CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1	Filer ID (Eth 00080276	ics Commission Filers)	 Total pages filed: 112 		_	OFFICE US	SEONLY	
						Date Received		
3	CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Lynn D.		MI	ELECTRONICAL 07/25/2023	LY FILED	
		NICKNAME	LAST		SUFFIX			
			Stucky			Date Hand-delivered or D	ate Postmarked	
4	ORIGINAL	January 15	Runoff	Other (sp	ecify)	Date Hand-delivered of L	ale ruslinaikeu	
	REPORT TYPE	X July 15	Exceeded modified	reporting limit		Receipt #	Amount	
		30th day before election	15th day after cam					
		8th day before election	appointment (office	,,		Date Processed		
5	ORIGINAL PERIOD	Month Day Yea	ar	Month Day	Year	Date Imaged		
	COVERED	01/01/2023	THROUGH	06/30/2023				
6	EXPLANATION OF (CORRECTION				-		
		ned to a new online donatio In has set up new procedur					person making the	
7	AFFIDAVIT		and	ear, or affirm, under pe correct.			eport is true	
			Che	ck the box next to any	and all applicab	le statements:		
			X	Semiannual reports was made in good fai misrepresent the info	ith and without a	an intent to mislead		
			X	Other reports: I surport not later than t that the report as orig swear, or affirm, that filed was made in goo	he 14th busines jinally filed is ina any error or om	ss day after the date accurate or incomple	I learned ete. I	
				The H	Honorable Lyr	n D. Stucky		
				Signatur	e of Candidate	or Officeholder		
	AFFIX NUTARY ST	AMP / SEAL ABOVE						
	Sworn to and subso	ribed before me, by the sai	d		, this th	ie	day	
		, 20, to cer						
	Signature of offic	er administering oath	Printed name of of	ficer administering oat	h T	itle of officer admini	stering oath	
			ded To Report A	nd Explain Corre		ort Form		
Fo	rms provided by Texas Ethics Commission www.ethics.state.tx.us V3.5.1.a18ea2ca							

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instructi	on Guide explains how to con	nplete this form.	1 Filer ID (Ethics Comm 00080276		2 Total pages	filed: 112
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		USE ONLY
OFFICEHOLDE		Lynn D.			OFFICE	USE UNL I
NAME		Lynn D.			Date Received	
					ELECTRONI	CALLY FILED
	NICKNAME	LAST		SUFFIX	. 07/25/2023	
	NICKNAME			SUFFIX	01720/2020	
		Stucky				
4 CANDIDATE /	ADDRESS / PO BOX; A	PT / SUITE #; CI	TY;	ZIP CODE	Date Hand-delivere	d or Date Postmarked
OFFICEHOLDE						
MAILING	F.O. B0x 404				Receipt #	Amount
ADDRESS						
Change of Addre	Denton, TX 76202				Data Discoursed	
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	_	
TREASURER	Mr.	Robert D.				
NAME						
	NICKNAME	LAST		SUFFIX		
		Seay				
6 CAMPAIGN	STREET ADDRESS (NO	PO BOX PI FASE)	ΔP ⁻	T / SUITE #; CITY;	S	TATE; ZIP CODE
TREASURER	902 N. Locust		,		0	
ADDRESS	902 N. LOCUSI					
(Residence or Busine	ss)					
	Denton, TX 76201					
7 CAMPAIGN	AREA CODE PH	ONE NUMBER	EXTENSION			
TREASURER	(940) 387-8563 x21					
PHONE	(340) 001 0000 x21					
8 REPORT TYPE					1 Eth dow offer	aamnaign traagurar
	January 15	30th day befor		Runoff		campaign treasurer officeholder only)
	X July 15	8th day before	election	Exceeded modified	-	Attach C/OH-FR)
				reporting limit		
9 PERIOD COVERED	Month Day Yea			Month Day	Year	
COVERED	01/01/2023	I	HROUGH	06/30/202	3	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Yea	ar 🛛 🗙	Primary	Runoff	Other	
	03/05/2024					
			General	Special		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)	
	State Representative D	istrict 64		State Representa		1
		60	TO PAGE 2			
		60				
Forms provided by	Texas Ethics Commission	www.e	thics.state.tx.u	S	Ver	sion V3.5.1.a18ea2ca

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

13 C / OH NAME

FORM C/OH **COVER SHEET PG 2** 3 of 112

14 Filer ID

13 C / OH NAME	Stucky, Lynn D. (The Honorable) 14 Filer ID 00080276			(Ethics Commission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to d officeholders are required to report this information	he candidate's or office	eholder's knowledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	ŝS		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00	
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	i)	\$ 28,224.26	
EXPENDITURE TOTALS					
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 102,092.10	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$ 254,226.94	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS	OF THE LAST DAY	\$ 0.00	
17 AFFIDAVIT					
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.			
		The Hono	orable Lynn D. Stuck	ζ ν	
			Candidate or Officeho	-	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
Sworn to and subsc	ribed before me, by the c	aid	this the	day	
		ertify which, witness my hand and seal of office.	, uiio uie	uay	
Signature of offic	cer administering	Printed name of officer administering	Title of office	r administering oath	
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V3.5.1.a18ea2ca	

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 4 of 112 19 Filer ID 18 FILER NAME (Ethics Commission Filers) 00080276 Stucky, Lynn D. (The Honorable) **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 26,355.00 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 1,869.26 \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ З. 4. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 86,272.16 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. 15,819.94 \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. X \$ 389.70 TO FILER

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/9 Rpt: 5/112	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Stucky, Lynr	n D. (The Honorable)			00080276	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/30/2023	Belew, Paul				\$100.00
		6 Contributor address; City; State; Zip Code				
		Decatur, TX 76234				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/22/2023	Ben E. Keith Company Texas PAC				\$1,500.00
		Contributor address; City; State; Zip Code				
		Fort Worth, TX 76102				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/21/2023	Butler, J Carley				\$150.00
		Contributor address; City; State; Zip Code				
		Avotion TV 70746				
	Drincinal occi	Austin, TX 78746 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Pilitipai occu)		
-	Date	Full name of contributor Out-of-state PAC (ID#:)	I	Amount of Contribution (\$)	
	06/24/2023	Campbell, Patsey	/		Allount of Contribution (+)	\$25.00
	00/2	Contributor address; City; State; Zip Code				*= *···
		Contributor address, Gity, State, Zip Code				
		Sanger, TX 76266				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	- 5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2023	Campos, Lorena				\$250.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 2/9 Rpt: 6/112
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Stucky, Lynr	n D. (The Honorable)		00080276
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
06/26/2023	Coleman, Hugh		\$25.00
I	6 Contributor address; City; State; Zip Code		1
	Denton, TX 76205		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	3)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/29/2023	Collins, TL		\$25.00
I	Contributor address; City; State; Zip Code		1
	Sanger, TX 76266	1 <u>.</u>	<u> </u>
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
06/21/2023	Dewitt Public Affairs, LLC	/	\$500.00
00,22,232	Contributor address; City; State; Zip Code		
	Austin, TX 78750		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)
		<u> </u>	1
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/21/2023	Donahue, Donna		\$500.00
	Contributor address; City; State; Zip Code		
	Jonestown, TX 78645		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/30/2023	Donnelly, David		\$100.00
	Contributor address; City; State; Zip Code		1
	Double Oak, TX 75077		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	e)
г Шоры оооч			»)
	/	<u> </u>	

	The Instru	ction Guide explains how to comp	lete this for	m.	1	Total pages Schedule A1: Sch: 3/9 Rpt: 7/112	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		D. (The Honorable)			-	00080276	,
4	Date	5 Full name of contributor out-of-st	ate PAC (ID#:)	7	Amount of Contribution (\$)	
	06/29/2023	Estill, Sharon					\$1,000.00
		6 Contributor address; City; State; Zip Coo					
		Argyle, TX 76226					
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions Retired	5)		
F	Date	Full name of contributor out-of-st	ate PAC (ID#:)		Amount of Contribution (\$)	
	06/27/2023	Faegre, Creeda					\$25.00
		Denton, TX 76207					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	- 5)		
⊨	Date	Full name of contributor out-of-st	ate PAC (ID#:)		Amount of Contribution (\$)	
	06/29/2023	Gibson, Amanda					\$25.00
		Contributor address; City; State; Zip Cod					
		Denton, TX 76210					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Date	Full name of contributor 🛛 out-of-st	ate PAC (ID#:)		Amount of Contribution (\$)	
	06/26/2023	Hart, Bob					\$25.00
		Contributor address; City; State; Zip Coo					
		Argyle, TX 76226					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor 🔲 out-of-st	ate PAC (ID#:)		Amount of Contribution (\$)	
	06/21/2023	IBAT PAC					\$1,000.00
		Contributor address; City; State; Zip Cod	le				
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

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The Instru	ction Guide explains how to complete this f	orm.		Fotal pages Schedule A1: Sch: 4/9 Rpt: 8/112	
2 FILER NAME			3 F	Filer ID (Ethics Commission	n Filers)
	n D. (The Honorable)			00080276	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 /	Amount of Contribution (\$)	
06/26/2023	Johnson, Gary				\$100.00
	6 Contributor address; City; State; Zip Code				
	Argyle, TX 76226				
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Date	Full name of contributor out-of-state PAC (ID#:)	ļ	Amount of Contribution (\$)	
06/25/2023	Jones, Karen				\$25.00
	Contributor address; City; State; Zip Code		1		
	Sanger, TX 76266				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
Date	Full name of contributor out-of-state PAC (ID#:)	ŀ	Amount of Contribution (\$)	
06/30/2023	Jones, Tweedi				\$100.00
	Contributor address; City; State; Zip Code		1		
	Sanger, TX 76266				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Date	Full name of contributor out-of-state PAC (ID#:)	ļ	Amount of Contribution (\$)	
06/29/2023	Klughart, Kevin				\$200.00
	Contributor address; City; State; Zip Code		1		
	Denton, TX 76210				
	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Attorney		Self			
Date	Full name of contributor out-of-state PAC (ID#:)	ļ	Amount of Contribution (\$)	
06/30/2023	Koeppen, Douglas				\$200.00
	Contributor address; City; State; Zip Code		1		
	Sanger, TX 76266				
	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Retired		Retired			

	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/9 Rpt: 9/112	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Stucky, Lynr	D. (The Honorable)				00080276	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/26/2023	Lavelle, Mike					\$25.00
		6 Contributor address; City; State; Zip Code					
		Denton, TX 76209					
8	Principal occu	I pation / Job title (See Instructions))	9 Employer (See Instructions	<u> </u>		
╞	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/29/2023	Lovelace, Carianne					\$100.00
		Contributor address; City; Sta	ate: Zip Code				
		Lake Dallas, TX 75065					
	Principal occu	I pation / Job title (See Instructions))	Employer (See Instructions	<u> </u>		
	-	· ·					
⊨	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/23/2023	Miller, Sandra		,		,	\$100.00
		Contributor address; City; Sta	ate [,] 7in Code				
		Sanger, TX 76266					
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	5)		
╞	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/23/2023	Richardson, Jack					\$25.00
			ate: Zip Code				
			·····, 1				
		Sanger, TX 76266					
	Principal occu	pation / Job title (See Instructions)	1	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/29/2023	Riley, Linda					\$500.00
		Contributor address; City; Sta	ate; Zip Code				
		-					
		Denton, TX 76207					
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	5)		
	Owner			Roselawn Memorial Par	k		
\vdash							

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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 6/9 Rpt: 10/112	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		n D. (The Honorable)			00080276	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/21/2023	Shannon, Clyde				\$1,000.00
	I	6 Contributor address; City; State; Zip Code	,	1		
		Round Mountain, TX 78663-8604				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Government	Affairs	Self			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/29/2023	Sikich, Brian				\$50.00
	I	Contributor address; City; State; Zip Code		1		
		Argyle, TX 76226				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	」 s)		
				.,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Τ	Amount of Contribution (\$)	
	06/26/2023	Smith, Patrick	/			\$200.00
	00,20,2022	Contributor address; City; State; Zip Code		-		Ψ L 00.0.
		Continuation address, City, State, Zip Code				
		Denton, TX 76209				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>د)</u>		
	1 1110.000 2222			"		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/29/2023	Stucky, Alan				\$200.00
		Contributor address; City; State; Zip Code		1		
		Rhome, TX 76078				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Vice Chance	ellor and General Counselor	University of North Texa	as S	System	
	Date	Full name of contributor out-of-state PAC (ID#:	·)	Γ	Amount of Contribution (\$)	
	06/30/2023	Swain, Connie				\$100.00
	I	Contributor address; City; State; Zip Code		1		
		Alvord, TX 76225				
\vdash	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	-					
⊢						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 7/9 Rpt: 11/112
2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Stucky, Lynr	n D. (The Honorable)			00080276
4	Date	5 Full name of contributor out-of-state PAC (ID#:	.)	7	Amount of Contribution (\$)
	06/29/2023	Test, Stacie			\$100.00
		6 Contributor address; City; State; Zip Code			
		Flower Mound, TX 75028			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u>ا</u> ة)	
⊨	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)
	06/20/2023	Texans For Lawsuit Reform PAC	/		\$10,000.00
		Contributor address; City; State; Zip Code			
		Contributor address, City, State, Zip Code			
		Austin, TX 78701			
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)	
	·				
⊨	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>		Amount of Contribution (\$)
	06/29/2023	Texas Veterinary Medical Assn. PAC			\$5,000.00
	00/20/2020	Contributor address; City; State; Zip Code			\$0,000.00
		Contributor address, City, State, Zip Code			
		Austin, TX 78754			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	. 5)	
F	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)
	06/26/2023	Trail, Chris			\$50.00
		Contributor address; City; State; Zip Code			
		Bedford, TX 76021			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/26/2023	Vennerholm, Mark			\$100.00
		Contributor address; City; State; Zip Code			
		Sanger, TX 76266			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Sales Engine	eer	Teradyne, Inc		
⊢			1		
1					

					_		
	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/9 Rpt: 12/112	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Stucky, Lynr	n D. (The Honorable)				00080276	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	06/29/2023	Walling, Peter	—				\$200.00
		6 Contributor address; City; S	State; Zip Code		1		
		Bartonville, TX 76226			L		
8	Principal occu	upation / Job title (See Instructions	\$)	9 Employer (See Instructions	;)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/20/2023	Weekley, Richard					\$1,500.00
		Contributor address; City; S		1	1		
	<u> </u>	Houston, TX 77055-7211			Ļ		
		Ipation / Job title (See Instructions	š)	Employer (See Instructions	;)		
	Commerciai	Property Developer		Weekley Properties	—		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/30/2023	White, Donald					\$100.00
		Contributor address; City; S	tate; Zip Code				
		Denton, TX 76205					
	Principal occu	upation / Job title (See Instructions	.c)	Employer (See Instructions	<u> </u>		
	Finopa oooa	pation / oob the (oce mondelience	<i>s)</i>		ッ		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/21/2023	Wholesale Beer Distribute					\$1,000.00
		Contributor address; City; S			ł		
			·····, p ·				
		Austin, TX 78701					
	Principal occu	upation / Job title (See Instructions	s)	Employer (See Instructions	;)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	06/30/2023	Wilson, Ben					\$25.00
		Contributor address; City; S	tate; Zip Code	1	1		
	<u></u>	Denton, TX 76209		1	Ĺ		
	Principal occu	upation / Job title (See Instructions	š)	Employer (See Instructions	5)		
L							

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 9/9 Rpt: 13/112 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Stucky, Lynn D. (The Honorable) 00080276 5 Full name of contributor Amount of Contribution (\$) 4 Date out-of-state PAC (ID#: 7 06/22/2023 \$5.00 Woodard, Suzann 6 Contributor address; City; State; Zip Code Argyle, TX 76226 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$)) 06/29/2023 \$100.00 Wright, Scott Contributor address; City; State; Zip Code Sanger, TX 76266 Principal occupation / Job title (See Instructions) Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	ction Guide explains how to complete this f		1 Total pages Schedule A2: Sch: 1/2 Rpt: 14/112						
2 FILER NAME		3 Filer ID (Ethics Commission Filers)							
	n D. (The Honorable)		00080276						
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$							
5 Date 06/21/2023	 6 Full name of contributor out-of-state PAC (ID#: Blackridge 7 Contributor address; City; State; Zip Code)		Amount of 9 In-kind contribution contribution (\$) description \$350.00 Email blasts for reception					
	Austin, TX 78701			Check if travel outside of Texas. Complete Schedule T.					
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUI	DICIAL) (See instructions)					
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FO	R JUDICIAL) (See instructions)					
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's s	spouse (if any) (FOR JUDICIAL)					
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)								
Date 06/21/2023	Full name of contributor out-of-state PAC (ID#: Legislative Solutions Contributor address; City; State; Zip Code)		Amount of In-kind contribution contribution (\$) description \$275.00 Event coordination fee					
	Austin, TX 78763			Check if travel outside of Texas. Complete Schedule T.					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUI						
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	title (FOR JUDICIAL) (See instructions)						
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)						
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)								
Date 06/01/2023	Full name of contributor out-of-state PAC (ID#: Texas Veterinary Medical Assn. PAC Contributor address; City; State; Zip Code)		Amount of In-kind contribution contribution (\$) description \$619.99 Food and room rental for Wise County event					
	Austin, TX 78754	Check if travel outside of Texas. Complete Schedule T.							
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUI	DICIAL) (See instructions)					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)							
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)							
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)									

