CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FOF	RM (C/OH	
COVER SH	EET	PG 1	

Th	ne C/OH Instruction (Guide explains how to comp	lete this form.	1 Filer ID (Ethics Comm 00020493		2 Total pages fi 1	led: 49
3	CANDIDATE /	MS / MRS / MR	FIRST	•	MI	OFFICE	USE ONLY
	OFFICEHOLDER	The Honorable	Todd A.				
	NAME					Date Received	
						ELECTRONIC	ALLY FILED
		NICKNAME	LAST		SUFFIX	01/16/2024	
			Hunter				
Ŀ						Dete Hand delburged	n Data Daatuu d
4	CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/SUITE#; CI	IY;	ZIP CODE	Date Hand-delivered o	or Date Postmarked
	MAILING	445 Cape Henry				Dessint //	A manual t
	ADDRESS					Receipt #	Amount
	Change of Address	Corpus Christi, TX 78412				Data Daaraa	
						Date Processed	
						Data luca sa d	
						Date Imaged	
5	CAMPAIGN	MS / MRS / MR	FIRST		MI		
ľ	TREASURER				IVII		
	NAME	Mr.	Glen				
		NICKNAME	LAST		SUFFIX		
			Guillory				
6	CAMPAIGN	STREET ADDRESS (NO PC	BOX PLEASE);	AP	T / SUITE #; CITY;	ST	ATE; ZIP CODE
	TREASURER	2755 Shady Oak Ln.					
	ADDRESS						
	(Residence or Business)	Inglasida TV 70262					
		Ingleside, TX 78362					
7	CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION			
Ľ	TREASURER	(361) 944-7725					
	PHONE	(301) 344-1123					
8	REPORT						
ľ	TYPE	X January 15	30th day befor	e election	Runoff	1 15th day after ca	mpaign treasurer
						appointment (offi	
		July 15	8th day before	election	Exceeded modified	Final Report (Atta	ach C/OH-FR)
			_		reporting limit	-	
9	PERIOD	Month Day Year			Month Day	Year	
	COVERED	07/01/2023	T	HROUGH	12/31/2023	3	
10	ELECTION	ELECTION DATE			ELECTION TYPE		
		Month Day Year		Primary	Runoff	Other	
				Demonal			
				General	Special		
					i		
11	OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
		State Representative Dist	rict 32				
Γ					-		
1							
1			GO .	TO PAGE 2			
Ļ							
F0	rms provided by Te	xas Ethics Commission	www.e	thics.state.tx.u	S	Vers	sion V3.5.1.f1b8c3f1

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH **COVER SHEET PG 2** 2 of 149

13 C / OH NAME	Hunter, Todd A. (Th	e Honorable)		14 Filer ID 00020493	(Ethics C	ommission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder	. These expenditures r	accepted or political expendit nay have been made without uired to report this informatic	the candidate's or offic	eholder's	knowledge or
X Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	X GENERAL	Associated Repub	licans of Texas GPAC			
		COMMITTEE ADDR	ESS			
	SPECIFIC	807 Brazos, Ste 6	01			
		Austin, TX 78746				
			AIGN TREASURER NAME			
		De Leon, Hector				
			AIGN TREASURER ADDRE	SS		
		901 S Mopac, Ste	3600			
		Austin, TX 78746				
16 CONTRIBUTION TOTALS			NTRIBUTIONS (OTHER THA ONTRIBUTIONS MADE ELE		\$	0.00
		CAL CONTRIBUTION PLEDGES, LOANS, C	S IR GUARANTEES OF LOAN	S)	\$	437,291.87
EXPENDITURE TOTALS	3. TOTAL UNITEN	/IZED POLITICAL EXF	PENDITURES		\$	0.00
	4. TOTAL POLITI	CAL EXPENDITURES			\$	397,762.99
CONTRIBUTION BALANCE	5. TOTAL POLITIO REPORTING P		MAINTAINED AS OF THE I	LAST DAY OF THE	\$	1,445,887.81
OUTSTANDING LOAN TOTALS		PAL AMOUNT OF ALL RTING PERIOD	OUTSTANDING LOANS AS	S OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		tr	swear, or affirm, under penal ue and correct and includes a nder Title 15, Election Code.			
			The Hon	orable Todd A. Hunt	er	
			Signature o	f Candidate or Officeho	older	
AFFIX NO	DTARY STAMP / SEAL AB	BOVE				
Sworn to and subs	scribed before me, by the	said		, this the		day
of	, 20, to o	certify which, witness m	ly hand and seal of office.			
Signature of off	ficer administering	Printed name of	officer administering	Title of office	er adminis	tering oath

