, Jody  Amount (\$) Payee address; City; State; Zip Code \$2,800.00 \$5000 Mission Oaks Blvd Unit 2  Austin, TX 78735  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Complete ONLY if direct  Candidate/Officeholder name Office sought Office sought Office pld			
Date 05/01/2023 Payee name Richardson, Jody  Amount (\$) Payee address; City; State; Zip Code \$2,800.00 S2,800.00 S2,800.00  Payee address; City; State; Zip Code S000 Mission Oaks Blvd Unit 2  Austin, TX 78735  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 Rent for apartment during 2023 session  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			l —
Date 05/01/2023 Payee name Richardson, Jody  Amount (\$) Payee address; City; State; Zip Code \$2,800.00 S2,800.00 S2,800.00  Payee address; City; State; Zip Code S000 Mission Oaks Blvd Unit 2  Austin, TX 78735  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 Rent for apartment during 2023 session  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
Date 05/01/2023 Payee name Richardson, Jody  Amount (\$) Payee address; City; State; Zip Code \$2,800.00 \$000 Mission Oaks Blvd Unit 2  Austin, TX 78735  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Complete ONLY if direct  Candidate/Officeholder name Office sought  Office held			
Amount (\$)  Payee address; City; State; Zip Code  \$2,800.00  Payee address; City; State; Zip Code  5000 Mission Oaks Blvd Unit 2  Austin, TX 78735  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held		expenditure to benefit C/O	1
Amount (\$)  Payee address; City; State; Zip Code  \$2,800.00  S2,800.00  Austin, TX 78735  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held		Date	Payee name
\$2,800.00   5000 Mission Oaks Blvd Unit 2  Austin, TX 78735  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Rent for apartment during 2023 session  Complete ONLY if direct Candidate/Officeholder name Office sought Office held		05/01/2023	Richardson, Jody
Austin, TX 78735  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Complete ONLY if direct  Candidate/Officeholder name  Austin, TX 78735  (b) Description Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense Rent for apartment during 2023 session  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held		Amount (\$)	Payee address; City; State; Zip Code
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 Rent for apartment during 2023 session  Complete ONLY if direct  Candidate/Officeholder name Office sought  Office held		\$2,800.00	5000 Mission Oaks Blvd Unit 2
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 Rent for apartment during 2023 session  Complete ONLY if direct  Candidate/Officeholder name Office sought  Office held			
OF EXPENDITURE  Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Rent for apartment during 2023 session  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held			Austin, TX 78735
EXPENDITURE  Office Overnead/Rental Expense    Check if Austin, TX, officeholder living expense			
Rent for apartment during 2023 session  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Office Overhead/Nertial Experise
expenditure to benefit C/OH			
		expenditure to benefit C/O	<del>1</del>

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ		· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1:	
L	Sch: 47/66 Rpt: 51/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	06/01/2023	Richardson, Jody
6	Amount (\$)	7 Payee address; City; State; Zip Code
ľ	\$2,800.00	5000 Mission Oaks Blvd Unit 2
	Ψ2,000.00	5000 Mission Gales Biva Grite 2
		A 6 TV 70705
		Austin, TX 78735
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		X Check if Austin, TX, officeholder living expense
		Rent for apartment during 2023 session
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit 6/61	
	Date	Payee name
	06/28/2023	Richardson, Jody
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,800.00	5000 Mission Oaks Blvd Unit 2
	, ,	
		Auctin TV 7072E
		Austin, TX 78735
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)
	EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Rent for apartment during 2023 session
		Transfer apartment during 2020 0000011
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	06/14/2023	Ryan Data & Research
	Amount (\$)	Payee address; City; State; Zip Code
	\$430.00	PO Box 202675
		Austin, TX 78720
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Consulting Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign services - email list purchase
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 48/66 Rpt: 52/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	01/12/2023	Salter, Harrison
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	695 Goodhue Rd
		Beaumont, TX 77706
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Campaign contract labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Data	
	Date 02/07/2023	Payee name Salter, Harrison
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	695 Goodhue Rd
		D
		Beaumont, TX 77706
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign contract labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	1
	Date	Payee name
	03/06/2023	Salter, Harrison
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	695 Goodhue Rd
		Beaumont, TX 77706
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
		( ) Coc outegoines listed at the top of this schedule)
	OF	Salaries/Wages/Contract Labor
		Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	OF	Salaries/Wages/Contract Labor
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign contract labor
	OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign contract labor  Candidate/Officeholder name  Office sought  Office held
	OF EXPENDITURE  Complete ONLY if direct	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign contract labor  Candidate/Officeholder name  Office sought  Office held
	OF EXPENDITURE  Complete ONLY if direct	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign contract labor  Candidate/Officeholder name  Office sought  Office held