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A	\2
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	The Instru	ction Guide explains how to complete this f	1	1 Total pages Schedule A2: Sch: 2/2 Rpt: 15/112				
2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Stucky, Lyn	n D. (The Honorable)			00080276			
4	TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$					
5	Date 03/02/2023	 Full name of contributor out-of-state PAC (ID#: Texas Veterinary Medical Assn. PAC Contributor address; City; State; Zip Code Austin, TX 78754)	8	Amount of contribution (\$) 9 In-kind contribution description \$624.27 Hotel room at TVMA annual conference Check if travel outside of Texas. Complete Schedule T.			
10	Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JU	DICIAL) (See instructions)			
12	Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title (FOR JUDICIAL) (See instructions)					
14	Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's	spouse (if any) (FOR JUDICIAL)			
16	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains h	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ains how to complete this form.			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME		-	3	Filer ID (Ethics Commission Filers)		
	Sch: 1/27 Rpt: 16/112		Stucky, Lynn D. (The Honorable)				00080276		
4	Date 04/17/2023		Payee name Amazon.Com						
6	Amount (\$) \$5.30								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Accidental Charge (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Accidental charge. Awaiting reimburseme					officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice sou	ht		Office held		
	Date		Payee name						
	04/01/2023		Amazon.Com						
	Amount (\$) \$15.93								
OF Accidental charge Che EXPENDITURE Accidental charge Che				Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense ge. Awaiting reimbursement			
	Complete ONLY if direct expenditure to benefit C/OF						Office held		
	Date		Payee name						
	05/01/2023		Amazon.Com						
	Amount (\$) \$15.93		Payee address; City; State; 410 Terry Ave North	Zip Coo	le				
			Seattle, WA 98109						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Accidental charge	dule)	Check if Austin	, тх,	de of Texas. Complete Schedule T. officeholder living expense ge. Awaiting reimbursement		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice sou	ht		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 2/27 Rpt: 17/112	Stucky, Lynn D. (The Honorable)	00080276				
4	Date 04/08/2023	5 Payee name American Legion Post 71					
6	Amount (\$) \$330.00	7 Payee address; City; State; Zip Code 2501 Spencer Rd Denton, TX 76205					
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign charitable contribution							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	05/23/2023	American Legislative Exchange Council					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$200.00	2900 Crystal Drive					
		Suite 600 Arlington, VA 22202					
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense mbership to American Legislative uncil				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	06/28/2023	Anedot					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$8.70	1340 Poydras Street					
		Suite 1770					
		New Orleans, TX 70112					
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense Campaign donation				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event ExpenseLoan Repayment/ReimbursementFeesOffice Overhead/Rental ExpenseFood/Beverage ExpensePolling ExpenseGift/Awards/Memorials ExpensePrinting Expense	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:	PILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 3/27 Rpt: 18/112	Stucky, Lynn D. (The Honorable)	00080276						
4	Date 06/26/2023	Payee name Anedot							
6	Amount (\$) \$23.10	7 Payee address; City; State; Zip Code \$23.10 1340 Poydras Street Suite 1770 New Orleans, TX 70112							
8	8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online fee for campaign donation								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	06/29/2023	Anedot							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$103.30	1340 Poydras Street							
		Suite 1770							
		New Orleans, TX 70112							
	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. , TX, officeholder living expense r campaign donation						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	06/30/2023	Anedot							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$41.40	1340 Poydras Street							
		Suite 1770							
		New Orleans, TX 70112							
	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. , TX, officeholder living expense r campaign donation						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			Fees Office Overhead/Rental Expense Tr Food/Beverage Expense Polling Expense Tr By - Gift/Awards/Memorials Expense Printing Expense Tr					Travel in District Travel Out of District	oment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (E	Ethics Commission Filers)	
	Sch: 4/27 Rpt: 19/112		Stucky, Lynn D. (The Honorable)					00080276		
4	Date	5	Payee name							
	01/18/2023		Bank of America							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de					
	\$4,881.76		PO Box 851001							
			Dallas, TX 75285							
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description				
	EXPENDITURE		Credit Card Payment					de of Texas. Complete officeholder living exp		
									or campaign and	
						officeholder e	expe	enses reported	on Schedule F-4	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH										
	Date		Payee name							
	02/21/2023		Bank of America							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$4,139.30		PO Box 851001							
			Dallas, TX 75285							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description				
	EXPENDITURE		Credit Card Payment			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
							ayment on credit card used for campaign and			
									on Schedule F-4	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name Office sought					Office held		
	Date		Payee name							
	03/14/2023		Bank of America							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$2,625.26		PO Box 851001							
			Dallas, TX 75285							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description				
	EXPENDITURE		Credit Card Payment					de of Texas. Complete officeholder living exp		
									or campaign and	
									on Schedule F-4	
-	Complete ONLY if direct	L(Candidate/Officeholder name C	Office sou	ght			Office held		
	expenditure to benefit C/OI									
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By- Candidate/Officeholder/Political Credit Card Payment			Fees Office C Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printing	Overhea Expens J Expen s/Wage	ise s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	1	· · · · · ·	oompi		2	Filer ID (Ethics Commission Filers)	
T	Sch: 5/27 Rpt: 20/112	I	2 FILER NAME 3 Filer ID (Ethics Commission Stucky, Lynn D. (The Honorable) 00080276					
4	Date	5	Payee name					
	05/15/2023		Bank of America					
6	Amount (\$)	7	Payee address; City; State; Zip C	Code				
	\$4,040.26		PO Box 851001					
			Dallas, TX 75285					
8	PURPOSE OF		Category (See Categories listed at the top of this schedule)	(b)	Description			
	EXPENDITURE		Credit Card Payment				de of Texas. Complete Schedule T. officeholder living expense	
							dit card used for campaign and	
							enses reported on Schedule F-4	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Office so	ought			Office held	
	Date		Payee name					
	06/15/2023		Bank of America					
	Amount (\$)		Payee address; City; State; Zip C	Code				
	\$2,290.65		PO Box 851001	oouc				
	φ2,290.05		PO B0X 851001					
			Dallas, TX 75285					
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE		Credit Card Payment		Check if travel	outsi	de of Texas. Complete Schedule T.	
	EXPENDITORE		-				officeholder living expense	
							lit card used for campaign and enses reported on Schedule F-4	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office so	ought			Office held	
	Date		Payee name					
	04/08/2023		Born 2 Be Therapeutic Equestrian Center					
	Amount (\$)		Payee address; City; State; Zip C	Codo				
	\$600.00		12146 FM 2450	Jue				
	\$000.00		12140 FM 2450					
			Sanger, TX 76266					
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF		Contributions/Donations Made By			outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE		Candidate/Officeholder/Political Committee				officeholder living expense	
					Campaign ch	arit	able contribution	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name Office so	ought			Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Office Overhead/Rental Expense Polling Expense Cit/Awards/Memorials Expense Printing Expense T				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	e		
1	Total pages Schedule F1:	2				-		3	Filer ID (Ethics Commission Fil	ers)
-	Sch: 6/27 Rpt: 21/112		Stucky, Lynn D. (The Honorable)				-	00080276	/
4	Date 03/02/2023	5	Payee name Bridgeport Chamb	per of Commerce						
6	Amount (\$) \$50.00									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense Campaign annual membership dues for Brit chamber of Commerce Commerce					officeholder living expense al membership dues for Bridger	port				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officehold	er name	Office sou	ight			Office held	
	Date		Payee name							
	01/05/2023		Champions Rotar	y Club						
Amount (\$)Payee address;City;State;Zip Code\$224.50211 S Oak St										
	PUPPoor		Roanoke, TX 762	62		(4.)				
PURPOSE OF EXPENDITURE			Check if Austin, T				, TX,	utside of Texas. Complete Schedule T. TX, officeholder living expense embership dues for Rotary service		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officehold	er name	Office sou	ight			Office held	
	Date		Payee name							
	04/05/2023		Champions Rotar	y Club						
	Amount (\$) \$224.50		Payee address; 211 S Oak St	City; State	e; Zip Co	ode				
			Roanoke, TX 762	62						
	PURPOSE OF EXPENDITURE		Category (See Catego Fees	pries listed at the top of this sc	hedule)	(b)	Check if Austin	, тх,	de of Texas. Complete Schedule T. officeholder living expense Dership dues for Rotary service	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officehold	er name	Office sou	ight			Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursem Fees Office Overhead/Rental Expen Food/Beverage Expense Polling Expense Git/Awards/Memorials Expense Salaries/Wages/Contract Labo The Instruction Guide explains how to complete this form	Se Transportation Equipment & Related Expense Travel in District Travel Out of District Tr OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
-	Sch: 7/27 Rpt: 22/112	Stucky, Lynn D. (The Honorable)	00080276						
4	Date 02/20/2023	Payee name Champions Rotary Club							
6	Amount (\$) \$500.00								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign charitable contribution									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	02/13/2023	Chico Chamber of Commerce							
	Amount (\$) \$25.00	Payee address; City; State; Zip Code PO Box 533							
	PURPOSE OF EXPENDITURE	Campaigu	avel outside of Texas. Complete Schedule T. avel outside of Texas. Complete Schedule T. austin, TX, officeholder living expense a annual membership dues for the Chico of Commerce						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	01/13/2023	Davis, Tanya							
	Amount (\$) \$400.00	Payee address; City; State; Zip Code 14422 N FM 51							
		Decatur, TX 76234							
	PURPOSE OF EXPENDITURE		n avel outside of Texas. Complete Schedule T. austin, TX, officeholder living expense n contract labor						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment			Event Expense Loan Repa Fees Office Ove Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing Ex Legal Services Salaries/W The Instruction Guide explains how to co	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: 8/27 Rpt: 23/112		Stucky, Lynn D. (The Honorable)			-	00080276	
4	Date 01/27/2023	5	Payee name Davis, Tanya					
6	Amount (\$)	7	Payee address; City; State; Zip Co	de				
ľ	\$800.00	ľ	14422 N FM 51	ac				
			Decatur, TX 76234					
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE		Salaries/Wages/Contract Labor				de of Texas. Complete Schedule T.	
	LAFENDITORE						officeholder living expense	
					Campaign cor	ntra	act labor	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Office sou	ght			Office held	
	Date		Payee name					
	03/06/2023		Davis, Tanya					
	Amount (\$)	-	Payee address; City; State; Zip Co	aha				
	\$900.00		14422 N FM 51	uc				
	\$900.00		14422 N FM 51					
			Decatur, TX 76234					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description			
	EXPENDITURE		Salaries/Wages/Contract Labor				de of Texas. Complete Schedule T. officeholder living expense	
					Campaign cor			
					Campaign coi	illic	actiabol	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sou	ght			Office held	
⊨	Date		Payee name					
	03/28/2023		Davis, Tanya					
	Amount (\$)	-	Payee address; City; State; Zip Co	nde				
	\$1,000.00		14422 N FM 51	ao				
	φ <u>1</u> ,000.00							
			Decatur, TX 76234					
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE		Salaries/Wages/Contract Labor				de of Texas. Complete Schedule T.	
							officeholder living expense	
					Campaign cor	ntra	actiador	
	Complete ONLY if direct		Candidate/Officeholder name Office sou	ght		_	Office held	
	expenditure to benefit C/OI	H						

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Of Po Pri Sa	ffice Overh olling Expe inting Expe alaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schodula F1:	2					2	Filer ID (Ethics Commission Filers)				
1	Total pages Schedule F1: Sch: 9/27 Rpt: 24/112	2	Stucky, Lynn D. (The Honorable)				3	Filer ID (Ethics Commission Filers) 00080276				
4	Date	5	Payee name									
	05/15/2023		Davis, Tanya									
6	Amount (\$)	7	Payee address; City; Sta	te; Z	ip Cod	e						
	\$1,000.00		14422 N FM 51									
			Decatur, TX 76234									
8	PURPOSE	(a)	Category (See Categories listed at the top of this	schedul	e) (I	b) Description						
	OF EXPENDITURE		Salaries/Wages/Contract Labor					ide of Texas. Complete Schedule T.				
								, officeholder living expense				
						Campaign co	ontr	ractiabor				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offic	ce sough	nt		Office held				
	Date		Payee name									
	06/01/2023		Davis, Tanya									
	Amount (\$)		Payee address; City; Sta	te [.] 7	ip Cod	2						
	\$600.00		14422 N FM 51	, _								
	φ000.00		14422 10 1 10 31									
			Decatur, TX 76234									
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedul	e) (I	Description						
	EXPENDITURE		Salaries/Wages/Contract Labor					ide of Texas. Complete Schedule T. X, officeholder living expense				
						Campaign co						
						Campaign co	710					
	Complete ONIL V if direct		Candidate/Officeholder name	Offic		x +		Office held				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI			Onic	ce sough	it.		Onice neid				
	Date		Payee name									
	03/21/2023		Decatur Lions Club									
	Amount (\$)		Payee address; City; Sta	te; Z	ip Cod	e						
	\$125.00		207 N State St.									
			Decatur, TX 76234									
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedul	e) (I	Description						
	EXPENDITURE		Event Expense					side of Texas. Complete Schedule T.				
								a, officeholder living expense				
						Space rent 10	лС	Officeholder meeting with constituen				
_												
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Offic	ce sough	nt		Office held				
	onponditore to benefit 0/01	•										
		_			_		_					

			EXPENDITURE CAT	EGORI	ES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide exp		Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filer	s)
	Sch: 10/27 Rpt:		Stucky, Lynn D. (The Honorable)					00080276	
4	Date	5	Payee name				<u> </u>		
	04/15/2023		Denton County Republican Lincol	In Cabi	inet PA	2			
6	Amount (\$)	7	Payee address; City;	State;	Zip Coo	le			
	\$2,500.00		PO Box 50748						
			Denton, TX 76206						
8	PURPOSE OF	(a)	Category (See Categories listed at the top of	this sched	dule)	b) Description			
	EXPENDITURE		Fees					ide of Texas. Complete Schedule T. , officeholder living expense	
								to the Denton Co Republican	
						Lincoln Reag			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Of	fice soug	ht		Office held	
	Date		Payee name						
	01/06/2023		Denton County Republican Party						
	Amount (\$)		Payee address; City;	State;	Zip Coo	le			
	\$1,750.00		2921 Country Club Rd		·				
	. ,		#102						
			Denton, TX 76210						
	DUDDOCE		_						
	PURPOSE OF	(a)	Category (See Categories listed at the top of Fees	this sched	dule)	b) Description	outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		rees					, officeholder living expense	
								purchase at annual Denton Co.	
						Republican f	und	Iraiser	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Of	fice soug	ht		Office held	
	Date		Payee name						
	01/13/2023		Denton County Republican Party						
	Amount (\$)		Payee address; City;	State:	Zip Coo	le			
	\$500.00		2921 Country Club Rd	,					
			#102						
			Denton, TX 76210						
	BUBBOOF	(-)							
	PURPOSE OF	(a)	Category (See Categories listed at the top of		dule)	b) Description	outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political C		tee			, officeholder living expense	
						Campaign sp	on	sorship at annual Denton Co.	
						Republican f	und	draiser	
-	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Of	fice soug	ht		Office held	
-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overhead/Rental Expense Transportation Food/Beverage Expense Polling Expense Travel in Distr - Gift/Awards/Memorials Expense Printing Expense Travel Out of I							Travel in District Travel Out of Dis	Equipme strict	Expense ent & Related Expense ory not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Eth	ics Commission Filers)
	Sch: 11/27 Rpt:		Stucky, Lyn	n D. (The Ho	norable)					00080276		
4	Date	5	Payee name									
	04/10/2023		Denton Elks	6								
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Co	de					
	\$128.50		228 E Oak	St								
			Denton, TX	76201								
8	PURPOSE	(a)	Category (Se	e Categories listed	at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Fees							de of Texas. Com		
										officeholder living		ues to Denton Elks
								Club	mua		nip u	des to Denton Liks
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Offi	ceholder name	. (Office sou	ght			Office h	eld	
-	Date		Payee name									
	01/19/2023		Denton Tro	ohv House								
_	Amount (\$)	┝	Payee addres	-	State	; Zip Co	do					
	\$909.30		201 S Elm S		State	, ziρ cu	ue					
	φ909.30		201 3 LIII 3	51								
			Denton, TX	76201								
	PURPOSE OF	(a)	Category (Se	e Categories listed	at the top of this sch	nedule)	(b)	Description				
	EXPENDITURE		Advertising	Expense						de of Texas. Com officeholder living		
												d campaign hats
									00.0			a companyin nato
	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name	. (Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	06/01/2023		Denton Trop	ohy House								
	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	de					
	\$21.65		201 S Elm 9	St								
			Denton, TX	76201								
	PURPOSE	(a)	Category (Se	e Categories listed	at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Advertising	Expense						de of Texas. Com		
										officeholder living		
								Payment for (can	ipaign nam	e lag	5
	Complete ONL V if direct	Ľ	Candidata/Offi	ceholder name		Office cour	abt			Office h	old	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			cenoider Haiffe		Office sou	ynt			Unice h	eiu	
-												

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explain	Office Ov Polling E Printing E Salaries/	verhea xpens Expens Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2			•		3	Filer ID (Ethics Commission Filers	is)			
-	Sch: 12/27 Rpt:	2	Stucky, Lynn D. (The Honorable)					00080276	5)			
4	Date	5	Payee name									
	01/02/2023		Dresher, Lyle									
6	Amount (\$)	7	Payee address; City; Stat	e; Zip C	ode							
	\$200.00		5909 Tawakoni Dr									
			Argyle, TX 76226									
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description						
	OF EXPENDITURE		Salaries/Wages/Contract Labor	unculicy			outsi	ide of Texas. Complete Schedule T.				
	EXPENDITORE		-					, officeholder living expense				
						Campaign co	ontra	act labor				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ught			Office held				
	Date		Payee name									
	01/26/2023		Dresher, Lyle									
	Amount (\$)		Payee address; City; Stat	e; Zip C	ode							
	\$200.00		5909 Tawakoni Dr									
			Argyle, TX 76226									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this s Salaries/Wages/Contract Labor	chedule)	(b)	Check if Austir	ı, TX,	ide of Texas. Complete Schedule T. , officeholder living expense				
						Campaign co	Jin					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ught			Office held				
	Date		Payee name									
	03/06/2023		Dresher, Lyle									
	Amount (\$)		Payee address; City; Stat	e; Zip C	ode							
	\$200.00		5909 Tawakoni Dr	, <u>-</u> .p c	cuc							
			Argyle, TX 76226		_							
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description						
	OF EXPENDITURE		Salaries/Wages/Contract Labor				ı, TX,	ide of Texas. Complete Schedule T. , officeholder living expense ract labor				
-	Complete ONLY if direct	<u>_</u>	Candidate/Officeholder name	Office so	lunht			Office held				
	expenditure to benefit C/OF			Unice SU	uynt							
-												