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH

Page 3 of 149

				Page 3 of 149
C / OH NAME	Hunter, Todd A. (The	e Honorable)	Filer ID 00020493	(Ethics Commission Filers)
17 NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have	of political expenditures by political committees to s been made without the candidate's or officeholder's ed to report this information only if they receive notic	s knowledge or co	onsent. Candidates and
	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Texas Alliance for Life PAC		
		COMMITTEE ADDRESS		
	SPECIFIC	8000 Centre Park Dr., Ste 380		
		Austin, TX 78754		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Shaw, James		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
		4505 Corazon Cv		
		Round Rock, TX 78681		

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 4 of 149 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Hunter, Todd A. (The Honorable) 00020493 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 433,350.00 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 3,941.87 \$ X SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 6,000.66 З. 4. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 284,817.24 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ 112,945.75 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 \$ 984.67 TO FILER

	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/52 Rpt: 5/149	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
-		d A. (The Honorable)				00020493	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/14/2023	512 Strategies LLC	—				\$1,000.00
		6 Contributor address; City; State; Zip Code					
		Austin, TX 78731					
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 (\$)	
	12/06/2023	A. & M. PAC					\$5,000.00
	1	Contributor address; City; Sta	te; Zip Code،				
	ļ						
	ļ						
		Austin, TX 78768					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	x out-of-state PAC (ID#: C)		Amount of Contribution (\$)	
	11/13/2023	AVANGRID PAC					\$2,500.00
		Contributor address; City; Sta	ιte; Zip Code				
	ļ						
		Washington, DC 20005-209					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	x out-of-state PAC (ID#:	000536573	Γ	Amount of Contribution (\$)	
	12/26/2023	AbbVie PAC					\$2,000.00
		Contributor address; City; Stat	ite; Zip Code				
	ļ						
	ļ						
		North Chicago, IL 60064					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/11/2023	Afuso, Mary					\$150.00
	ļ	Contributor address; City; Stat					
	ļ						
	ļ						
		Corpus Christi, TX 78411					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Homemaker			Homemaker			
1							

	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 2/52 Rpt: 6/149	
2	FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	Hunter, Todo	d A. (The Honorable)		00020493	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
	10/13/2023	Ahuja, Avinash (Mr.)			\$1,000.00
	I	6 Contributor address; City; State; Zip Code			
	I	1			
		Corpus Christi, TX 78401			
			9 Employer (See Instructions	;)	_
	President/Pe	etroleum Engineer	Magnum Producing, LP		
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	10/18/2023	Akers, Cecilia			\$500.00
	I	Contributor address; City; State; Zip Code			
	I	1			
	I	1			
		San Antonio, TX 78259			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
	President		Dr Hector P. Garcia Me	morial Foundation	
	Date	Full name of contributor X out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	10/18/2023	Alexander, Thomas			\$500.00
	I	Contributor address; City; State; Zip Code			
	I	1			
	I	1			
		Corpus Christi, TX 78412			
		pation / Job title (See Instructions)	Employer (See Instructions		
	Physican		Corpus Christi Heart Clir	nic	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	12/08/2023	Allen Boone Humphries Robinson LLP			\$1,000.00
	I	Contributor address; City; State; Zip Code			
	I	1			
	I	1			
		Houston, TX 77027			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
	Date	Full name of contributor X out-of-state PAC (ID#:	000259572)	Amount of Contribution (\$)	
	12/06/2023	American Clean Power Assoc. CLEANPOWER	PAC		\$2,000.00
	I	Contributor address; City; State; Zip Code			
	I	1			
	I	1			
		Washington, DC 20005-1700			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
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	The Instru	ction Guide explains how to con	nplete this fo	rm.	1	Total pages Schedule A1: Sch: 3/52 Rpt: 7/149	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Hunter, Todo	A. (The Honorable)				00020493	
4	Date	5 Full name of contributor out-of	-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/10/2023	American Pharmacy, Inc. GPAC					\$1,000.00
		6 Contributor address; City; State; Zip C	Code				
		Corpus Christi, TX 78401					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date	Full name of contributor out-of	-state PAC (ID#:)		Amount of Contribution (\$)	
	12/06/2023	American Pharmacy, Inc. GPAC					\$1,000.00
		Contributor address; City; State; Zip C	Code				
		Corpus Christi, TX 78401					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor	-state PAC (ID#:)		Amount of Contribution (\$)	
	12/06/2023	Ancira Strategic Partners LLC					\$500.00
		Contributor address; City; State; Zip C	Code				
		Austin, TX 78701-2100					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date		-state PAC (ID#:)		Amount of Contribution (\$)	
	12/06/2023	Aransas-Corpus Christi Pilots PAC	2				\$2,500.00
		Contributor address; City; State; Zip C	Code				
		Corpus Christi TV 70402 2767					
⊢	Dringingloggy	Corpus Christi, TX 78403-2767		Employer (Cap Instructions			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
╘							
	Date	—	-state PAC (ID#:)		Amount of Contribution (\$)	* = 000 00
	07/06/2023	Arnold, Kurt					\$5,000.00
		Contributor address; City; State; Zip C	Code				
		Houston TX 77007					
⊢	Drinoinal asso	Houston, TX 77007	i	Employor (Soo Instructions	<u> </u>		
	Attorney	pation / Job title (See Instructions)		Employer (See Instructions Arnold & Itkin LLP	J		
⊢	Auomey						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this	Total pages Schedule A1: Sch: 4/52 Rpt: 8/149			
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		odd A. (The Honorable)			00020493	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/06/2023	Assoc. of Fire and Casualty Companies of Texas AFACT-PAC				\$750.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78746-7567				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Γ	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/13/2023	Austin Firefighters Association PAC				\$5,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78752				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor X out-of-state PAC (ID#:	C00340075		Amount of Contribution (\$)	
	12/18/2023	BASF Corporation Employees PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Washington, DC 20005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor X out-of-state PAC (ID#:	C00235739)		Amount of Contribution (\$)	
	11/06/2023	BNSF Rail PAC				\$2,500.00
		Contributor address; City; State; Zip Code		1		
		Fort Worth, TX 76161				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/24/2023	Bass III, Murray (Mr.)				\$200.00
	Contributor address; City; State; Zip Code					
L		Corpus Christi, TX 78418	1			
I		pation / Job title (See Instructions)	Employer (See Instructions	5)		
L	Vice Preside	nt - Benefits	Higginbotham			