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Card Payment	The Instruction Guide explains how to comp	lete this forn	n.		
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 49/66 Rpt: 53/71	Harris, Cody J. (The Honorable)			00082156	
4	Date	5 Payee name		·		
	04/03/2023	Salter, Harrison				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$200.00	695 Goodhue Rd				
		Beaumont, TX 77706				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	<b>)</b> Description	on		
	OF EXPENDITURE	Salaries/Wages/Contract Labor				plete Schedule T.
			Campaig		officeholder living	g expense
			Campaig	gir corner	201 10001	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	<u> </u>		Office he	eld .
	expenditure to benefit C/O		•		000	
_	Date	Payee name				
	05/01/2023	Salter, Harrison				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$300.00	695 Goodhue Rd				
	4000.00	ooo oooanaa raa				
		Beaumont, TX 77706				
_	PURPOSE		<b>)</b> Description	nn.		
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor			de of Texas. Com	plete Schedule T.
	EXPENDITURE	Galarios, Wagos, Cornilate Lasor	_		officeholder living	g expense
			Campaig	gn contra	act labor	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	İ		Office he	eld
	Date	Payee name				
	05/26/2023	Salter, Harrison				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,500.00	695 Goodhue Rd				
		Beaumont, TX 77706				
	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	) Description			
	EXPENDITURE	Salaries/Wages/Contract Labor			officeholder living	plete Schedule T.
			Campaig			, oxponed
	Complete ONLY if direct	Candidate/Officeholder name Office sought	t		Office he	eld
	expenditure to benefit C/OH					

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 50/66 Rpt: 54/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	06/05/2023	Salter, Harrison
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 695 Goodhue Rd
	\$250.00	093 Gooding Ru
		Beaumont, TX 77706
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	_, _, _, _, _, _, _, _, _, _, _, _, _, _	Check if Austin, TX, officeholder living expense  Campaign contract labor
		Campaign contract taxo.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	01/17/2023	Spectrum
	Amount (\$)	Payee address; City; State; Zip Code
	\$122.53	PO Box 60074
		City of Industry, CA 01716
	PURPOSE	City of Industry, CA 91716
	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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign internet
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	02/14/2023	Spectrum
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.22	PO Box 60074
		City of Industry, CA 91716
	PURPOSE 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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign internet
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
	Sch: 51/66 Rpt: 55/71	Harris, Cody J. (The Honorable) 00082156			
4	Date	5 Payee name			
	03/14/2023	Spectrum			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$125.22	PO Box 60074			
		City of Industry, CA 91716			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
		Campaign internet			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
	Date	Payee name			
	04/17/2023	Spectrum			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$125.22	PO Box 60074			
		City of Industry, CA 91716			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense			
	EXI ENDITORE	Check if Austin, TX, officeholder living expense			
		Campaign internet			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OH				
	Date	Payee name			
	05/15/2023	Spectrum			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$125.22	PO Box 60074			
	¥				
		City of Industry, CA 91716			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
		Campaign internet			
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held			

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1		2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 52/66 Rpt: 56/71	Harris, Cody J. (The Honorable) 00082156	
4		5 Payee name	
	06/14/2023	Spectrum	_
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$125.22	PO Box 60074	
		City of Industry, CA 91716	
8	PURPOSE		_
ľ	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.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Campaign internet	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
ľ	Complete ONLY if direct expenditure to benefit C/OI		
⊨	Date	Payee name	=
	01/11/2023	Sushi Junai	
┝	Amount (\$)	Payee address; City; State; Zip Code	_
	\$140.70	1612 Lavaca St	
		Austin, TX 78701	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Lunch with Staff	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
L	expenditure to benefit C/OI	1	
	Date	Payee name	
	05/22/2023	Sushi Junai	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.55	1612 Lavaca St	
		Austin, TX 78701	
L	PURPOSE		_
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Lunch with Constituents	
$\vdash$	Complete ONLV if direct	Candidate/Officeholder name Office sought Office held	_
	Complete ONLY if direct expenditure to benefit C/OI		
			_