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimburser Fees Office Overhead/Rental Expe Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Lab The Instruction Guide explains how to complete this form	nse Transportation Equipment & Related Expense Travel in District Travel Out of District or OTHER (enter a category not listed above)									
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)									
-	Sch: 13/27 Rpt:	Stucky, Lynn D. (The Honorable)	00080276									
4	Date 03/28/2023	^P ayee name Dresher, Lyle										
6	Amount (\$) \$200.00	Payee address; City; State; Zip Code 5909 Tawakoni Dr										
		Argyle, TX 76226										
8	PURPOSE OF EXPENDITURE		n travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense In contract labor									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held									
	Date	Payee name										
	05/11/2023	Dresher, Lyle										
	Amount (\$) \$200.00	Payee address; City; State; Zip Code 5909 Tawakoni Dr										
	PURPOSE	Argyle, TX 76226 Category (See Categories listed at the top of this schedule) (b) Description	n									
	OF EXPENDITURE	Salaries/Wages/Contract Labor	ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense In contract labor									
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held									
	Date	Payee name										
	06/01/2023	Dresher, Lyle										
	Amount (\$) \$200.00	Payee address; City; State; Zip Code 5909 Tawakoni Dr										
		Argyle, TX 76226										
	PURPOSE OF EXPENDITURE		n travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense In contract labor									
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held									

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overhead/Rental Expense Transportati Food/Beverage Expense Polling Expense Travel in Dis Gift/Awards/Memorials Expense Printing Expense Travel out o						Transportation I Travel in Distric Travel Out of Di				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Comr	nission Filers)	
	Sch: 14/27 Rpt:			D. (The Honor	able)					00080276	(,	
4	Date	5	Payee name										
	06/13/2023		Fossil Pointe										
6	Amount (\$)	7	Payee address	; City;	State	; Zip Co	de						
	\$500.00		7282 FM 51										
			Decatur, TX 7	6234									
8	PURPOSE	(a)	Category (See	Categories listed at th	e top of this sch	nedule)	(b)	Description					
	OF EXPENDITURE		Event Expens			,					nplete Schedule T.		
										officeholder livin			
								Deposit for s	port	ting clay ca	mpaign fund	raising event	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	holder name	(Dffice sou	ght			Office h	eld		
	Date		Payee name										
	03/27/2023		KC Strategies	LLC									
	Amount (\$)		Payee address	City;	State	; Zip Co	de						
	\$10,959.13		3571 Far Wes			· •							
	+=0,000.=0		#196										
				701									
			Austin, TX 78										
	PURPOSE OF	(a)		Categories listed at the	e top of this sch	nedule)	(b)	Description					
	EXPENDITURE		Advertising E	xpense							nplete Schedule T.		
								Check if Austin, TX, officeholder living expense Paid campaign consultant for communications to					
								donors and c					
	Complete ONLY if direct		Candidate/Office	holder name	(Office sour	nht			Office h	eld		
	expenditure to benefit C/OF						gin						
	Date	Γ	Payee name										
	05/04/2023		KC Strategies	LLC									
	Amount (\$)		Payee address	; City;	State	; Zip Co	de						
	\$10,959.13		3571 Far Wes	st Blvd									
			#196										
				701									
	BU BE 2 2 7		Austin, TX 78				<i>a</i> :						
	PURPOSE OF	(a)		Categories listed at the	e top of this sch	nedule)	(D)	Description	outo	do of Toyoo Con	nloto Schodula T		
	EXPENDITURE		Advertising E	xpense				Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
								Paid campaig				ations to	
								donors and c					
	Complete ONLY if direct	L(Candidate/Office	holder name	(Office sou	ght			Office h	eld		
	expenditure to benefit C/OI									2			
-													

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment											
	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)										
 *												
	Sch: 15/27 Rpt:	Stucky, Lynn D. (The Honorable) 00080276										
4	Date	5 Payee name										
	06/06/2023	KC Strategies LLC										
6	Amount (\$)	7 Payee address; City; State; Zip Code										
ľ	\$10,959.13	3571 Far West Blvd										
	φ10,959.15											
		#196										
		Austin, TX 78731										
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description										
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.										
	EXPENDITURE	Check if Austin, TX, officeholder living expense										
		Paid campaign consultant for communications to										
		donors and constituents										
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held										
ľ	expenditure to benefit C/OI											
	Date	Payee name										
	03/23/2023	Law Offices of Kevin C Stewart										
	Amount (\$)	Payee address; City; State; Zip Code										
	\$625.00	6801 Yaupon Drive										
	+0_0.00											
		Austin, TX 78759										
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description										
	OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.										
		Check if Austin, TX, officeholder living expense										
		Payment for legal services to review campaign filings										
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held										
	expenditure to benefit C/OI	1										
-	Date	Payee name										
	01/02/2023	Little Caesar's										
	Amount (\$)	Payee address; City; State; Zip Code										
	\$150.00	826 W University Dr										
		Denton, TX 76201										
_	DUDDOSE											
	PURPOSE OF	 (a) Category (See Categories listed at the top of this schedule) (b) Description (c) Description (c) Check if travel outside of Texas. Complete Schedule T. 										
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense										
		Reimburse Harold Jackson for pizza for the										
		community Martin Luther King flag football										
⊢	Complete ONILY 'C. I'											
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held										
		·										

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District							Equipment & Related Expense t			
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission Filers)	
	Sch: 16/27 Rpt:		Stucky, Lyr	nn D. (The F	lonorable)					00080276		
4	Date	5	Payee name	9								
	01/02/2023		Morris, Tor	iya								
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de					
	\$500.00		500 S. IH 3	-								
			#318									
			Denton, TX	(76205								
8	PURPOSE	(a)					(h)	Description				
ľ	OF	(4)		See Categories lis ages/Contra	ted at the top of this sch act I abor	nedule)	(5)		outsi	de of Texas. Corr	nplete Schedule T.	
	EXPENDITURE		Galaries/W	ages/contre				Check if Austin	, тх,	officeholder living	g expense	
								Campaign co	ntra	act labor		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	ficeholder nar	ne (Office sou	ght			Office h	eld	
	Date		Payee name	;								
	01/26/2023		Morris, Tor	iya								
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	de					
	\$500.00		500 S. IH 3	35E								
			#318									
			Denton, TX	76205								
	PURPOSE	(a)	Category (S	See Categories lis	ted at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE			ages/Contra		,					nplete Schedule T.	
										X, officeholder living expense		
								Campaign co	ntra	act lador		
	Complete ONLY if direct		Condidate/Of	ficeholder nar	mo (Office sou	abt			Office h	ald	
	expenditure to benefit C/OI		Januluale/On		ne (JIICE SOU	ym			Onice In	eiu	
	Data	-										
	Date 03/06/2023		Payee name Morris, Tor									
				-	Ctoto	. 712 0.2	ala					
	Amount (\$) \$500.00		Payee addre 500 S. IH 3		State	; Zip Co	ue					
	\$500.00			55E								
			#318									
			Denton, TX	(76205								
	PURPOSE OF	(a)			ted at the top of this sch	nedule)	(b)	Description				
	EXPENDITURE		Salaries/W	ages/Contra	act Labor					de of Texas. Com officeholder living	nplete Schedule T.	
								Campaign co			g oxponio	
	Complete ONLY if direct	L(Candidate/Off	ficeholder nar	ne (Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	H										

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhaed/Rental Expense Transe Food/Beverage Expense Polling Expense Travel y - Gift/Awards/Memorials Expense Printing Expense Travel						Transportation E Travel in District Travel Out of Dis	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District DTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission Filers)	
	Sch: 17/27 Rpt:		Stucky, Lyr	nn D. (The Hon	orable)					00080276		
4	Date	5	Payee name	•								
	03/28/2023		Morris, Tor	іуа								
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de					
	\$500.00		500 S. IH 3	5E								
			#318									
			Denton, TX	76205								
8	PURPOSE	(a)		See Categories listed at			(h)	Description				
Ĩ	OF	,		ages/Contract I		iedule)	()		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Galarioo, W	ages, contract i	-4501		İ	Check if Austin,	, TX,	officeholder living	j expense	
								Campaign co	ontra	act labor		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	ïceholder name	(Office sou	ght			Office he	eld	
	Date		Payee name	•								
	05/11/2023		Morris, Tor	іуа								
	Amount (\$)	┢	Payee addre	ess; City;	State	; Zip Co	de					
	\$500.00		500 S. IH 3	5E								
			#318									
			Denton, TX	76205								
	DUDDOCE						(1-)					
	PURPOSE OF	(a)		See Categories listed at		nedule)	(a) I	Description	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Salaries/w	ages/Contract I	Labor					officeholder living		
								ц Campaign co	ontra	act labor		
	Complete ONLY if direct	(Candidate/Off	iceholder name	(Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	Н										
⊨	Date		Payee name	•								
	06/01/2023		Morris, Ton									
	Amount (\$)		Payee addre	-	State	; Zip Co	de					
	\$500.00		500 S. IH 3		Oluio	, בוף כס	uo					
	\$000.00		#318									
				70005								
			Denton, TX	76205								
	PURPOSE OF	(a)		See Categories listed at		nedule)	(b)	Description				
	EXPENDITURE		Salaries/W	ages/Contract I	_abor					de of Texas. Com officeholder living	plete Schedule T.	
								Campaign co			Jexpense	
								- sinpaign 00				
	Complete ONLY if direct	Ļ	Candidate/Off	iceholder name	(Office sou	aht			Office he	əld	
	expenditure to benefit C/OI		Janundae/OII	isenoluer name	(5110C 30U	gin				Ju	

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Tr Food/Beverage Expense Polling Expense Tr Y - Gift/Awards/Memorials Expense Printing Expense Tr al Committee Legal Services Salaries/Wages/Contract Labor O The Instruction Guide explains how to complete this form.						Travel in District Travel Out of District	Transportation Equipment & Related Expense Travel in District			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics	Commission Filers)			
	Sch: 18/27 Rpt:		Stucky, Lynn D. (The Ho	norable)				00080276				
4	Date	5	Payee name									
	06/05/2023		Nemecek, Melissa									
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le						
	\$500.00		505 Green Valley Cove									
			Pflugerville, TX 78660									
8	PURPOSE OF	(a)	Category (See Categories listed		edule)	(b) Description						
	EXPENDITURE		Salaries/Wages/Contract	Labor		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
						Campaign co						
						Company of						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	C	Dffice sou	ht		Office held				
	Date		Payee name									
	01/27/2023		Overturf, Jordan									
	Amount (\$)		Payee address; City;	State;	Zip Co	le						
	\$500.00		15619 Pebble Bend Drive	9								
			Houston, TX 77068									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed Salaries/Wages/Contract		edule)		ı, ТХ,	de of Texas. Complete Scher officeholder living expense act labor	dule T.			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Dffice sou	ht		Office held				
	Date		Payee name									
	03/06/2023		Overturf, Jordan									
	Amount (\$)		Payee address; City;	State;	Zip Co	le						
	\$500.00		15619 Pebble Bend Drive	e								
			Houston, TX 77068									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed Salaries/Wages/Contract	•	edule)		ı, ТХ,	de of Texas. Complete Scher officeholder living expense act labor	dule T.			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Dffice sou	ht		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overhead/Rental Expense Tr Food/Beverage Expense Polling Expense Tr - Gift/Awards/Memorials Expense Printing Expense Tr - Gift/Awards/Memorials Expense Printing Expense Tr Committee Legal Services Salaries/Wages/Contract Labor Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. Tr						Transportation E Travel in District Travel Out of Dis			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)		
	Sch: 19/27 Rpt:		Stucky, Lyn	n D. (The Hor	norable)				00080276			
4	Date	5	Payee name									
	03/28/2023		Overturf, Jo	rdan								
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de					
	\$500.00		15619 Pebl	ole Bend Drive	9							
			Houston, T	K 77068								
8	PURPOSE OF	(a)		ee Categories listed		edule)	(b) Description					
	EXPENDITURE		Salaries/Wa	ages/Contract	Labor				ide of Texas. Com , officeholder living	•		
							Campaign			j expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Offi	ceholder name	C	Dffice sou	ght		Office he	əld		
	Date		Payee name									
	05/15/2023		Overturf, Jo	rdan								
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$500.00		15619 Pebl	ole Bend Drive	9							
			Houston, T	K 77068								
	PURPOSE OF EXPENDITURE	(a)		ee Categories listed a ages/Contract		iedule)		tin, TX	ide of Texas. Com , officeholder living act labor			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	(Dffice sou	ght		Office he	əld		
	Date		Payee name									
	06/01/2023		Overturf, Jo	rdan								
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$1,500.00			ble Bend Drive								
			Houston, T									
	PURPOSE OF EXPENDITURE	(a)		ee Categories listed a ages/Contract		iedule)		tin, TX	ide of Texas. Com , officeholder living act labor			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	(Office sou	ght		Office he	eld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide exp	Office O Polling E Printing Salaries	verhea Expens Expens /Wage	se s/Contract Labor		Solicitation/Fundraisin Transportation Equipn Travel in District Travel Out of District OTHER (enter a categ	nent & Related Expense			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Et	hics Commission Filers)			
	Sch: 20/27 Rpt:		Stucky, Lynn D. (The Honorable)					00080276				
4	Date	5	Payee name									
	06/01/2023		Overturf, Jordan									
6	Amount (\$)	7	Payee address; City;	State; Zip C	ode							
	\$2,500.00		15619 Pebble Bend Drive									
			Houston, TX 77068									
8	PURPOSE OF	(a)	Category (See Categories listed at the top of	this schedule)	(b)	Description						
	EXPENDITURE		Salaries/Wages/Contract Labor					de of Texas. Complete officeholder living expe				
						Campaign co			5150			
						1 5						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	-	Candidate/Officeholder name	Office so	ught			Office held				
	Date		Payee name									
	05/15/2023		Potbelly Corporation									
	Amount (\$)		Payee address; City;	State; Zip C	ode							
	\$157.00		2316 Guadalupe St									
			Austin, TX 78705									
	PURPOSE	(a)	Category (See Categories listed at the top of	this schedule)	(b)	Description						
	OF EXPENDITURE		Contributions/Donations Made By			Check if travel outside of Texas. Complete Schedule T.						
			Candidate/Officeholder/Political C	ommillee				e Chen Button f				
									y for sandwhiches			
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	Office so	ught			Office held				
	Date		Payee name									
	01/03/2023		Residential Condos at Brazos Pla	ce Owners	Asso	ciation						
	Amount (\$)		Payee address; City;	State; Zip C	ode							
	\$592.80		8310-1 N. Capital of Texas Highw									
			Suite 225	,								
			Austin, TX 78731									
	PURPOSE	(2)			(h)	Description						
	OF	(a)	Category (See Categories listed at the top of Office Overhead/Rental Expense	this schedule)		Description Check if travel	outsi	de of Texas. Complete	Schedule T.			
	EXPENDITURE		onice overneaumental Expense			X Check if Austin	, TX,	officeholder living expe	ense			
									or Officeholder's			
						apartment in	AU	sun				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ught			Office held				

EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Rep Office Ove Polling Ex Printing E Salaries/V	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)		
1	Total pages Schedule F1:	2					2	Filer ID	(Ethics Commission Filers)	
	Sch: 21/27 Rpt:	Ľ	Stucky, Lynn D. (The Honorable)				3	00080276		
1	Date	5								
-	03/09/2023	5 Payee name Residential Condos at Brazos Place Owners Association								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$1,185.60	8310-1 N. Capital of Texas Highway								
		Suite 225								
			Austin, TX 78731							
_					1					
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				
								-		
						Homeowner association dues for Officeholder's apartment in Austin				
9	Complete ONLY if direct	Complete ONLY if direct Candidate/Officeholder name Office sought Office held								
-	expenditure to benefit C/OH									
	Date		Payee name							
	03/27/2023 Residential Condos at Brazos Place Owners Association									
	Amount (\$) Payee address; City; State; Zip Code									
	\$592.80									
		Suite 225								
			Austin, TX 78731							
	PURPOSE OF									
	EXPENDITURE									
				Homeowner association dues for Officeholder's						
						apartment in Austin				
			Candidate/Officeholder name	Office sou	ight	Office held				
expenditure to benefit C/OH										
	Date		Payee name							
	04/28/2023 Residential Condos at Brazos Place Owners Association									
	Amount (\$) Payee address; City; State; Zip Code									
	\$884.60 8310-1 N. Capital of Texas Highway									
	Suite 225									
		Austin, TX 78731								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(D)	Description	outei	de of Texas, Com	nlete Schedule T	
	EXPENDITURE									
		Homeowner association dues for Officeholder's								
						apartment in				
-	Complete ONLY if direct	L(Candidate/Officeholder name	Office sou	l Iaht			Office he	eld	
	expenditure to benefit C/OI			2	9. n			2	-	
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	pense pense pens (pens /ages	e /Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 22/27 Rpt:		Stucky, Lynn D. (The Honorable)					00080276
4	Date	5	Payee name					
	05/31/2023		Residential Condos at Brazos Place O	wners A	SS0	ciation		
6	Amount (\$)	7	Payee address; City; State;	; Zip Co	de			
	\$592.80		8310-1 N. Capital of Texas Highway					
			Suite 225					
			Austin, TX 78731					
8	PURPOSE	(a)			(h)	Description		
ľ	OF	(4)	Category (See Categories listed at the top of this sche Office Overhead/Rental Expense	edule)	(0)		outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		onice overhead/tental Expense					officeholder living expense
								ociation dues for Officeholder's
						apartment in	Au	stin
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office sou	ght			Office held
	Date		Payee name					
	06/28/2023		TDCJ					
	Amount (\$)		Payee address; City; State;	; Zip Co	de			
	\$216.50		PO Box 4013					
			Huntsville, TX 77342-4013					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description		
	EXPENDITURE		Contributions/Donations Made By	ittaa				de of Texas. Complete Schedule T. officeholder living expense
			Candidate/Officeholder/Political Comm	iiilee				ns purchased from TDCJ donated to
						charities for f		
\vdash	Complete ONLY if direct		Candidate/Officeholder name C	Dffice sou	aht			Office held
	expenditure to benefit C/OI	Η			0			
⊨	Date		Payee name					
	06/21/2023		TDCJ					
⊢	Amount (\$)		Payee address; City; State;	; Zip Co	do			
	\$216.50		PO Box 4013	, Zip Cu	ue			
	ΨΖ10.30		10 000 4013					
			Huntsville, TX 77342-4013					
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description		
	OF EXPENDITURE		Contributions/Donations Made By					de of Texas. Complete Schedule T.
			Candidate/Officeholder/Political Comm	littee				officeholder living expense I from TDCJ donated to charities for
						fundraising	sec	I from TDC5 donated to chanties for
⊢	0 1.4 0.000							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght			Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Iking Fees Office Overhead/Rental Expense ense Food/Beverage Expense Polling Expense Donations Made By - Git/Awards/Memorials Expense Printing Expense office Overhead/Rental Expense Polling Expense Polling Expense officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor				Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 23/27 Rpt:		Stucky, Lynn D. (The H	onorable)				00080276	
4	Date	5	Payee name				I		
	02/02/2023		Texas Conservative Co	alition					
6	Amount (\$)	7	Payee address; City; State; Zip Code						
	\$2,000.00		PO Box 2659						
			Austin, TX 78768						
8	PURPOSE	(a)	Category (See Categories list	ed at the top of this sch	edule)	b) Description			
	OF EXPENDITURE		Fees	·	,			ide of Texas. Com	
								, officeholder living	expense
						Campaign bi	-an	nual dues	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder nan	ne C	Office soug	ht		Office he	ld
	Date		Payee name						
	02/13/2023		Texas Federation of Re	publican Wome	en				
	Amount (\$)		Payee address; City;	State;	Zip Cod	e			
	\$100.00		13740 US 183 Hwy J4						
			Austin, TX 78750						
	PURPOSE	(a)	Category (See Categories list	ed at the top of this sch	edule)	b) Description			
	OF EXPENDITURE		Contributions/Donation		,		outsi	ide of Texas. Com	plete Schedule T.
	EXPENDITORE		Candidate/Officeholder	Political Comm	ittee			, officeholder living	expense
						TFRW spons	sors	ship	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder nan	ne C	Office soug	ht		Office he	ld
F	Date		Payee name						
	02/22/2023		Texas House Republica	an Caucus PAC	;				
	Amount (\$)		Payee address; City;	State:	Zip Cod	e			
	\$1,000.00		PO Box 13305	,					
	+_,								
			Austin, TX 78711						
	PURPOSE OF	(a)	Category (See Categories list		edule)	b) Description	a	ide of Tours - O	alata Cabadula T
	EXPENDITURE		Contributions/Donation Candidate/Officeholder		ittoo			ide of Texas. Com , officeholder living	
			Canuluale/Onicenoluer		iiiiee	Political cont			expense
								-	
-	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder nan		Office soug	ht		Office he	ld
	expenditure to benefit C/OI				since soug				

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursemen Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Imittee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 24/27 Rpt:	Stucky, Lynn D. (The Honorable)	00080276			
4	Date	Payee name				
	01/24/2023	Weatherford College				
6	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,000.00	225 College Park Dr				
		Weatherford, TX 76086				
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Contributions/Donations Made By	vel outside of Texas. Complete Schedule T.			
			stin, TX, officeholder living expense			
		Campaign	charitable contribution			
9	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	03/16/2023	Wise County Committee on Aging				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$250.00	PO Box 903				
	BUBBOSE	Decatur, TX 76234				
	PURPOSE OF EXPENDITURE		vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense			
			charitable contribution			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	04/08/2023	Wise County Committee on Aging				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$610.00	PO Box 903				
		Decatur, TX 76234				
	PURPOSE OF EXPENDITURE	Check if Au	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense of table to attend Wise Co. Committee on			
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Office States Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	EILER NAME	Filer ID (Ethics Commission Filers)				
-	Sch: 25/27 Rpt:	Stucky, Lynn D. (The Honorable)	00080276				
4	Date 03/08/2023	Payee name Wise County Farm Bureau					
6	Amount (\$)	Payee address; City; State; Zip Code					
Ū	\$291.49	2001 S College Ave Decatur, TX 76234					
8	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	itside of Texas. Complete Schedule T. 'X, officeholder living expense ritable contribution				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	03/23/2023	Wise County Farm Bureau					
	Amount (\$) \$50.59	Payee address; City; State; Zip Code 2001 S College Ave					
	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	itside of Texas. Complete Schedule T. "X, officeholder living expense ritable contribution				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	01/24/2023	Wise Republican Women					
	Amount (\$) \$650.00	Payee address; City; State; Zip Code PO Box 1375					
		Decatur, TX 76234					
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. ⁻ X, officeholder living expense lation				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment							Transportation E Travel in District Travel Out of Dis			
1	Total pages Schedule F1:	2						3	Filer ID	(Ethics Commission Filers)
1	Sch: 26/27 Rpt:	1	Stucky, Lynn D. (The Honorable)			ľ	00080276	
4	Date	<u> </u>)				00000210	
4	03/02/2023		Payee name Wise Republican	Women						
6	Amount (\$) \$45.00		Payee address; PO Box 1375	City;	State;	Zip Coc	е			
			Decatur, TX 7623	34						
8	PURPOSE OF EXPENDITURE		Category _{(See Categ} Fees	gories listed at the top o	of this sched	dule)	Check if Austir	а, тх, ппи		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officehold	der name	Of	fice soug	ht		Office he	eld
	Date		Payee name							
	01/03/2023		Yardi							
_	Amount (\$)		Payee address;	City;	State:	Zip Coc	e			
	\$0.95		430 S Fairview A Santa Barbara, C							
	PURPOSE OF EXPENDITURE	1	Category _{(See Categ} Fees	gories listed at the top c	of this sched	dule)	X Check if Austin Fee for online	а, тх, е ра		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	-	andidate/Officehold	der name	Of	fice soug	ht		Office he	eld
	Date		Payee name							
	03/09/2023		Yardi							
	Amount (\$) \$0.95	1	Payee address; 430 S Fairview A	City; venue	State;	Zip Coo	е			
			Santa Barbara, C	CA 93117						
	PURPOSE OF EXPENDITURE		Category _{(See Categ} Fees	gories listed at the top o	f this sched	dule)	X Check if Austin Fee for online	а, тх, е ра	ayment of ho	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officehold	der name	Of	fice soug	ht		Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid	O Pe kpense Pr Sá	ffice Overh olling Expe rinting Exp alaries/Wa	ense ges/Contract Labor		Transportation E Travel in District Travel Out of Dis	
1	Total pages Schedule F1:	FILER	NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 27/27 Rpt:		y, Lynn D. (The Honora	ble)				00080276	
4	Date 03/27/2023	Payee Yardi	name						
6	Amount (\$)	Pavee	address; City;	State; Z	Zip Cod	9			
-	\$0.95	430 S	Fairview Avenue Barbara, CA 93117	,	F				
8	PURPOSE								
o	OF EXPENDITURE	a) Catego Fees	\mathcal{W} (See Categories listed at the	top of this schedul	le) (X Check if Austir Fee for onlin	ı, тх, е ра	officeholder living	plete Schedule T. g expense Omeowner association tment in Austin
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	Offic	ce sougl	nt		Office h	eld
	Date	Payee	name						
	04/28/2023	Yardi							
	Amount (\$) \$0.95	-	address; City; Fairview Avenue	State; Z	Zip Cod	9			
			Barbara, CA 93117						
	PURPOSE OF EXPENDITURE	a) Catego Fees	DY (See Categories listed at the	top of this schedul	le) (l	X Check if Austir Fee for onlin	а, тх, е ра	, officeholder living ayment of he	plete Schedule T. g expense omeowner association tment in Austin
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	Offic	ce sougl	nt		Office h	eld
	Date	Payee	name						
	05/31/2023	Yardi							
	Amount (\$) \$0.95		address; City; Fairview Avenue	State; Z	Zip Cod	2			
		Santa	Barbara, CA 93117		<u> </u>				
	PURPOSE OF EXPENDITURE	a) Catego Fees)ry (See Categories listed at the	top of this schedul	le) (I	X Check if Austir Fee for onlin	а, тх, е ра	, officeholder living ayment of he	plete Schedule T. g expense Dmeowner association tment in Austin
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	Offic	ce sougl	nt		Office h	eld

EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	EXPENDITURE CA Event Expense Fees Food/Beverage Expense of Gift/Awards/Memorials Expense I Committee Legal Services The Instruction Guide ex	Loan Repay Office Overt Polling Expe se Printing Exp Salaries/Wa	ment/Reimbursement lead/Rental Expense ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1 Total pages Schedule F4: Sch: 1/68 Rpt: 43/112	2 FILER NAME 3 Filer ID (Ethics Commission Stucky, Lynn D. (The Honorable) 00080276						
⁴ TOTAL OF UNITEMI	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD						
5 Date 01/01/2023	6 Payee name ABM Parking Services						
7 Amount (\$) \$254.39	8 Payee address; City; 701 Brazos Suite GRG Austin, TX 78701	State; Zip Cod	e				
9 TYPE OF EXPENDITURE	X Political	Non-Politic	cal				
10 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. X Check if Austin, TX, officeholder living expense Monthly parking fee for Officeholder's apartment in Austin 						
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office held Office held						
Date 02/01/2023	Payee name ABM Parking Services						
Amount (\$) \$254.39	Payee address; City; 701 Brazos Suite GRG Austin, TX 78701	State; Zip Cod	e				
TYPE OF EXPENDITURE	X Political	Non-Politic	cal				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense		X Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense ing fee for Officeholder's apartment in			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	ht	Office held			

EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	EXPENDITURE CA Event Expense Fees Food/Beverage Expense of ft/Awards/Memorials Expense Committee Legal Services The Instruction Guide ext	Loan Repay Office Overl Polling Expe se Printing Exp Salaries/Wa	ment/Reimbursement head/Rental Expense ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule F4: Sch: 2/68 Rpt: 44/112	2 FILER NAME 3 Filer ID (Ethics Commission F Stucky, Lynn D. (The Honorable) 00080276					
⁴ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$						
5 Date 03/01/2023	6 Payee name ABM Parking Services					
7 Amount (\$) \$10.83	8 Payee address; City; 701 Brazos Suite GRG Austin, TX 78701	State; Zip Cod	e			
9 TYPE OF EXPENDITURE	X Political	Non-Politi	cal			
10 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. X Check if Austin, TX, officeholder living expense Monthly parking fee for Officeholder's apartment in Austin 					
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	ht	Office held		
Date 04/01/2023	Payee name ABM Parking Services					
Amount (\$) \$254.39	Payee address; City; 701 Brazos Suite GRG Austin, TX 78701	State; Zip Cod	e			
TYPE OF EXPENDITURE	X Political	Non-Politi	cal			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense		X Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense ing fee for Officeholder's apartment in		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	ht	Office held		

EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	EXPENDITURE CA Event Expense Fees Food/Beverage Expense of Gift/Awards/Memorials Expense I Committee Legal Services The Instruction Guide ex	Loan Repay Office Overl Polling Expe se Printing Exp Salaries/Wa	ment/Reimbursement nead/Rental Expense ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1 Total pages Schedule F4: Sch: 3/68 Rpt: 45/112	2 FILER NAME 3 Filer ID (Ethics Commission Stucky, Lynn D. (The Honorable) 00080276						
⁴ TOTAL OF UNITEMI	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD						
5 Date 05/01/2023	6 Payee name ABM Parking Services						
7 Amount (\$) \$254.39	8 Payee address; City; 701 Brazos Suite GRG Austin, TX 78701	State; Zip Cod	e				
9 TYPE OF EXPENDITURE	X Political	Non-Politi	cal				
10 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. X Check if Austin, TX, officeholder living expense Monthly parking fee for Officeholder's apartment in Austin 						
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office held Office held						
Date 06/02/2023	Payee name ABM Parking Services						
Amount (\$) \$254.39	Payee address; City; 701 Brazos Suite GRG Austin, TX 78701	State; Zip Cod	e				
TYPE OF EXPENDITURE	X Political	Non-Politi	cal				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense		X Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense ing fee for Officeholder's apartment in			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	ht	Office held			

	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politice	EXPENDITURE C. Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	Loan Rep Office Ov Polling Ex nse Printing E Salaries/V	ayment/Reimbursement erhead/Rental Expense pense xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
L	Total pages Schedule F4: Sch: 4/68 Rpt: 46/112	2 FILER NAME Stucky, Lynn D. (The Honorable	e)		3 Filer ID (Ethics Commission Filers) 00080276
4	TOTAL OF UNITEMI	ZED EXPENDITURES CHARGI	ED TO A CRE	DIT CARD	\$
5	Date 03/26/2023	6 Payee name Aldi			
7	Amount (\$) \$25.02	8 Payee address; City; 1317 Ector St Denton, TX 76201	State; Zip Co	de	
9	TYPE OF EXPENDITURE	X Political	Non-Pol	tical	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense) of this schedule)	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense s for Wise Co District office grand
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held
Γ	Date 03/26/2023	Payee name Aldi			
	Amount (\$) \$21.84	Payee address; City; 1317 Ector St	State; Zip Co	ode	
L		Denton, TX 76201			
	TYPE OF EXPENDITURE	X Political	Non-Pol		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	o of this schedule)	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense s for Wise Co District office grand
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held

EXPENDITUR	ES MADE BY CREDI	T CARD		SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Exp al Committee Legal Services	Office Overh Polling Expe pense Printing Expe	ment/Reimbursement ead/Rental Expense nse ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 5/68 Rpt: 47/112	2 FILER NAME Stucky, Lynn D. (The Honoral	3 Filer ID (Ethics Commission Filers) 00080276		
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARC	GED TO A CRED	IT CARD	\$
5 Date 03/24/2023	6 Payee name Amazon.Com			•
7 Amount (\$) \$101.50	8 Payee address; City; 410 Terry Ave North Seattle, WA 98109	State; Zip Code	<u>}</u>	
9 TYPE OF EXPENDITURE	X Political	Non-Politic	al	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Advertising Expense	top of this schedule) (I		outside of Texas. Complete Schedule T. n, TX, officeholder living expense Jpplies
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	ıt	Office held
Date 02/08/2023	Payee name American Cancer Society			
Amount (\$) \$310.88	Payee address; City; 7777 Forest Lane	State; Zip Code	ř	
TYPE OF	Dallas, TX 75230	Non-Politic		
EXPENDITURE PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Contributions/Donations Made Candidate/Officeholder/Politic	top of this schedule) (I	D) Description	outside of Texas. Complete Schedule T. n, TX, officeholder living expense naritable contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	ıt	Office held

Forms provided by Texas Ethics Commission

	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	EXPENDITURE C/ Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expen I Committee Legal Services The Instruction Guide e	Loan Rep Office Ove Polling Ex Printing E Salaries/V	ayment/Reimbursement erhead/Rental Expense pense xpense /ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Total pages Schedule F4: Sch: 6/68 Rpt: 48/112	2 FILER NAME Stucky, Lynn D. (The Honorable	e)		3 Filer ID (Ethics Commission Filers) 00080276
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	ED TO A CRE	DIT CARD	\$
	Date 04/25/2023	6 Payee name Bank of America			
7	Amount (\$) \$25.00	8 Payee address; City; PO Box 851001 Dallas, TX 75285	State; Zip Co	de	
9	TYPE OF EXPENDITURE	X Political	Non-Poli	tical	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Fees	of this schedule)	Check if Austin Fee for late p	outside of Texas. Complete Schedule T. , TX, officeholder living expense ayment of credit card used for d officeholder expenses
11	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held
	Date 04/30/2023	Payee name Bank of America			
	Amount (\$) \$58.89	Payee address; City; PO Box 851001 Dallas, TX 75285	State; Zip Co	de	
	TYPE OF EXPENDITURE	X Political	Non-Poli	tical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Fees	of this schedule)	Check if Austin Fees for late	outside of Texas. Complete Schedule T. , TX, officeholder living expense payment of credit card used for d Officeholder expenses
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held

	EXPENDITURE	ES MADE BY CREDI	T CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense /- Gift/Awards/Memorials Ex	Office Ov Polling Ex pense Printing E Salaries/V	ayment/Reimbursement rhead/Rental Expense pense xpense /ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
L	Total pages Schedule F4: Sch: 7/68 Rpt: 49/112	2 FILER NAME Stucky, Lynn D. (The Honoral	ble)		3 Filer ID (Ethics Commission Filers) 00080276
4	TOTAL OF UNITEMI	ZED EXPENDITURES CHAR	GED TO A CRE	DIT CARD	\$
	Date 05/31/2023	6 Payee name Bank of America			
7	Amount (\$) \$33.65	8 Payee address; City; PO Box 851001 Dallas, TX 75285	State; Zip Co	de	
9	TYPE OF EXPENDITURE	X Political	Non-Pol	tical	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Fees	top of this schedule)	Check if Austir Fees for late	outside of Texas. Complete Schedule T. n, TX, officeholder living expense payment of credit card used for d Officeholder expenses
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held
	Date 03/02/2023	Payee name Bridgeport Chamber of Comn	nerce		
	Amount (\$) \$50.00	Payee address; City; 812 Halsell Ave	State; Zip Co	de	
	TYPE OF EXPENDITURE	Bridgeport, TX 76426	Non-Pol	tical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Fees	top of this schedule)	Gheck if Austin Fee for camp	outside of Texas. Complete Schedule T. a, TX, officeholder living expense paign representative to attend hamber banquet
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held

EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repaym Office Overhea Polling Expens se Printing Exper Salaries/Wage	ent/Reimbursement ad/Rental Expense se se se s/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 8/68 Rpt: 50/112	2 FILER NAME Stucky, Lynn D. (The Honorable))		3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARGE	D TO A CREDI	T CARD	\$
5 Date 04/19/2023	6 Payee name Bridgeport Chamber of Commer	се		
7 Amount (\$) \$30.00	 8 Payee address; City; 812 Halsell Ave Bridgeport, TX 76426 	State; Zip Code		
9 TYPE OF EXPENDITURE	X Political	Non-Politica		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Fees	f this schedule) (b)	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense ct representative to attend Bridgeport cheon
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought		Office held
Date 05/17/2023	Payee name Bridgeport Chamber of Commer	се		
Amount (\$) \$30.00	Payee address; City; 812 Halsell Ave Bridgeport, TX 76426	State; Zip Code		
TYPE OF EXPENDITURE	X Political	Non-Politica	1	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Fees	f this schedule) (b)	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense ct representative to attend Bridgeport cheon
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought		Office held

EXPENDITURE	ES MADE BY CREDIT	CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expe I Committee Legal Services	ATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursemeni Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor explains how to complete this form.	t Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 9/68 Rpt: 51/112	2 FILER NAME Stucky, Lynn D. (The Honorabl	e)	3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	ED TO A CREDIT CARD	\$
5 Date 01/25/2023	6 Payee name CVS Pharmacy		•
7 Amount (\$) \$6.48	 8 Payee address; City; 500 N Congress Ave Austin, TX 78701 	State; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens	Se Check if trav	el outside of Texas. Complete Schedule T. stin, TX, officeholder living expense lies for the Capitol office
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 01/10/2023	Payee name Capital Grille		
Amount (\$) \$749.51	Payee address; City; 117 W 4th St	State; Zip Code	
TYPE OF	Austin, TX 78701		
EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check if trav	el outside of Texas. Complete Schedule T. stin, TX, officeholder living expense eeting with Officeholder and constituents egislative issues
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repa Office Ove Polling Ex Printing Ex Salaries/M	ayment/Reimbursement rhead/Rental Expense pense pense /ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 10/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorable	e)		3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGI	ED TO A CRE	DIT CARD	\$
5 Date 03/14/2023	6 Payee name Capitol Cafe			
7 Amount (\$) \$26.68	8 Payee address; City; 1001 Congress Ave #180 Austin, TX 78701	State; Zip Co	de	
9 TYPE OF EXPENDITURE	X Political	Non-Poli	tical	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	o of this schedule)	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense eting between Officeholder and Chief of
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held
Date 01/20/2023	Payee name Capitol Extension Gift Shop			
Amount (\$) \$210.00	Payee address; City; 1400 Congress Ave Austin, TX 78701	State; Zip Co	de	
TYPE OF EXPENDITURE	X Political	Non-Poli	tical	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens		Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense the installation of a television in the
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held

EXPENDITURI	ES MADE BY CREDIT	CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Expe al Committee Legal Services	ATEGORIES FOR BOX 10(a) Loan Repayment/Reimburseme Office Overhead/Rental Expense Polling Expense Salaries/Wages/Contract Labor explains how to complete this form.	Se Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 11/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorabl	e)	3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	ED TO A CREDIT CARD	\$
5 Date 01/17/2023	6 Payee name Capitol Extension Gift Shop		
7 Amount (\$) \$65.00	8 Payee address; City; 1400 Congress Ave	State; Zip Code	
9 TYPE OF EXPENDITURE	Austin, TX 78701	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens	Se Check if tr	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense for the installation of a television in the fice
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 02/28/2023	Payee name Chick-Fil-A		
Amount (\$) \$243.12	Payee address; City; 600 Congress Ave C150 Austin, TX 78701	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check if tr	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense committee lunch at Capital
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

Г					
	EXPENDITURE	ES MADE BY CRED	IT CARD		SCHEDULE F4
⊢					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expens '- Gift/Awards/Memorials I I Committee Legal Services	e Office Ov Expense Polling Expense	ayment/Reimbursement erhead/Rental Expense pense xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 12/68 Rpt:	Stucky, Lynn D. (The Honor	able)		00080276
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHAP	RGED TO A CRE	DIT CARD	\$
5	Date	6 Payee name			
	03/28/2023	Clayton Spangler Photograp	-		
7	Amount (\$) \$511.00	8 Payee address; City;235 Point Lick Drive	State; Zip Co	ode	
		Charleston, WV 25306			
9	TYPE OF EXPENDITURE	X Political	Non-Pol	tical	
1) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at th Office Overhead/Rental Exp		Check if Austi	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense panoramic photo of the State Capitol for office
1:	L Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ght	Office held
	Date 02/27/2023	Payee name Decatur Chamber of Comme	erce		
	Amount (\$) \$30.00	Payee address; City; 106 S Trinity St	State; Zip Co	ode	
		Decatur, TX 76234			
	TYPE OF EXPENDITURE	X Political	Non-Pol	tical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at th Fees	ne top of this schedule)	Check if Austi Payment for	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense campaign representatives to attend amber luncheon
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sou	ght	Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Ma Candidate/Officeholder/F		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)	
1 Total pages Schedule Sch: 13/68 Rpt:	4: 2 FILER NAME Stucky, Lynn D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080276	
⁴ TOTAL OF UNITE	MIZED EXPENDITURES CHARGED TO	A CREDIT CARD	\$	
5 Date 03/28/2023	6 Payee name Decatur Chamber of Commerce			
7 Amount (\$) \$40.	00 106 S Trinity St	Zip Code		
9 TYPE OF EXPENDITURE	Decatur, TX 76234	Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Fees	Check if trave Check if Austi Payment for	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense campaign representatives to attend unber luncheon	
11 Complete <u>ONLY</u> if dire expenditure to benefit		ffice sought	Office held	
Date 04/24/2023	Payee name Decatur Chamber of Commerce			
Amount (\$) \$20.	00 106 S Trinity St	Zip Code		
TYPE OF	Decatur, TX 76234			
EXPENDITURE	X Political	Non-Political		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Fees	Check if trave Check if Austi Payment for	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense campaign representative to attend unber luncheon	
Complete <u>ONLY</u> if dire expenditure to benefit		ffice sought	Office held	

	EXPENDITURES MADE BY CREDIT CARD				
				SCHEDULE F4	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Off Food/Beverage Expense Pol - Gift/Awards/Memorials Expense Pri	an Repayment/Reimbursement ce Overhead/Rental Expense ling Expense ating Expense aries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
	Fotal pages Schedule F4: Sch: 14/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080276	
4	TOTAL OF UNITEMIZ	ED EXPENDITURES CHARGED TO A	CREDIT CARD	\$	
	Date 05/19/2023	6 Payee name Decatur Chamber of Commerce		I	
7 4	Amount (\$) \$20.00	8 Payee address; City; State; Zi 106 S Trinity St Decatur, TX 76234	p Code		
9	TYPE OF EXPENDITURE		n-Political		
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Fees	Check if travel Check if Austin Payment for	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense campaign representative to attend unber luncheon	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		e sought	Office held	
	Date 03/02/2023	Payee name Decatur Chamber of Commerce			
4	Amount (\$) \$50.00	Payee address; City; State; Zi 106 S Trinity St Decatur, TX 76234	p Code		
	TYPE OF EXPENDITURE		n-Political		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Fees	Check if travel	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense nnual membership dues for the Decatur Commerce	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		e sought	Office held	

EXPENDITURE	ES MADE BY CREDIT CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Office (Food/Beverage Expense Polling /- Gift/Awards/Memorials Expense Printing	Repayment/Reimbursement Solicitation/Fundraising Expense Overhead/Rental Expense Transportation Equipment & Related Expense g Expense Travel in District ravel out of District Travel Out of District es/Wages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 15/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED TO A CR	REDIT CARD \$
5 Date 06/14/2023	6 Payee name Decatur Chamber of Commerce	
7 Amount (\$) \$200.00	 8 Payee address; City; State; Zip of 106 S Trinity St Decatur, TX 76234 	Code
9 TYPE OF EXPENDITURE		Political
10 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 sponsorship at chamber golf tournament
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office s H	sought Office held
Date 05/10/2023	Payee name Decatur Chamber of Commerce	
Amount (\$) \$250.00	Payee address; City; State; Zip (106 S Trinity St	Code
TYPE OF EXPENDITURE	Decatur, TX 76234	Political
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 sponsorship at Decatur Chamber event
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office s H	sought Office held

EXPENDITURE	ES MADE BY CREDIT	CARD	SCHEDULE F4
			-
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Expe al Committee Legal Services	ATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursemen Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor explains how to complete this form.	
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 16/68 Rpt:	Stucky, Lynn D. (The Honorabl	e)	00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	ED TO A CREDIT CARD	\$
5 Date	6 Payee name		
02/15/2023 7 Amount (\$)	Denton Republican Women's C 8 Payee address; City;	State; Zip Code	
\$30.00	PO Box 2624		
	Denton, TX 76202		
9 TYPE OF	X Political	Non-Political	
EXPENDITURE 10 PURPOSE			
OF EXPENDITURE	(a) Category (See Categories listed at the top Fees	Check if trav	rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense p dues for District Director
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 01/17/2023	Payee name Denton Trophy House		
Amount (\$) \$10.82	Payee address; City; 201 S Elm St	State; Zip Code	
	Denton, TX 76201		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Advertising Expense	Check if trav	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense ge for District Director
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

			SCHEDULE F4	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Ex al Committee Legal Services	CATEGORIES FOR BOX 10(a Loan Repayment/Reimbu Office Overhead/Rental E Polling Expense Printing Expense Salaries/Wages/Contract le explains how to complete this f	Arrowski skiller Arrowski ski	
1 Total pages Schedule F4: Sch: 17/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honora	ble)	3 Filer ID (Ethics Commission Filers) 00080276	
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHAR	GED TO A CREDIT CAR	D \$	
5 Date 01/04/2023	6 Payee name Direct TV			
7 Amount (\$) \$135.64	8 Payee address; City; PO Box 105249	State; Zip Code		
9 TYPE OF EXPENDITURE	Atlanta, GA 30348	Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Office Overhead/Rental Expe	ense	tion ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense TV for District office in Denton	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held	
Date 02/04/2023	Payee name Direct TV			
Amount (\$) \$142.05	Payee address; City; PO Box 105249	State; Zip Code		
	Atlanta, GA 30348			
TYPE OF EXPENDITURE	X Political	Non-Political		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Office Overhead/Rental Expe	ense	tion ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense TV for District office in Denton	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held	

EXPENDITURES MADE BY CREDIT CARD				
		SCHEDULE F4		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donatior Candidate/Officehole	EXPENDITURE CATEGORIES FOR BOX 10(a) Event Expense Fees Food/Beverage Expense der/Political Committee Event Expense Food/Beverage Expense Cift/Awards/Memorials Expense Legal Services Event Expense Food/Beverage Expense Cift/Awards/Memorials Expense Legal Services Food/Beverage Expense Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Sched Sch: 18/68 Rpt:	ule F4: 2 FILER NAME 3 Stucky, Lynn D. (The Honorable)	Filer ID(Ethics Commission Filers)00080276		
⁴ TOTAL OF UN	ITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$			
5 Date 03/04/2023	6 Payee name Direct TV			
7 Amount (\$) \$1	42.05 8 Payee address; City; State; Zip Code PO Box 105249			
9 TYPE OF EXPENDITURE	Atlanta, GA 30348			
10 PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. K, officeholder living expense istrict office in Denton		
11 Complete ONLY if expenditure to ben		Office held		
Date 04/04/2023	Payee name Direct TV			
Amount (\$) \$1	42.05 Payee address; City; State; Zip Code PO Box 105249			
	Atlanta, GA 30348			
TYPE OF EXPENDITURE	X Political Non-Political			
PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. K, officeholder living expense istrict office in Denton		
Complete <u>ONLY</u> if expenditure to ben		Office held		

EXPENDITURES MADE BY CREDIT CARD				
				SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politio	Event Expense Fees Food/Beverage Expense By - Gift/Awards/Memorials E al Committee Legal Services	e Office Overhead Polling Expense	t/Reimbursement Solid /Rental Expense Trar Trav Contract Labor OTH	itation/Fundraising Expense sportation Equipment & Related Expense el in District el Out of District IER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 19/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honor	able)	3 File	r ID (Ethics Commission Filers) 080276
⁴ TOTAL OF UNITEM	ZED EXPENDITURES CHAR	RGED TO A CREDIT	CARD \$	
5 Date 05/04/2023	6 Payee name Direct TV			
7 Amount (\$) \$142.05	8 Payee address; City; PO Box 105249	State; Zip Code		
9 TYPE OF EXPENDITURE	Atlanta, GA 30348	Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Office Overhead/Rental Exp	ense	Description Check if travel outside of Check if Austin, TX, office Cable TV for District	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name DH	Office sought		Office held
Date 06/04/2023	Payee name Direct TV			
Amount (\$) \$142.00	Payee address; City; PO Box 105249	State; Zip Code		
	Atlanta, GA 30348			
TYPE OF EXPENDITURE	X Political	Non-Political		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Office Overhead/Rental Exp	ense	Description Check if travel outside of Check if Austin, TX, office Cable TV for District	
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name DH	Office sought		Office held

	EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E I Committee Legal Services		ISE Transportation Equipment & Related Expense Travel in District Travel Out of District or OTHER (enter a category not listed above)	
1	Total pages Schedule F4: Sch: 20/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honora	able)	3 Filer ID (Ethics Commission Filers) 00080276	
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHAR	GED TO A CREDIT CARD	\$	
5	Date 03/24/2023	6 Payee name Dollar Tree			
7	Amount (\$) \$8.02	 8 Payee address; City; 1200 S FM 51 Decatur, TX 76234 	State; Zip Code		
9	TYPE OF EXPENDITURE	X Political	Non-Political		
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Event Expense	Check if t	ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense for Wise County District Office grand	
11	. Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held	
	Date 03/26/2023	Payee name Dollar Tree			
	Amount (\$) \$12.18	Payee address; City; 1200 S FM 51	State; Zip Code		
L		Decatur, TX 76234			
	TYPE OF EXPENDITURE	X Political	Non-Political		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Event Expense	Check if t	ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense for Wise County District Office grand	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought	Office held	

EXPENDITURE	EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense / - Gift/Awards/Memorials Expe I Committee Legal Services	ATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1 Total pages Schedule F4:			3 Filer ID (Ethics Commission Filers)	
Sch: 21/68 Rpt:	Stucky, Lynn D. (The Honorabl		00080276	
TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	ED TO A CREDIT CARD	\$	
5 Date 01/06/2023	6 Payee name Dos Chilis Grandes			
7 Amount (\$) \$106.58	8 Payee address; City; 105 Lake Rd	State; Zip Code		
	Bridgeport, TX 76426			
9 TYPE OF EXPENDITURE	X Political	Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check if trave Check if Austi Food for me	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense eting with Wise County officials to slative issues	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held	
Date 01/11/2023	Payee name Double Tree Hotel			
Amount (\$) \$546.24	Payee address; City; 6505 N Interstate Hwy 35	State; Zip Code		
	Austin, TX 78752			
TYPE OF EXPENDITURE	X Political	Non-Political		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel Out of District	Check if trave Check if Austi Hotel for Dis	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense trict staff attending the opening day ceremony for Officeholder	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held	

EXPENDITURES MADE BY CREDIT CARD				
	ES MADE BY CREDIT	CARD	SCHEDULE F4	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Expe al Committee Legal Services	ATEGORIES FOR BOX 10(a) Loan Repayment/Reimburg Office Overhead/Rental Ex Polling Expense nse Printing Expense Salaries/Wages/Contract L explains how to complete this for	bense Transportation Equipment & Related Expense Travel in District Travel Out of District abor OTHER (enter a category not listed above)	
1 Total pages Schedule F4: Sch: 22/68 Rpt:		· · ·	3 Filer ID (Ethics Commission Filers) 00080276	
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARGI	ED TO A CREDIT CARE) \$	
5 Date 01/20/2023	6 Payee name Double Tree Hotel			
7 Amount (\$) \$272.22	8 Payee address; City; 6505 N Interstate Hwy 35 Austin, TX 78752	State; Zip Code		
9 TYPE OF EXPENDITURE	X Political	Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel Out of District	Check Check Hotel fo	on if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense or District staff attending the opening day ng-in ceremony for Officeholder	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held	
Date 02/15/2023	Payee name El Chaparral Grill			
Amount (\$) \$31.20	Payee address; City; 324 E McKinney Suite 102 Denton, TX 76201	State; Zip Code		
TYPE OF EXPENDITURE	X Political	Non-Political		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check	on if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense or District staff attending the Denton Women's ican Club meeting	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held	