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 53/66 Rpt: 57/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	05/01/2023	TEXASCRAZYCOM S
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,542.57	PO Box 3378
		Abilene, TX 79604
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Committee Gifts
		Softmander Sind
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	01/12/2023	Tall Alumni Association
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	2137 TAMU
		College Station, TX 77843
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		25
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	01/03/2023	Terry Blacks BBQ Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$324.01	1003 Barton Springs Rd
		Austin, TX 78704
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Lunch with Staff
		Lunch with Stall
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
ı		

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Total manage Calcadate 54	
1	Total pages Schedule F1: Sch: 54/66 Rpt: 58/71	2 FILER NAME Harris, Cody J. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00082156
4	•	
4	Date	5 Payee name
	02/03/2023	Texas Conservative Coalition TCC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	PO Box 2659
		Austin, TX 78768
		I
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Dues Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Membership dues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	
Г	Date	Payee name
	01/17/2023	Texas Department of Criminal Justice
	Amount (\$)	Payee address; City; State; Zip Code
	\$842.19	PO Box 4013
	Ψ042.13	1 O BOX 4013
		Huntsville, TX 77342
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
		Check if Austin, TX, officeholder living expense
		Campaign gifts
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiulture to benefit C/Oi	
	Date	Payee name
	01/27/2023	Texas Department of Criminal Justice
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,938.76	PO Box 4013
	,-,·· <b>v</b>	
		Huptoville, TV 77242
		Huntsville, TX 77342
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Campaign gifts
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	CAPETIONALE TO DEHEIR C/OI	1

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 55/66 Rpt: 59/71	2 FILER NAME Harris, Cody J. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00082156
4	Date 02/23/2023	5 Payee name Texas Republican Legislative Caucus
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code PO Box 13305  Austin, TX 78711
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Dues  (b) 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/OI	Candidate/Officeholder name Office sought Office held
	Date 03/20/2023	Payee name The NavCo Chronicle
	Amount (\$) \$200.00	Payee address; City; State; Zip Code 3002 W 4th Ave
	PURPOSE	Corsicana, TX 75110
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign advertising
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 05/08/2023	Payee name The NavCo Chronicle
	Amount (\$) \$600.00	Payee address; City; State; Zip Code 3002 W 4th Ave
		Corsicana, TX 75110
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign advertising for posters
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

Everit Expense Loan r Fees Office Food/Beverage Expense Polling Gitt/Awards/Memorials Expense Printin Lenal Services Salarie

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
	Sch: 56/66 Rpt: 60/71	Harris, Cody J. (The Honorable) 00082156		
4	Date	5 Payee name		
	06/26/2023	The NavCo Chronicle		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$200.00	3002 W 4th Ave		
		Corsicana, TX 75110		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
		Campaign advertising for school banner		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	1		
	Date	Payee name		
	01/11/2023	The Stephen F Austin Royal Sonesta Hotel		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$354.64	701 Congress Ave.		
		Austin, TX 78701		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF	Travel In District  Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Check if Austin, TX, officeholder living expense		
		Campaign staff lodging		
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH			
	Date	Payee name		
	05/10/2023	USPS		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$164.33	1213 N Link St		
		Palestine, TX 75803		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
		Campaign postage		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI			