Γ	EXPENDITURES MADE BY CREDIT CARD				
					SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expens - Gift/Awards/Memorials I Committee Legal Services	Office Ov se Polling E Expense Printing E	ayment/Reimbursement erhead/Rental Expense spense xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 23/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honor	rable)		3 Filer ID (Ethics Commission Filers) 00080276
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHAP	RGED TO A CRE	DIT CARD	\$
5	Date 05/17/2023	6 Payee name El Chaparral Grill			1
7	Amount (\$) \$14.56	8 Payee address; City; 324 E McKinney Suite 102 Denton, TX 76201	State; Zip Co	ode	
9	TYPE OF EXPENDITURE	X Political	Non-Pol	itical	
10	O PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at th Food/Beverage Expense	he top of this schedule)	Check if Austi Food for Dis	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense trict staff attending the Denton Women's Club meeting
11	. Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ight	Office held
	Date 06/22/2023	Payee name Family Dollar			
	Amount (\$) \$3.52	Payee address; City; 100 Maple St	State; Zip Co	ode	
		Denton, TX 76201			
	TYPE OF EXPENDITURE	X Political	Non-Pol		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Office Overhead/Rental Exp		Check if Austi	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense District Office
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ight	Office held

EXPENDITURES MADE BY CREDIT CARD			
			SCHEDULE F4
	EXPENDITURE CA	ATEGORIES FOR BOX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Exper al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:			3 Filer ID (Ethics Commission Filers)
Sch: 24/68 Rpt:	Stucky, Lynn D. (The Honorable	2)	00080276
TOTAL OF UNITEMI	ZED EXPENDITURES CHARGE	ED TO A CREDIT CARD	\$
5 Date	6 Payee name		
04/12/2023 7 Amount (\$)	Great American Cookies 8 Payee address; City;	State; Zip Code	
\$36.99	2901 S Capitol of Texas Highwa	•	
		-	
	Austin, TX 78746		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check if travel	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense ts for staff at the Capitol office
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 04/25/2023	Payee name HEB Food and Drug		
Amount (\$) \$20.90	Payee address; City; 1000 East 41 ST	State; Zip Code	
	Austin, TX 78751		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens	6e Check if travel	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense the Capitol office
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

EXPENDITUR	ES MADE BY CREDI	T CARD		SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials E al Committee Legal Services	Office OV Polling E xpense Printing E	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 25/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honora	able)		3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHAR	GED TO A CRE	EDIT CARD	\$
5 Date 05/10/2023	6 Payee name HEB Food and Drug			
7 Amount (\$) \$119.52	8 Payee address; City; 1000 East 41 ST	State; Zip C	ode	
9 TYPE OF EXPENDITURE	Austin, TX 78751	Non-Po	litical	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Office Overhead/Rental Expe		Check if Austi	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense the Capitol office
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	l ught	Office held
Date 01/09/2023	Payee name HEB Food and Drug			
Amount (\$) \$35.66	Payee address; City; 1434 Wells Branch Pkwy	State; Zip C	ode	
TYPE OF	Pflugerville, TX 78660			
EXPENDITURE	X Political	Non-Po		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Office Overhead/Rental Expe		Check if Austi	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense plant for the Capitol office
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	ught	Office held

EXPENDITURE	ES MADE BY CREDIT	CARD	SCHEDULE	F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exper I Committee Legal Services	ATEGORIES FOR BOX Loan Repayment/ Office Overhead/F Polling Expense Salaries/Wages/C explains how to complete	Reimbursement Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Exp Travel in District Travel Out of District OTHER (enter a category not listed abov	
1 Total pages Schedule F4: Sch: 26/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorable	2)	3 Filer ID (Ethics Commission 00080276	n Filers)
⁴ TOTAL OF UNITEMI2	ZED EXPENDITURES CHARGE	ED TO A CREDIT (CARD \$	
5 Date 03/08/2023	6 Payee name Hilton Anatole			
7 Amount (\$) \$10.00	 8 Payee address; City; 2201 N Stemmons Fwy Dallas, TX 75207 	State; Zip Code		
9 TYPE OF EXPENDITURE	X Political	Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Fees		escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Parking fee while Officeholder attended Dalla Chamber of Commerce event	as
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held	
Date 03/23/2023	Payee name Hobby Lobby			
Amount (\$) \$15.61	Payee address; City; 2217 S Loop 288	State; Zip Code		
TYPE OF	Denton, TX 76208			
EXPENDITURE PURPOSE OF EXPENDITURE	X Political (a) Category (See Categories listed at the top Event Expense		escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies for grand opening of District office i County	in Wise
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held	

EXPENDITURI	ES MADE BY CREDIT CA	ARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	al Committee Legal Services	GORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ns how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 27/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED T	O A CREDIT CARD	\$
5 Date 02/03/2023	6 Payee name Hobby Lobby		
7 Amount (\$) \$159.42	8 Payee address; City; Sta 130 Sundance Parkway #200 Round Rock, TX 78681	ate; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. a, TX, officeholder living expense ection certificate at the Capitol office
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 02/17/2023	Payee name Hobby Lobby		
Amount (\$) \$30.30	Payee address; City; Sta 130 Sundance Parkway #200 Round Rock, TX 78681	ate; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. a, TX, officeholder living expense ection certificate at the Capitol office
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

	EXPENDITURE	ES MADE BY CR	EDIT CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage - Gift/Awards/Men I Committee Legal Services	Expense Polling norials Expense Printin	Repayment/Reimbursement Overhead/Rental Expense Expense g Expense es/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 28/68 Rpt:				3 Filer ID (Ethics Commission Filers) 00080276
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES C	HARGED TO A CF	REDIT CARD	\$
5	Date 03/06/2023	6 Payee name Houlihans			
7	Amount (\$) \$72.00	8 Payee address; City; 3100 Town Center Trai	State; Zip I	Code	
9	TYPE OF EXPENDITURE	Denton, TX 76201	Non-F	Political	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories list Food/Beverage Expens		Check if Austi	outside of Texas. Complete Schedule T. n, TX, officeholder living expense eting with District staff to discuss sues
11	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder nan	ne Office s	sought	Office held
	Date 06/10/2023	Payee name Houlihans			
	Amount (\$) \$298.07	Payee address; City; 3100 Town Center Trai	State; Zip I	Code	
		Denton, TX 76201			
	TYPE OF EXPENDITURE	X Political	Non-F	Political	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories list Food/Beverage Expens		Check if Austi	outside of Texas. Complete Schedule T. n, TX, officeholder living expense eting with District staff to discuss sues
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder nan	ne Office s	sought	Office held

	EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4				
					-
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Ex Gift/Awards/Memo I Committee Legal Services	xpense Office O Polling E prials Expense Printing	epayment/Reimbursement verhead/Rental Expense Expense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 29/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Ho	onorable)		3 Filer ID (Ethics Commission Filers) 00080276
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CH	HARGED TO A CR	EDIT CARD	\$
5	Date 06/02/2023	6 Payee name Houlihans			
7	Amount (\$) \$59.60	8 Payee address; City; 3100 Town Center Trail	State; Zip C	Code	
L	TYPE OF	Denton, TX 76201			
9	TYPE OF EXPENDITURE	X Political	Non-Po	•	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed Food/Beverage Expense		Check if Austi	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense eting with District staff to discuss SSUES
1:	L Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name	e Office so	bught	Office held
Γ	Date 02/11/2023	Payee name Ink'N'Stitch			
	Amount (\$) \$486.35	Payee address; City; 1021 Halsell ST	State; Zip C	code	
	TYPE OF	Bridgeport, TX 76426			
	EXPENDITURE	X Political	Non-Po	olitical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed Advertising Expense	d at the top of this schedule)	Check if Austi	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense chandising items for the campaign
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name	e Office so	bught	Office held

EXPENDITURI	ES MADE BY CREDIT (CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense Gft/Awards/Memorials Expense	Salaries/Wages/Cor	eimbursement Solicitation/Fundraising Expense ental Expense Transportation Equipment & Related Expense Travel in District Travel Out of District ntract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 30/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARGEI	D TO A CREDIT C	CARD \$
5 Date 02/15/2023	6 Payee name Ink'N'Stitch		
7 Amount (\$) \$355.27	8 Payee address; City; 1021 Halsell ST	State; Zip Code	
9 TYPE OF	Bridgeport, TX 76426		
EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Advertising Expense		scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ustomized koozies with campaign logo
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 03/03/2023	Payee name Innovation & Technology Caucus	of the Texas House	e of Rep.
Amount (\$) \$250.00	Payee address; City; 815-A Brazos St #714 Austin, TX 78701	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Contributions/Donations Made By Candidate/Officeholder/Political C	Committee	scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ontribution to the Innovation and Technology aucus of the Texas House of Representatives
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

	ES MADE BY CREDIT	CARD		SCHEDULE F4
	EXPENDITURE C	ATEGORIES FOR	BOX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica		Office Overh Polling Expe nse Printing Exp Salaries/Wa	ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Sch: 31/68 Rpt:	Stucky, Lynn D. (The Honorable	e)		00080276
	ZED EXPENDITURES CHARGI	ED TO A CRED	IT CARD	\$
5 Date 03/23/2023	6 Payee name Kroger			
7 Amount (\$) \$7.98	8 Payee address; City; 3400 FM407 E	State; Zip Code	2	
	Bartonville, TX 76226			
9 TYPE OF EXPENDITURE	X Political	Non-Politic	al	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Event Expense	o of this schedule) (I	Check if Austir	outside of Texas. Complete Schedule T. h, TX, officeholder living expense grand opening of District office in Wise
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	nt	Office held
Date 03/26/2023	Payee name Kroger			
Amount (\$) \$102.13	Payee address; City; 3400 FM407 E	State; Zip Code	9	
	Bartonville, TX 76226			
TYPE OF EXPENDITURE	X Political	Non-Politic	al	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Event Expense	o of this schedule) (I	Check if Austir	outside of Texas. Complete Schedule T. h, TX, officeholder living expense grand opening of District office in Wise
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	nt	Office held

EXPEN	DITURE	ES MADE	BY CREDI	T CARD			
							SCHEDULE F4
	iking		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E Legal Services	Office O Polling E xpense Printing	payment/Reimburseme verhead/Rental Expense Expense Wages/Contract Labor	se Transporta Travel in Di Travel Out Travel Out OTHER (er	
1 Total pages S Sch: 32/68 I			IE nn D. (The Honora	able)		3 Filer ID 000802	(Ethics Commission Filers) 76
⁴ TOTAL OF		ZED EXPENI	DITURES CHAR	GED TO A CRI	EDIT CARD	\$	
5 Date 01/21/2023		6 Payee nam Mailchimp	е			I	
7 Amount (\$)	\$234.52	 Payee addr Ponce City 675 Ponce Atlanta, G. 	y Market e De Leon Ave NE	State; Zip C E178	ode		
9 TYPE OF EXPENDITU		X	Political	Non-Po	litical		
10 PURPOS OF EXPENDITU			See Categories listed at the prhead/Rental Expe		Check if A	avel outside of Texas. .ustin, TX, officeholder ampaign email :	
11 Complete ON expenditure to			fficeholder name	Office so	ught	Offic	e held
Date 02/21/2023		Payee nam Mailchimp	е				
Amount (\$)	\$234.52	Payee addr Ponce City 675 Ponce Atlanta, G	y Market e De Leon Ave NE	State; Zip C E178	ode		
TYPE OF EXPENDITU		X	Political	Non-Po	litical		
PURPOS OF EXPENDITU		, s	See Categories listed at the rhead/Rental Expe		Check if A		
Complete ON expenditure to	<u>JLY</u> if direct o benefit C/OI		fficeholder name	Office so	ught	Offic	e held

Γ	EXPENDITURE	S MADE BY CREDIT CARD	
			SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 33/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080276
4	TOTAL OF UNITEMIZ	ED EXPENDITURES CHARGED TO A CREDIT CARD	\$
5	Date 03/19/2023	6 Payee name Mailchimp	
7	Amount (\$) \$234.52	 8 Payee address; City; State; Zip Code Ponce City Market 675 Ponce De Leon Ave NE E178 Atlanta, GA 30308 	
9	TYPE OF EXPENDITURE	X Political Non-Political	
10) PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense aign email service
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 04/21/2023	Payee name Mailchimp	
	Amount (\$) \$234.52	Payee address; City; State; Zip Code Ponce City Market 675 Ponce De Leon Ave NE E178 Atlanta, GA 30308	
	TYPE OF EXPENDITURE	X Political Non-Political	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense aign email service
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

EXPENDITUR	ES MADE BY CREDIT CARD	оон го н – Г А
		SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Poli		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4 Sch: 34/68 Rpt:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
5 Date 05/21/2023	6 Payee name Mailchimp	
7 Amount (\$) \$234.52	 8 Payee address; City; State; Zip Code Ponce City Market 675 Ponce De Leon Ave NE E178 Atlanta, GA 30308 	
9 TYPE OF EXPENDITURE	X Political Non-Political	
10 PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense aign email service
11 Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate/Officeholder name Office sought DH	Office held
Date 06/21/2023	Payee name Mailchimp	
Amount (\$) \$234.52	Payee address; City; State; Zip Code Ponce City Market 675 Ponce De Leon Ave NE E178 Atlanta, GA 30308	
TYPE OF EXPENDITURE	X Political Non-Political	
PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense aign email service
Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate/Officeholder name Office sought DH	Office held

	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repa Office Over Polling Exp nse Printing Ex Salaries/W	ayment/Reimbursement rhead/Rental Expense pense pense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 35/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorable	 e)		3 Filer ID (Ethics Commission Filers) 00080276
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	ED TO A CREI	DIT CARD	\$
5	Date 01/16/2023	6 Payee name Minol-USA			
7	Amount (\$) \$133.54	 8 Payee address; City; 15280 Addison Road Ste 100 Addison, TX 75001 	State; Zip Co	le	
9	TYPE OF EXPENDITURE	X Political	Non-Polit	ical	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens		X Check if Austin	outside of Texas. Complete Schedule T. a, TX, officeholder living expense fficeholder's apartment in Austin
11	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office soug	jht	Office held
Γ	Date 02/14/2023	Payee name Minol-USA			
	Amount (\$) \$84.95	Payee address; City; 15280 Addison Road Ste 100 Addison, TX 75001	State; Zip Coo	Je	
	TYPE OF EXPENDITURE	X Political	Non-Polit	ical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens		X Check if Austin	outside of Texas. Complete Schedule T. h, TX, officeholder living expense fficeholder's apartment in Austin
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office soug	jht	Office held

	EXPENDITURE	ES MADE B	Y CREDIT (CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Eve Fee Foo - Gift/ I Committee Leg	EXPENDITURE CA nt Expense s d/Beverage Expense Awards/Memorials Expens al Services e Instruction Guide ex	Loan Repa Office Over Polling Exp e Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 36/68 Rpt:		. (The Honorable)	1		3 Filer ID (Ethics Commission Filers) 00080276
4	TOTAL OF UNITEMIZ	ZED EXPENDITU	JRES CHARGEI	D TO A CREI	DIT CARD	\$
5	Date 03/19/2023	6 Payee name Minol-USA				
7	Amount (\$) \$93.64	8 Payee address; 15280 Addison Ste 100 Addison, TX 75		State; Zip Coo	le	
9	TYPE OF EXPENDITURE	X Poli	tical	Non-Polit	cal	
10	PURPOSE OF EXPENDITURE	(a) Category (See Ca Office Overhea	ategories listed at the top of Id/Rental Expense		X Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense fficeholder's apartment in Austin
11	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeh H	older name	Office soug	ht	Office held
	Date 05/23/2023	Payee name Minol-USA				
	Amount (\$) \$152.76	Payee address; 15280 Addisor Ste 100 Addison, TX 75		State; Zip Coo	le	
	TYPE OF EXPENDITURE	X Poli	tical	Non-Polit	cal	
	PURPOSE OF EXPENDITURE	(a) Category (See Ca Office Overhea	ategories listed at the top of Id/Rental Expense		X Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense fficeholder's apartment in Austin
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeh H	older name	Office soug	ht	Office held

	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Exp	Office Overh Polling Expe ense Printing Exp Salaries/Wa	ment/Reimbursement ead/Rental Expense nse ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 37/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorab	le)		3 Filer ID (Ethics Commission Filers) 00080276
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARG	ED TO A CRED	IT CARD	\$
5	Date 06/20/2023	6 Payee name Minol-USA			
7	Amount (\$) \$85.27	 8 Payee address; City; 15280 Addison Road Ste 100 Addison, TX 75001 	State; Zip Code	ē	
9	TYPE OF EXPENDITURE	X Political	Non-Politic	al	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Office Overhead/Rental Expen		X Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense officeholder's apartment in Austin
11	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sough	ıt	Office held
	Date 03/26/2023	Payee name Office Depot			
	Amount (\$) \$86.60	Payee address; City; 2300 San Jacinto Blvd Denton, TX 76205	State; Zip Code	3	
	TYPE OF EXPENDITURE	X Political	Non-Politic	al	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Event Expense	op of this schedule) (Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense r grand opening of District office in Wise
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sough	nt	Office held

	EXPENDITURE	S MADE BY CR	EDIT CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage E - Gift/Awards/Mem I Committee Legal Services	orials Expense Office Ov Polling Expense Printing E	ayment/Reimbursement erhead/Rental Expense pense xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 38/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The H	onorable)		3 Filer ID (Ethics Commission Filers) 00080276
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES C	HARGED TO A CRE	DIT CARD	\$
5	Date 04/06/2023	6 Payee name Office Depot			•
7	Amount (\$) \$17.32	8 Payee address; City; 2300 San Jacinto Blvd	State; Zip Co	ode	
9	TYPE OF EXPENDITURE	Denton, TX 76205	Non-Pol	tical	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories liste Advertising Expense	ed at the top of this schedule)		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense upplies
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder nam	e Office sou	ght	Office held
	Date 04/28/2023	Payee name PMC Paid Parking			
	Amount (\$) \$17.59	Payee address; City; 5000 Vasquez Blvd	State; Zip Co	ode	
	TYPE OF EXPENDITURE	Denver, CO 80216	Non-Pol	tical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories liste Fees	d at the top of this schedule)	Check if Aust	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense for Officeholder attending meetings
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder nam	le Office sou	ght	Office held

EXP	ENDITURI	ES MADE		r card		SCHEDULE F4
Accountin Consulting Contributio	g Expense g/Banking g Expense ons/ Donations Made B late/Officeholder/Politica		EXPENDITURE (Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	Office Ov Polling E: Dense Printing E Salaries/	ayment/Reimbursement erhead/Rental Expense kpense xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pag Sch: 39	ges Schedule F4: /68 Rpt:		/E /nn D. (The Honorat	ble)		3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL	OF UNITEMI	ZED EXPEN	DITURES CHARG	GED TO A CRE	DIT CARD	\$
5 Date 06/29/20	023	6 Payee nam Parkrecei				I
7 Amount ((\$) \$6.66	8 Payee add 5000 Lega Plano, TX	acy Dr	State; Zip Co	ode	
	E OF DITURE	X	Political	Non-Pol	itical	
_ c	Pose DF Diture	(a) Category Fees	(See Categories listed at the t	op of this schedule)	Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense o attend Republican organization event
	e <u>ONLY</u> if direct ure to benefit C/O		fficeholder name	Office sou	ıght	Office held
Date 01/27/20	023	Payee nam Quality Lo	e go Products			
Amount ((\$) \$704.50	Payee add 724 North Aurora, IL	Highland Avenue	State; Zip Co	ode	
	E OF DITURE		Political	Non-Pol	itical	
c	POSE)F DITURE		(See Categories listed at the te g Expense	op of this schedule)	Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense campaign logo give away items
	e <u>ONLY</u> if direct ure to benefit C/O		fficeholder name	Office sou	ight	Office held

EXPENDITUR	RES MADE BY CRED	IT CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Mad Candidate/Officeholder/Pol	Event Expense Fees Food/Beverage Expense By - Gift/Awards/Memorials B titical Committee Legal Services		t Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F			3 Filer ID (Ethics Commission Filers)
Sch: 40/68 Rpt:	Stucky, Lynn D. (The Honor	able)	00080276
TOTAL OF UNITER	/IIZED EXPENDITURES CHAR	RGED TO A CREDIT CARD	\$
5 Date 02/14/2023	6 Payee name Robson Publishing		
7 Amount (\$) \$166.0	 8 Payee address; City; 9532 East Riggs Road 	State; Zip Code	
	Sun Lakes, AZ 85248		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Advertising Expense	Check if trav	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense advertisement placement in local monthly paper
11 Complete <u>ONLY</u> if direct expenditure to benefit C		Office sought	Office held
Date 06/20/2023	Payee name Rudy's BBQ		
Amount (\$) \$53.7		State; Zip Code	
TYPE OF	Denton, TX 76205		
EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Food/Beverage Expense	Check if trav	el outside of Texas. Complete Schedule T. ttin, TX, officeholder living expense eeting with District staff to discuss SSUES
Complete <u>ONLY</u> if direc expenditure to benefit C		Office sought	Office held

	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expe	Office Overh Polling Expe ense Printing Exp Salaries/Wa	ment/Reimbursement ead/Rental Expense nse ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F4: Sch: 41/68 Rpt:	2 FILER NAME 3 Filer ID (Ethics Commission File Stucky, Lynn D. (The Honorable) 00080276				
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARG	ED TO A CRED	IT CARD	\$	
5	Date 03/26/2023	6 Payee name Sam's Club				
7	Amount (\$) \$93.93	 8 Payee address; City; 2850 W University Dr Denton, TX 76201 	State; Zip Cod	Ģ		
9	TYPE OF EXPENDITURE	X Political	Non-Politic	al		
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Event Expense	o of this schedule)	Check if Austin	outside of Texas. Complete Schedule T. 1, TX, officeholder living expense grand opening of District office in Wise	
11	. Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	nt	Office held	
	Date 01/12/2023	Payee name Sanger Chamber of Commerce)			
	Amount (\$) \$30.00	Payee address; City; 300 Bolivar Sanger, TX 76266	State; Zip Code	2		
	TYPE OF EXPENDITURE	X Political	Non-Politic	al		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Fees	o of this schedule)	Check if Austin	outside of Texas. Complete Schedule T. a, TX, officeholder living expense ct staff to attend Sanger Chamber of Incheon	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	nt	Office held	

EXPENDITURE	S MADE BY CREDIT C	ARD	COUER	OULE F4
			JUNEL	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repayment/ Office Overhead/f Polling Expense Printing Expense Salaries/Wages/C	Reimbursement Rental Expense Scheart Labor Rental Expense Rental Expense Transportation Equipment & Re Travel in District Travel Out of District OTHER (enter a category not list	lated Expense
1 Total pages Schedule F4: Sch: 42/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorable)		3 Filer ID (Ethics Con 00080276	nmission Filers)
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED	TO A CREDIT	CARD \$	
5 Date 02/22/2023	6 Payee name Sanger Chamber of Commerce			
7 Amount (\$) \$15.00	8 Payee address; City; 300 Bolivar Sanger, TX 76266	State; Zip Code		
9 TYPE OF EXPENDITURE	X Political	Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of t Fees		escription Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Fee for District Director to attend Sang of Commerce luncheon	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held	
Date 03/19/2023	Payee name Sanger Chamber of Commerce			
Amount (\$) \$15.00	300 Bolivar	State; Zip Code		
TYPE OF	Sanger, TX 76266	Non-Political		
EXPENDITURE PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of t Fees	his schedule) (b) D	escription Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Fee for District Director to attend Sang of Commerce luncheon	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held	

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repaymer Office Overhead Polling Expense Printing Expens Salaries/Wages	nt/Reimbursement d/Rental Expense e e /Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1 Total pages Schedule F4: Sch: 43/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00080276	
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED	TO A CREDIT	CARD	\$	
5 Date 04/24/2023	6 Payee name Sanger Chamber of Commerce		I		
7 Amount (\$) \$15.00	 8 Payee address; City; 300 Bolivar Sanger, TX 76266 	State; Zip Code			
9 TYPE OF EXPENDITURE	X Political	Non-Political			
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Fees	this schedule) (b)	Check if Austin,	nutside of Texas. Complete Schedule T. TX, officeholder living expense Int Director to attend Sanger Chamber Iuncheon	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought		Office held	
Date 05/19/2023	Payee name Sanger Chamber of Commerce				
Amount (\$) \$15.00	300 Bolivar	State; Zip Code			
TYPE OF	Sanger, TX 76266	Non-Political			
EXPENDITURE PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Fees	<u> </u>	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense ct Director to attend Sanger Chamber luncheon	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought		Office held	

	EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Rep Office Ove Polling Ex nse Printing E Salaries/M	ayment/Reimbursement rhead/Rental Expense pense pense /ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
L	Total pages Schedule F4: Sch: 44/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorable	e)		3 Filer ID (Ethics Commission Filers) 00080276
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGI	ED TO A CRE	DIT CARD	\$
5	Date 06/26/2023	6 Payee name Sanger Chamber of Commerce	9		
7	Amount (\$) \$15.00	 8 Payee address; City; 300 Bolivar Sanger, TX 76266 	State; Zip Co	de	
9	TYPE OF EXPENDITURE	X Political	Non-Poli	ical	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Fees) of this schedule)	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ct Director to attend Sanger Chamber e luncheon
11	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ght	Office held
	Date 01/20/2023	Payee name Smoking Windmill BBQ			
	Amount (\$) \$33.45	Payee address; City; 3527 TX-114	State; Zip Co	de	
	TYPE OF	Rhome, TX 76078			
	EXPENDITURE	X Political	Non-Poli		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	o of this schedule)	Check if Austin Food for Dist	outside of Texas. Complete Schedule T. a, TX, officeholder living expense rict staff attending Wise County e Club luncheon
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ght	Office held

EXPENDITUR	EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Expe al Committee Legal Services	ATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursemen Office Overhead/Rental Expense Polling Expense ense Printing Expense Salaries/Wages/Contract Labor explains how to complete this form.					
1 Total pages Schedule F4: Sch: 45/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorabl	le)	3 Filer ID (Ethics Commission Filers) 00080276				
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	ED TO A CREDIT CARD	\$				
5 Date 02/17/2023	6 Payee name Smoking Windmill BBQ						
7 Amount (\$) \$35.94	8 Payee address; City; 3527 TX-114	State; Zip Code					
9 TYPE OF EXPENDITURE	Rhome, TX 76078	Non-Political					
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check if trav	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense istrict staff attending Wise County ve Club luncheon				
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held				
Date 03/17/2023	Payee name Smoking Windmill BBQ						
Amount (\$) \$19.83	Payee address; City; 3527 TX-114	State; Zip Code					
	Rhome, TX 76078						
TYPE OF EXPENDITURE	X Political	Non-Political					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check if trav	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense istrict staff attending Wise County ve Club luncheon				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held				

EXPENDITURI	ES MADE BY CREDIT	CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Expe al Committee Legal Services	ATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Salaries/Wages/Contract Labor explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 46/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorabl	e)	3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	ED TO A CREDIT CARD	\$
5 Date 04/21/2023	6 Payee name Smoking Windmill BBQ		
7 Amount (\$) \$39.65	8 Payee address; City; 3527 TX-114	State; Zip Code	
9 TYPE OF EXPENDITURE	Rhome, TX 76078	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check if trave Check if Aust Food for Dis	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense strict staff attending Wise County re Club luncheon
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 05/19/2023	Payee name Smoking Windmill BBQ		
Amount (\$) \$20.34	Payee address; City; 3527 TX-114	State; Zip Code	
	Rhome, TX 76078		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check if trave Check if Aust Food for Dis	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense strict staff attending Wise County re Club luncheon
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

EXPENDITURE	EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expe	Office Overh Polling Expe ense Printing Expe Salaries/Wag	nent/Reimbursement ead/Rental Expense ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule F4: Sch: 47/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorabl	e)		3 Filer ID (Ethics Commission Filers) 00080276		
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED TO A CREDIT CARD \$					
5 Date 06/19/2023	6 Payee name Smoking Windmill BBQ					
7 Amount (\$) \$38.15	8 Payee address; City; 3527 TX-114	State; Zip Code	9			
9 TYPE OF EXPENDITURE	Rhome, TX 76078	Non-Politic	al			
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	o of this schedule) (Check if Austin Food for Dist	outside of Texas. Complete Schedule T. n, TX, officeholder living expense trict staff attending Wise County e Club luncheon		
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	nt	Office held		
Date 01/06/2023	Payee name Spectrum					
Amount (\$) \$192.74	Payee address; City; PO Box 60074	State; Zip Code	2			
	City of Industry, CA 91716-007	4				
TYPE OF EXPENDITURE	X Political	Non-Politic	al			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expense		X Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense cable expenses for Officeholder's Austin		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	nt	Office held		

EXPENDITURE	ES MADE BY CREDIT C	CARD		SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repayme Office Overhea Polling Expense Printing Expense Salaries/Wages	nt/Reimbursement d/Rental Expense e se s/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 48/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED	TO A CREDIT	CARD	\$
5 Date 02/06/2023	6 Payee name Spectrum			
7 Amount (\$) \$200.76	8 Payee address; City; PO Box 60074 City of Industry, CA 91716-0074	State; Zip Code		
9 TYPE OF EXPENDITURE	X Political	Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense	this schedule) (b)	X Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense cable expenses for Officeholder's Austin
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought		Office held
Date 03/06/2023	Payee name Spectrum			
Amount (\$) \$214.69	Payee address; City; PO Box 60074 City of Industry, CA 91716-0074	State; Zip Code		
TYPE OF EXPENDITURE	X Political	Non-Political		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense	this schedule) (b)	X Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense cable expenses for Officeholder's Austin
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought		Office held

EXPENDITURE	ES MADE BY CREDIT C	ARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repayment/Re Office Overhead/Re Polling Expense Printing Expense Salaries/Wages/Cor	einbursement Solicitation/Fundraising Expense transportation Equipment & Related Expense Travel in District Travel Out of District tract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 49/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED	TO A CREDIT C	ARD \$
5 Date 04/06/2023	6 Payee name Spectrum		
7 Amount (\$) \$214.69	8 Payee address; City; S PO Box 60074 City of Industry, CA 91716-0074	State; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of th Office Overhead/Rental Expense	[⊥ ×	cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ernet and cable expenses for Officeholder's artment in Austin
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 05/06/2023	Payee name Spectrum		
Amount (\$) \$214.69	Payee address; City; S PO Box 60074 City of Industry, CA 91716-0074	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of th Office Overhead/Rental Expense	⊥ ×	cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ernet and cable expenses for Officeholder's artment in Austin
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD					
				SCHEDULE F4	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Exp	Office Ove Polling Exp pense Printing Exp Salaries/W	yment/Reimbursement rhead/Rental Expense pense pense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1 Total pages Schedule F4: Sch: 50/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorab	ble)		3 Filer ID (Ethics Commission Filers) 00080276	
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	GED TO A CRE	DIT CARD	\$	
5 Date 06/07/2023	6 Payee name Spectrum				
7 Amount (\$) \$214.69	8 Payee address; City; PO Box 60074	State; Zip Co	de		
	City of Industry, CA 91716-007	74			
9 TYPE OF EXPENDITURE	X Political	Non-Polit			
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Office Overhead/Rental Exper		X Check if Austi	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense cable expenses for Officeholder's Austin	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held	
Date 01/01/2023	Payee name Squarespace				
Amount (\$) \$35.72	Payee address; City; 225 Varick Street	State; Zip Co	de		
	New York City, NY 10014				
TYPE OF EXPENDITURE	X Political	Non-Polit	ical		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Advertising Expense	op of this schedule)	Check if Austi	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense to maintain Campaign website	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held	

EXPENDITUR	ES MADE BY CRED	T CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials E al Committee Legal Services		ense Transportation Equipment & Related Expense Travel in District Travel Out of District bor OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 51/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honora	able)	3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHAR	GED TO A CREDIT CARD	\$
5 Date 01/28/2023	6 Payee name Squarespace		
7 Amount (\$) \$35.72	8 Payee address; City; 225 Varick Street New York City, NY 10014	State; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Advertising Expense	Check	on if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense fee to maintain Campaign website
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	I Candidate/Officeholder name H	Office sought	Office held
Date 02/28/2023	Payee name Squarespace		
Amount (\$) \$35.72	Payee address; City; 225 Varick Street	State; Zip Code	
TYPE OF	New York City, NY 10014		
EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Advertising Expense	Check	on if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense fee to maintain Campaign website
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

EXPENDITUR	ES MADE BY CRED	IT CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials E al Committee Legal Services		nt Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 52/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honora	able)	3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHAR	GED TO A CREDIT CARD	\$
5 Date 03/28/2023	6 Payee name Squarespace		
7 Amount (\$) \$35.72	8 Payee address; City; 225 Varick Street New York City, NY 10014	State; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Advertising Expense	Check if tra	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense e to maintain Campaign website
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 04/28/2023	Payee name Squarespace		
Amount (\$) \$35.72	Payee address; City; 225 Varick Street	State; Zip Code	
TYPE OF	New York City, NY 10014		
EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Advertising Expense	Check if tra	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense e to maintain Campaign website
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

EXPENDITURI	ES MADE BY CRED	IT CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials E al Committee Legal Services		se Transportation Equipment & Related Expense Travel in District Travel Out of District r OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 53/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honora	able)	3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHAR	GED TO A CREDIT CARD	\$
5 Date 05/29/2023	6 Payee name Squarespace		
7 Amount (\$) \$35.72	8 Payee address; City; 225 Varick Street	State; Zip Code	
9 TYPE OF EXPENDITURE	New York City, NY 10014	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Advertising Expense	Check if t	ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense ee to maintain Campaign website
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 06/29/2023	Payee name Squarespace		
Amount (\$) \$35.72	Payee address; City; 225 Varick Street	State; Zip Code	
	New York City, NY 10014		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Advertising Expense	Check if t	ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense ee to maintain Campaign website
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

Γ	EXPENDITURES MADE BY CREDIT CARD					
						SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		EXPENDITURE C Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	Loan Rep Office Ov Polling E ense Printing E Salaries/	ayment/Reimbursement erhead/Rental Expense cpense xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 54/68 Rpt:		IE nn D. (The Honorab	le)		3 Filer ID (Ethics Commission Filers) 00080276 00080276
4	TOTAL OF UNITEMIZ	ZED EXPENI	DITURES CHARG	ED TO A CRE	DIT CARD	\$
5	Date 03/13/2023	6 Payee nam StickerYou				
7	Amount (\$) \$76.82	8 Payee addr 670 Caled Unit 101 Toronto O		State; Zip Co ada	ode	
9	TYPE OF EXPENDITURE	X	Political	Non-Pol	itical	
10) PURPOSE OF EXPENDITURE	(a) Category (Advertising	See Categories listed at the to g Expense	p of this schedule)	Check if Aust	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense de campaign decals
11	L Complete <u>ONLY</u> if direct expenditure to benefit C/OI		fficeholder name	Office sou	l Ight	Office held
	Date 01/26/2023	Payee nam Sweetie P	e ie's Ribeyes			
	Amount (\$) \$88.86	Payee addr 201 W Ma		State; Zip Co	ode	
L		Decatur, T	X 76234			
	TYPE OF EXPENDITURE	X	Political	Non-Pol	itical	
	PURPOSE OF EXPENDITURE		See Categories listed at the to prage Expense	op of this schedule)	Check if Aust	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense eeting with District staff to discuss ssues
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		fficeholder name	Office sou	ight	Office held