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1: Sch: 57/66 Rpt: 61/71	2 FILER NAME Harris, Cody J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00082156
4	Date 01/18/2023	5 Payee name USPS	
6	Amount (\$) \$9.55	7 Payee address; City; State; Zip Code 1213 N Link St Palestine, TX 75803	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign postage
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held
	Date 03/31/2023	Payee name USPS	
	Amount (\$) \$11.45	Payee address; City; State; Zip Code 1213 N Link St  Palestine, TX 75803	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign postage
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held
	Date 05/16/2023	Payee name USPS	
	Amount (\$) \$92.06	Payee address; City; State; Zip Code 1213 N Link St	
		Palestine, TX 75803	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign postage
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	The Instruction Guide explains how to comp	plet	e this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 58/66 Rpt: 62/71	Harris, Cody J. (The Honorable)		00082156
4	Date	5 Payee name		•
	01/12/2023	Uber		
6	Amount (\$)	7 Payee address; City; State; Zip Code	9	
	\$9.93	1515 Third Street		
		San Francisco, CA 94158		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	o)	Description
	OF	Travel In District	·, .	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Ī	Check if Austin, TX, officeholder living expense
			•	Travel services during session
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	nt	Office held
	experientare to benefit Great			
	Date	Payee name		
	01/19/2023	Uber		
	Amount (\$)	Payee address; City; State; Zip Code	)	
	\$6.23	1515 Third Street		
		San Francisco, CA 94158		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	o) I	Description
	OF EXPENDITURE	Travel In District	[	Check if travel outside of Texas. Complete Schedule T.
	LAPENDITORE		[	Check if Austin, TX, officeholder living expense
				Travel services during session
	Complete ONLY if direct	Candidate/Officeholder name Office sought	\	Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·	IL	Office field
	Date	Payee name		
	01/19/2023	Uber		
	Amount (\$)	Payee address; City; State; Zip Code	9	
	\$7.40	1515 Third Street		
		San Francisco, CA 94158		
	PURPOSE OF	, -	) [	Description
	EXPENDITURE	Travel In District	Į	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Ļ	Travel services during session
	Complete ONLY if direct	Candidate/Officeholder name Office sought	nt	Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·	. •	Cindo Hold

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 59/66 Rpt: 63/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	01/19/2023	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$8.91	1515 Third Street
		San Francisco, CA 94158
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Travel services during session
		Travel services during session
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	01/19/2023	Uber
	Amount (\$) \$22.16	
	\$22.10	1515 Third Street
		San Francisco, CA 94158
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Travel services during session
		Travel services during session
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Payee name
	02/08/2023	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.84	1515 Third Street
	Ф10.04	1515 Tilliu Street
		0.5.1.010450
		San Francisco, CA 94158
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Travel services during session
		That is a street adding addition
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		
l		

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By - Gitt/Awards/Memorials Expense Printing Expense Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Credit Card Payment - Salaries/Wages/Contract Labor				s/Contract Labor	OTHER (enter a category not listed above)				
			The Instruction Guid	de explains how to co	mple	ete this form.				
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)	
	Sch: 60/66 Rpt: 64/71	Harris, Cod	y J. (The Honora	ble)				00082156		
4	Date	5 Payee name								
	02/23/2023	Uber								
6	Amount (\$)	7 Payee addres	ss; City;	State; Zip Co	ode					
	\$8.88	1515 Third	Street							
		San Francis	sco, CA 94158							
8	PURPOSE		ee Categories listed at the	top of this cohodule)	(b)	Description				
	OF	Travel In Di		top of trils scriedule)	( )		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	naver in Br	31100			Check if Austin,	, TX,	officeholder living	g expense	
						Travel service	es (	during sessi	on	
9	Complete ONLY if direct		ceholder name	Office sou	ıght			Office he	eld	
	expenditure to benefit C/OI	1								
	Date	Payee name								
	02/23/2023	Uber								
	Amount (\$)	Payee addres	ss; City;	State; Zip Co	ode					
	\$20.96	1515 Third	Street							
		San Francis	sco, CA 94158							
	PURPOSE	(a) Category (Se	ee Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Travel In Di		,		Check if travel	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITORE					ш		officeholder living		
						Travel service	es (	during sessi	on	
	Complete ONLY if direct expenditure to benefit C/OH		ceholder name	Office sou	ıght			Office he	eld	
	experientare to benefit 6/61									
	Date	Payee name								
	02/27/2023	Uber								
	Amount (\$)	Payee addres	ss; City;	State; Zip Co	ode					
	\$14.60	1515 Third	Street							
		San Francis	sco, CA 94158							
	PURPOSE	(a) Category (Se	ee Categories listed at the	top of this schedule)	(b)	Description				
	OF	Travel In Di		,			outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE					ш		officeholder living		
						Travel service	es (	during sessi	on	
	Complete ONLY if direct		ceholder name	Office sou	ıght			Office he	eld	
	expenditure to benefit C/OI	<b>⊣</b>								