EXPENDITUR	ES MADE BY CREDIT	CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Expe al Committee Legal Services	Office Overhead Polling Expense Printing Expense	ent/Reimbursement ad/Rental Expense se Transportation Equipment & Related Expense Travel in District se Travel Out of District s/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 55/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorabl	e)	3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	ED TO A CREDIT	T CARD \$
5 Date 03/26/2023	6 Payee name Target		
7 Amount (\$) \$30.35	8 Payee address; City; 1801 S Loop 288 Denton, TX 76205	State; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	I
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Event Expense	o of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Refreshments for grand opening of District office in Wise County
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 06/15/2023	Payee name Texas Strong Republican Wom	ien's Club	
Amount (\$) \$20.00	Payee address; City; PO Box 549 Argyle, TX 76226	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	I
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Fees	o of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fee for district director to attend GOP lunch meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

EXPENDITURE	ES MADE BY CRED	IT CARD		SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expens / - Gift/Awards/Memorials I al Committee Legal Services	e Polling Ex Expense Printing Ex	ayment/Reimbursement brhead/Rental Expense pense ypense /ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 56/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honor	abla)		3 Filer ID (Ethics Commission Filers) 00080276
4	ZED EXPENDITURES CHAP	-		\$
5 Date	6 Payee name			•
05/10/2023	Texas Strong Republican W	/omen's Club		
7 Amount (\$) \$20.00	8 Payee address; City; PO Box 549	State; Zip Co	de	
	Argyle, TX 76226			
9 TYPE OF EXPENDITURE	X Political	Non-Poli	tical	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at th Fees	e top of this schedule)	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ict Director to attend local Republican
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held
Date 03/02/2023	Payee name Texas Strong Republican W	/omen's Club		
Amount (\$) \$30.00	Payee address; City; PO Box 549	State; Zip Co	de	
	Argyle, TX 76226			
TYPE OF EXPENDITURE	X Political	Non-Poli	tical	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at th Fees	e top of this schedule)	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense bership dues for District Director to local organization
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office held

	EXPENDITURE	ES MADE BY CREDIT	r card		SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp	Office Ove Polling Ex pense Printing Ex Salaries/W	ayment/Reimbursement rhead/Rental Expense pense pense /ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Fotal pages Schedule F4: Sch: 57/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorab	ole)		3 Filer ID (Ethics Commission Filers) 00080276
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARG	GED TO A CRE	DIT CARD	\$
	Date 05/10/2023	6 Payee name The Florist			
7 4	Amount (\$) \$202.39	 8 Payee address; City; 1425 Malone St Denton, TX 76201 	State; Zip Co	de	
9	TYPE OF EXPENDITURE	X Political	Non-Poli	tical	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Gift/Awards/Memorials Expens		Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense ormer Denton County Judge funeral
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sou	ght	Office held
	Date 04/02/2023	Payee name The Stephen F Austin Royal S	Sonesta Hotel		
A	Amount (\$) \$38.48	Payee address; City; 701 Congress Ave	State; Zip Co	de	
	TYPE OF EXPENDITURE	Austin, TX 78701	Non-Poli	tical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Food/Beverage Expense	op of this schedule)	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense eting with Capital office staff to discuss sues
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sou	ght	Office held

EXPENDITURE	ES MADE BY CREDIT CARD		SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Offic Food/Beverage Expense Pollin - Gift/Awards/Memorials Expense Print	Repayment/Reimbursement Overhead/Rental Expense g Expense ng Expense es/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 58/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorable)	-	Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED TO A C	REDIT CARD \$	
5 Date 01/01/2023	6 Payee name USPS		
7 Amount (\$) \$27.90	 8 Payee address; City; State; Zip 101 E McKinney St Denton, TX 76201 	Code	
9 TYPE OF EXPENDITURE		Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check if Austin, TX,	le of Texas. Complete Schedule T. officeholder living expense official paperwork
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O		sought	Office held
Date 01/04/2023	Payee name USPS		
Amount (\$) \$202.00	Payee address; City; State; Zip 101 E McKinney St	Code	
TYPE OF	Denton, TX 76201	Political	
EXPENDITURE PURPOSE			
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check if Austin, TX,	le of Texas. Complete Schedule T. officeholder living expense ual renewal of campaign PO Box
Complete <u>ONLY</u> if direct expenditure to benefit C/O		sought	Office held

	ES MADE BY CREDI	T CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Exp al Committee Legal Services	CATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor e explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 59/68 Rpt:	Stucky, Lynn D. (The Honoral	ble)	00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARC	GED TO A CREDIT CARD	\$
5 Date	6 Payee name		
03/24/2023	Uber		
7 Amount (\$) \$28.75	 8 Payee address; City; 1455 Market St San Francisco, TX 94103 	State; Zip Code	
	San Francisco, 1× 94103		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Travel Out of District	Check if trave	outside of Texas. Complete Schedule T. n, TX, officeholder living expense on for Officeholder attending meetings in
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 01/31/2023	Payee name Uber		
Amount (\$) \$10.81	Payee address; City; 1455 Market St	State; Zip Code	
	San Francisco, TX 94103		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Travel Out of District	Check if trave	outside of Texas. Complete Schedule T. n, TX, officeholder living expense on for Officeholder attending meetings in
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

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	EXPENDITURE	ES MADE BY CREDI	T CARD	SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex I Committee Legal Services	CATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor de explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F4: Sch: 60/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honora	ble)	3 Filer ID (Ethics Commission Filers) 00080276
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHAR	GED TO A CREDIT CARD	\$
5	Date 02/09/2023	6 Payee name Uber		
7	Amount (\$) \$11.70	 8 Payee address; City; 1455 Market St San Francisco, TX 94103 	State; Zip Code	
9	TYPE OF EXPENDITURE	X Political	Non-Political	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Travel Out of District	Check if trav	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense ion for Officeholder attending meetings in
11	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held
	Date 03/07/2023	Payee name Uber		
	Amount (\$) \$10.88	Payee address; City; 1455 Market St	State; Zip Code	
		San Francisco, TX 94103		
	TYPE OF EXPENDITURE	X Political	Non-Political	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Travel Out of District	Check if trav	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense ion for Officeholder attending meetings in
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

_				
	EXPENDITURE	ES MADE BY CREDI	T CARD	SCHEDULE F4
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense - Gift/Awards/Memorials Ex I Committee Legal Services	CATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursemer Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor le explains how to complete this form.	
1	Total pages Schedule F4: Sch: 61/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honoral	ble)	3 Filer ID (Ethics Commission Filers) 00080276
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARC	GED TO A CREDIT CARD	\$
5	Date 04/25/2023	6 Payee name Uber		1
7	Amount (\$) \$11.96	 8 Payee address; City; 1455 Market St San Francisco, TX 94103 	State; Zip Code	
9	TYPE OF EXPENDITURE	X Political	Non-Political	
10) PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Travel Out of District	Check if tra	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense tion for Officeholder attending meetings in
11	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held
	Date 04/25/2023	Payee name Uber		
	Amount (\$) \$8.89	Payee address; City; 1455 Market St	State; Zip Code	
L	TVD5 05	San Francisco, TX 94103		
	TYPE OF EXPENDITURE	X Political	Non-Political	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Travel Out of District	Check if tra	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense tion for Officeholder attending meetings in
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought	Office held

	ES MADE BY CREDI	T CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Ex al Committee Legal Services	CATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor de explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 62/68 Rpt:	Stucky, Lynn D. (The Honora	ble)	00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHAR	GED TO A CREDIT CARD	\$
5 Date	6 Payee name		
05/17/2023	Uber		
7 Amount (\$) \$10.48	8 Payee address; City; 1455 Market St San Francisco, TX 94103	State; Zip Code	
	Sall Flancisco, 1× 94103		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Travel Out of District	Check if trave	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense on for Officeholder attending meetings in
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 06/22/2023	Payee name Uber		
Amount (\$) \$9.61	Payee address; City; 1455 Market St	State; Zip Code	
	San Francisco, TX 94103		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Travel Out of District	Check if trave	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense on for Officeholder attending meetings in
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4				
			SUREDULE F4	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Expe al Committee Legal Services	CATEGORIES FOR BOX 10(a) Loan Repayment/Reimburse Office Overhead/Rental Expe Polling Expense ense Printing Expense Salaries/Wages/Contract Lat explains how to complete this form	ense Transportation Equipment & Related Expense Travel in District Travel Out of District oor OTHER (enter a category not listed above)	
1 Total pages Schedule F4: Sch: 63/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorabl	le)	3 Filer ID (Ethics Commission Filers) 00080276	
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	ED TO A CREDIT CARD	\$	
5 Date 05/11/2023	6 Payee name Valentino Online			
7 Amount (\$) \$454.65	 8 Payee address; City; 47 Highland Park Village 	State; Zip Code		
9 TYPE OF EXPENDITURE	Dallas, TX 75205	Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Gift/Awards/Memorials Expens	Ge Check it	n f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense committee chair	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	L Candidate/Officeholder name H	Office sought	Office held	
Date 01/09/2023	Payee name Via 313 East Side			
Amount (\$) \$43.30	Payee address; City; 1802 E 6th	State; Zip Code		
TYPE OF	Austin, TX 78702			
EXPENDITURE	X Political	Non-Political		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	Check i Check i Food for	n f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense r meeting with constituents to discuss /e issues	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held	

EXPENDITURI	ES MADE BY CREDI	T CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense g - Gift/Awards/Memorials Ex al Committee Legal Services	CATEGORIES FOR BOX 10 Loan Repayment/Reir Office Overhead/Rent Polling Expense Printing Expense Salaries/Wages/Contr de explains how to complete th	Abursement Solicitation/Fundraising Expense al Expense Transportation Equipment & Related Expense Travel in District Travel Out of District act Labor OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 64/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honora	ble)	3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHAR	GED TO A CREDIT CA	RD \$
5 Date 01/13/2023	6 Payee name Walmart		
7 Amount (\$) \$20.23	8 Payee address; City; 12900 N I-35 SVC Rd Sb Austin, TX 78753	State; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Office Overhead/Rental Expe	ense	ription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense plies for Capital office
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 03/23/2023	Payee name Walmart		
Amount (\$) \$34.53	Payee address; City; 1515 S Loop 288	State; Zip Code	
TYPE OF	Denton, TX 76205		
EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Office Overhead/Rental Expe	ense	ription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Plies for District office in Denton Co.
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

EXPENDITURE	ES MADE BY CREDIT	CARD		SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense g - Gift/Awards/Memorials Exper	Office Overhe Polling Expensionse Printing Expensionse Salaries/Wage	ent/Reimbursement ad/Rental Expense se ise iss/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 65/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorable	e)		3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHARGE	ED TO A CREDI	T CARD	\$
5 Date 03/23/2023	6 Payee name Walmart			
7 Amount (\$) \$27.66	8 Payee address; City; 800 US 287 Decatur, TX 76234	State; Zip Code		
9 TYPE OF EXPENDITURE	X Political	Non-Politica	l	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rental Expens		Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense s for grand opening of the District office nty
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought		Office held
Date 03/26/2023	Payee name Walmart			
Amount (\$) \$4.11	Payee address; City; 800 US 287	State; Zip Code		
TYPE OF	Decatur, TX 76234	Non Dolition		
EXPENDITURE	X Political	Non-Politica		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Event Expense	of this schedule) (D)	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense is for grand opening of the District office nty
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought		Office held

EXPENDITURE	ES MADE BY CREDIT	CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense - Gift/Awards/Memorials Expe I Committee Legal Services	CATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursemen Office Overhead/Rental Expense Polling Expense ense Printing Expense Salaries/Wages/Contract Labor e explains how to complete this form.	
1 Total pages Schedule F4: Sch: 66/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honorab	le)	3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARG	ED TO A CREDIT CARD	\$
5 Date 03/29/2023	6 Payee name Wise County Chamber of Com	imerce	
7 Amount (\$) \$30.00	 8 Payee address; City; 301 E Main St Ste. C Decatur, TX 76234 	State; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Fees	Check if tra Check if Au Payment fo	vel outside of Texas. Complete Schedule T. Istin, TX, officeholder living expense or District staff to attend Wise County of Commerce luncheon
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 04/27/2023	Payee name Wise County Chamber of Com	imerce	
Amount (\$) \$30.00	Payee address; City; 301 E Main St Ste. C Decatur, TX 76234	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Fees	Check if tra Check if Au Payment fo	vel outside of Texas. Complete Schedule T. Istin, TX, officeholder living expense or District staff to attend Wise County of Commerce luncheon
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

EXPENDITURE	ES MADE BY CREDI	T CARD		SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense / - Gift/Awards/Memorials Ex I Committee Legal Services	Office Overhe Polling Exper xpense Printing Expe	hent/Reimbursement ad/Rental Expense se nse es/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4: Sch: 67/68 Rpt:	2 FILER NAME Stucky, Lynn D. (The Honora	ble)		3 Filer ID (Ethics Commission Filers) 00080276
⁴ TOTAL OF UNITEMI	ZED EXPENDITURES CHAR	GED TO A CRED	T CARD	\$
5 Date 04/30/2023	6 Payee name Wise County Chamber of Co	mmerce		•
7 Amount (\$) \$50.00	8 Payee address; City; 301 E Main St Ste. C Decatur, TX 76234	State; Zip Code		
9 TYPE OF EXPENDITURE	X Political	Non-Politica	al	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Fees	top of this schedule) (b	Check if Austin Payment for	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense District staff to attend Wise County Commerce luncheon
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	t	Office held
Date 06/02/2023	Payee name Wise County Chamber of Co	mmerce		
Amount (\$) \$30.00	Payee address; City; 301 E Main St Ste. C Decatur, TX 76234	State; Zip Code		
TYPE OF EXPENDITURE	X Political	Non-Politica	al	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Fees	top of this schedule) (b	Check if Austin Payment for	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense District staff to attend Wise County Commerce luncheon
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	t	Office held

	ES MADE BY CREDIT CARD		SCHEDULE F4					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Office Ove Food/Beverage Expense Polling Ex - Gift/Awards/Memorials Expense Printing Ex	Aryment/Reinbursement erhead/Rental Expense copense xpense Vages/Contract Labor Solicitation/Fundrai Transportation Equ Travel in District Travel out of Distri OTHER (enter a ca	ipment & Related Expense					
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID	(Ethics Commission Filers)					
Sch: 68/68 Rpt:	Stucky, Lynn D. (The Honorable)	00080276						
⁴ TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED TO A CRE	DIT CARD \$						
5 Date	6 Payee name							
06/12/2023	Wise County Messenger							
7 Amount (\$) \$1,025.00	8 Payee address; City; State; Zip Co 115 S Trinity St	ıde						
	Decatur, TX 76234							
9 TYPE OF EXPENDITURE	X Political Non-Poli	itical						
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Comple Check if Austin, TX, officeholder living ex Campaign advertisement in lo publication	xpense					
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight Office held	1					

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instruction Guide explains how to complete this form.			1	1 Total pages Schedule K: Sch: 1/2 Rpt: 111/112		
2	2 FILER NAME			12		D (Ethics Commission F	ilore)
-	Stucky, Lynn D. (The Honorable)			ľ	0008		11013)
4	Date		Name of person from whom amount is received		•	8 Amount (\$)	
	05/29/2023	ľ	Angelia Orr Campaign				\$64.95
	•••	6	Address of person from whom amount is received; City; State; Zip Code				*
			Itasca, TX 76055				
	l	7 Purpose for which amount is received Check if political contribution returned to filer					
			Reimbursement for committee chairman's gift				
	Date	Ē	Name of person from whom amount is received			Amount (\$)	
	05/29/2023		Jolanda Jones for State Representative Campaign				\$64.95
	I		Address of person from whom amount is received; City; State; Zip Code				
	l						
	l						
	I	L	Houston, TX 77024				
	l		Purpose for which amount is received Check if p Reimbursement for committee chairman's gift	oliti	cal con	tribution returned to filer	
L		Ļ				+	
	Date		Name of person from whom amount is received			Amount (\$)	
	05/29/2023	ļ	Jon Rosenthal for Texas Election Committee Campaign				\$64.95
	l	Address of person from whom amount is received; City; State; Zip Code					
	l						
			Houston, TX 77041				
	l	┝		oliti	cal con	I tribution returned to filer	
			Reimbursement for committee chairman's gift	· • · ·			
	Date	\vdash	Name of person from whom amount is received			Amount (\$)	
	05/29/2023		Schatzline, Nathaniel			/ inicant (+)	\$64.95
			Address of person from whom amount is received; City; State; Zip Code				•
	l						
	l						
	I		Fort Worth, TX 76244				
	l			oliti	cal con	tribution returned to filer	
			Reimbursement for committee chairman's gift				
	Date	\Box	Name of person from whom amount is received			Amount (\$)	
	05/29/2023		Stan for Texas Campaign				\$64.95
	l		Address of person from whom amount is received; City; State; Zip Code				
	l						
	l						
	I	L	Smithville, TX 78957				
	I		<u> </u>	oliti	cal con	tribution returned to filer	
\vdash	Reimbursement for committee chairman's gift						
l I							I

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instruction Guide explains how to complete this form.			1		bages Schedule K: 2/2 Rpt: 112/112	
2	2 FILER NAME			3	Filer I	D (Ethics Commission File	ers)
	Stucky, Lynn D. (The Honorable)				8000	0276	
4	Date	5	Name of person from whom amount is received			8 Amount (\$)	
	05/29/2023		Tony Tinderholt for Texas			\$	64.95
		6	Address of person from whom amount is received; City; State; Zip Code				
			Advertee TV 20012				
		_	Arlington, TX 76017				
		ľ		olitio	cal con	tribution returned to filer	
			Reimbursement for committee chairman's gift				