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 61/66 Rpt: 65/71	2 FILER NAME Harris, Cody J. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00082156
4	Date 02/27/2023	5 Payee name Uber
6	Amount (\$) \$22.89	7 Payee address; City; State; Zip Code 1515 Third Street
8	PURPOSE OF EXPENDITURE	San Francisco, CA 94158  (a) Category (See Categories listed at the top of this schedule) Travel In District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel services during session
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 02/27/2023	Payee name Uber
	Amount (\$) \$37.57	Payee address; City; State; Zip Code  1515 Third Street  San Francisco, CA 94158
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel services during session
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 04/04/2023	Payee name Uber
	Amount (\$) \$7.90	Payee address; City; State; Zip Code 1515 Third Street
		San Francisco, CA 94158
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel services during session
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Credit Card Payment	The Instruction Guide explains how to complete	te this form.
1	Total pages Schedule F1: Sch: 62/66 Rpt: 66/71	2 FILER NAME Harris, Cody J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00082156
4	Date 04/14/2023	5 Payee name Uber	
6	Amount (\$) \$15.22	7 Payee address; City; State; Zip Code 1515 Third Street San Francisco, CA 94158	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel services during session
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 04/21/2023	Payee name Uber	
	Amount (\$) \$8.76	Payee address; City; State; Zip Code 1515 Third Street  San Francisco, CA 94158	
	PURPOSE OF EXPENDITURE	Travel In District	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel services during session
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 05/22/2023	Payee name Uber	
	Amount (\$) \$11.95	Payee address; City; State; Zip Code 1515 Third Street	
		San Francisco, CA 94158	
	PURPOSE OF EXPENDITURE	Travel In District	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel services during session
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comp	olete this form.
1	Total pages Schedule F1: Sch: 63/66 Rpt: 67/71	2 FILER NAME Harris, Cody J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00082156
4	Date 05/31/2023	5 Payee name Uber	
6	Amount (\$) \$24.47	7 Payee address; City; State; Zip Code 1515 Third Street San Francisco, CA 94158	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel services during session
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sough	t Office held
	Date 02/15/2023	Payee name VLK Productions	
	Amount (\$) \$1,650.00	Payee address; City; State; Zip Code 1085 NE CR 3020	
	PURPOSE OF EXPENDITURE	Kerens, TX 75144  (a) Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship for county rodeo
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sough	t Office held
	Date 01/19/2023	Payee name Wall Street Journal	
	Amount (\$) \$42.21	Payee address; City; State; Zip Code 1211 Avenue of the Americas	
		New York, NY 10036	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign subscription
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expen- Legal Services  The Instruction Guide e	Salaries/\	Vages	/Contract Labor		Travel Out of Dis OTHER (enter a	trict category not listed above)	
┢	Total marca Cabadula F1.	La ELLED NAME	_	-			<u> </u>	Ellas ID	(Ethica Commission Filer	٥)
_	Total pages Schedule F1: Sch: 64/66 Rpt: 68/71		= ly J. (The Honorable	)			3	Filer ID 00082156	(Ethics Commission Filer	5)
4	Date	5 Payee name	1							
	02/21/2023	Wall Street								
ᆫ	02/21/2023	Wall Street	Journal							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode					
l	\$42.21	1211 Aven	ue of the Americas							
l										
l		Name	NIV 10000							
		New York,	NY 10036							
8	PURPOSE	(a) Category (S	see Categories listed at the top	of this schedule)	(b)	Description				
l	OF		head/Rental Expens			Check if travel	outsi	de of Texas. Com	plete Schedule T.	
l	EXPENDITURE		•			Check if Austin	, TX,	officeholder living	expense	
l						Campaign su	ıbs	cription		
l										
9	Complete ONLY if direct	L Candidate/Off	iceholder name	Office sou	ıaht			Office he	7ld	
ľ	expenditure to benefit C/O		iccholder hame	Office 30t	igiit			Office In	,iu	
	·									
	Date	Payee name	!							
	03/20/2023	Wall Street	Journal							
H	Amount (\$)	Payee addre	ess; City;	State; Zip Co	nde					
l	\$42.21	1 1	•	Otato, Zip ot	Juo					
	\$42.21	1211 Aven	ue of the Americas							
		New York,	NY 10036							
H	PURPOSE	(a) Category (a	see Categories listed at the top of		(b)	Description				
l	OF				(~)	_	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	Office Over	rhead/Rental Expens	E		<b>=</b>		officeholder living		
						Campaign su	ıbs	cription		
						- annipongri - an				
L	Operation ONE Wife Street	0		04:				Off: I-	.1.4	
	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office sou	ignt			Office he	eid	
	experientare to benefit eyes	•								
	Date	Payee name	:							
	04/19/2023	Wall Street	Journal							
H	Amount (¢)	Payee addre		State: Zip Co	ndo.					
	Amount (\$)	l ´		State, Zip Ct	oue					
	\$42.21	1211 Aven	ue of the Americas							
		New York,	NY 10036							
$\vdash$	PURPOSE				(h)	Description				
l	OF		see Categories listed at the top		(0)		nutei	de of Texas. Com	nlete Schedule T	
l	EXPENDITURE	Office Over	head/Rental Expens	е				officeholder living		
						Campaign su			схрепос	
						Campaign su	ادرا	on puon		
L										
l	Complete ONLY if direct		iceholder name	Office sou	ıght			Office he	eld	
1	expenditure to benefit C/O	П								
Г										
1										

#### SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 65/66 Rpt: 69/71	Harris, Cody J. (The Honorable) 00082156
4	Date	5 Payee name
	05/17/2023	Wall Street Journal
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$42.21	1211 Avenue of the Americas
		New York, NY 10036
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign subscription
		- Campaign casconpain
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitate to betterit eyer	
	Date	Payee name
	06/14/2023	Wall Street Journal
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$42.21	1211 Avenue of the Americas
		New York, NY 10036
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign subscription
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨		_
	Date	Payee name
	01/06/2023	Walmart
	Amount (\$)	Payee address; City; State; Zip Code
	\$264.13	2223 S Loop 256
		Palestine, TX 75801
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign office supplies
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiencies to benefit C/OI	•

## SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Cor	mmittee	Fees Food/Beverage Expense Gift/Awards/Memorials E. Legal Services	kpense	Polling Expens Printing Expens Salaries/Wages	se s/Contract Labor		Travel in District Travel Out of Dis	
ᆫ	· 	_		The Instruction Guid	de explains l	now to compl	ete this form.			
1	Total pages Schedule F1:	2						3	Filer ID	(Ethics Commission Filers)
	Sch: 66/66 Rpt: 70/71		Harris, Coo	ly J. (The Honora	ble)				00082156	
4	Date	5	Payee name	)						
l	06/05/2023			Lock & Key						
<u>ا</u>	Amount (\$)	7	Payee addre		State.	Zip Code				
ľ	\$216.50	ľ			State,	Zip Code				
l	Φ210.50		1722 Chipo	.0 DI						
l										
l			Tyler, TX 7	5703						
8	PURPOSE	(a)	Category (S	See Categories listed at the	top of this sche	edule) (b)	Description			
l	OF EVENDITUE			rhead/Rental Expe				outsi	ide of Texas. Com	plete Schedule T.
l	EXPENDITURE			•			Check if Austin	n, TX	, officeholder living	g expense
l							Campaign of	fice	repair serv	ices
9	Complete ONLY if direct	. (	Candidate/Off	ficeholder name	C	office sought			Office he	eld
	expenditure to benefit C/O	Н								
l										
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# **PURCHASE OF INVESTMENTS FROM POLITICAL** SCHEDULE F3 **CONTRIBUTIONS** 1 Total pages Schedule F3: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 71/71 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Harris, Cody J. (The Honorable) 00082156 5 Name of person from whom investment is purchased 02/24/2023 **Edward Jones** 6 Address of person from whom investment is purchased; City; State; Zip Code 1625D South Loop 256 Palestine, TX 75801 Description of investment Purchase of Sunflower Bank CD 8 Amount of investment (\$) 50,000.00