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/52 Rpt: 9/149	
2	FILER NAME			3	Filer ID (Ethics Commissi	on Filers)
-		d A. (The Honorable)			00020493	01.1,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/10/2023	Beer Alliance of Texas PAC				\$1,500.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78701				
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 (\$)	÷=00.00
	12/06/2023	Beer Alliance of Texas PAC				\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	 5)		
	•			,		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/18/2023	Bell, Jane				\$100.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78411				
		pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Housewife			-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/06/2023	Blackridge				\$10,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> ;)		
	•					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/16/2023	Bohn, Brett				\$1,000.00
		Contributor address; City; State; Zip Code				
		Rockport, TX 78382				
		pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Self		Realtor			

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/52 Rpt: 10/149	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		d A. (The Honorable)			00020493	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/16/2023	Bonilla Investments				\$1,000.00
		6 Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78465				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	10/17/2023	Bottom, Brent (Mr.)				\$1,000.00
		Contributor address; City; State; Zip Code		"		
	Deinsinglasse	Corpus Christi, TX 78401	Freedow (Os o la structione			
	CEO	pation / Job title (See Instructions)	Employer (See Instructions San Jacinto Title Service			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢1 000 00
	10/18/2023	Braselton, Barton (Mr.)				\$1,000.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78413				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Builder/Deve	eloper	Braselton Homes			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/18/2023	Braselton, Fred (Mr.)				\$1,000.00
		Contributor address; City; State; Zip Code				
	Deinsinglasse	Corpus Christi, TX 78413	Freedow (Os o la structione			
	Owner/Home	pation / Job title (See Instructions)	Employer (See Instructions Braselton Homes	S)		
			Diaseiton riomes	<u> </u>		
	Date 10/18/2023	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$200.00
	10/10/2023	Brent Chesney Attorney At Law				Φ200.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78411-4673				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

The Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 7/52 Rpt: 11/149	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	d A. (The Honorable)		00020493	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
10/18/2023	Brentwood Public Affairs			\$1,000.00
	6 Contributor address; City; State; Zip Code		1	
	Austin, TX 78701			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	1 S)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/06/2023	Brentwood Public Affairs			\$1,000.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/10/2023	Bresnen, Steven (Mr.)			\$500.00
	Contributor address; City; State; Zip Code		1	
	Auction TV 70701			
Drincinal occu	Austin, TX 78701 Ipation / Job title (See Instructions)	Employer (See Instructions		
Attorney		Self)	
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)	
Dale 10/18/2023	Full name of contributor out-of-state PAC (ID#: Buskey, Edward (Mr.))		\$250.00
10/10/2020				Ψ200.00
	Continuation address, City, State, Zip Code			
	Port Aransas, TX 78373			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	Σ 5)	
Interim Depa	artment Chair	University of Texas Mar	ine Science Institute	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/06/2023	CLS Consulting			\$750.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	

SCHEDULE	A1
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			1	Total pages Schedule A1:	
The Instru	ction Guide explains how to complete this f	orm.		Sch: 8/52 Rpt: 12/149	
2 FILER NAME			3	Filer ID (Ethics Commission	on Filers)
Hunter, Todo	d A. (The Honorable)			00020493	
4 Date	5 Full name of contributor X out-of-state PAC (ID#:	C00362640)	7	Amount of Contribution (\$)	
10/27/2023	Calpine PAC				\$5,000.00
	6 Contributor address; City; State; Zip Code				
	Houston, TX 77002-2743				
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 (\$)	
10/18/2023	Camacho, Isaac				\$3,000.00
	Contributor address; City; State; Zip Code				
Dringinglassy	Corpus Christi, TX 78410				
Operations N	pation / Job title (See Instructions) Manager	Employer (See Instructions Camacho Recycling	5)		
	-				
Date 10/18/2023	Full name of contributor out-of-state PAC (ID#: Carlisle, Tom)		Amount of Contribution (\$)	\$3,000.00
10/10/2023					\$3,000.00
	Contributor address; City; State; Zip Code				
	Corpus Christi, TX 78401-0234				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
Insurance, P	President	Carlisle Insurance			
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
10/05/2023	Casey, Daniel				\$500.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78723				
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	;)		
Consultant		MoakCasey LLC			
Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
12/14/2023	Castaneda Jr., Tristan (Mr.)				\$1,500.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78739	Fundar (O. 1. 1. 1.	Ĺ		
	pation / Job title (See Instructions) Relations Consultant	Employer (See Instructions	5)		
Government		Longbow Partners			

SCHEDULE	A1
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Γ	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1:
				Sch: 9/52 Rpt: 13/149
2				3 Filer ID (Ethics Commission Filers)
	Hunter, Todo	d A. (The Honorable)		00020493
4	Date	5 Full name of contributor X out-of-state PAC (ID#:	С00333534)	7 Amount of Contribution (\$)
	10/10/2023	Centerpoint Energy, Inc. PAC		\$2,500.00
		6 Contributor address; City; State; Zip Code		
		Houston, TX 77210-4567		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)
F	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/18/2023	Chapa, Paul (Mr.)		\$500.00
		Contributor address; City; State; Zip Code		
		Corpus Christi, TX 78414		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
	Attorney		Linebarger Goggan Blai	r & Sampson, LLP
F	Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/18/2023	Cheema, Linda		\$2,000.00
		Contributor address; City; State; Zip Code		
		Law Cruces, NM 88007-4991		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
	Retired		Retired	
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/10/2023	Chen, Felix Y	/	\$10,000.00
		Contributor address; City; State; Zip Code		,
		Contributor address, City, State, Zip Code		
		Dallas, TX 75287		
⊢	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions)
	CEO	· · · · · · · · · · · · · · · · · · ·	Prime Art & Jewel, Inc.	,
⊨	Data	Full name of contributor Out-of-state PAC (ID#:	\	Amount of Contribution (\$)
	Date 10/10/2023	Full name of contributor out-of-state PAC (ID#: Chen, Steve)	Amount of Contribution (\$) \$500.00
	10/10/2023			\$300.00
		Contributor address; City; State; Zip Code		
		Dallas, TX 75229		
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	
	Manager		Royaland Properties, LL	
⊢	manayer			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/52 Rpt: 14/149	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
-		d A. (The Honorable)		5	00020493	
4	Date	5 Full name of contributor X out-of-state PAC (ID#:	Coo430157)	7	Amount of Contribution (\$)	
	10/18/2023	Cheniere PAC				\$2,000.00
	I	6 Contributor address; City; State; Zip Code				
		Beverly, ME 01915				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/06/2023	Choctaw Nation of Oklahoma				\$3,000.00
	I	Contributor address; City; State; Zip Code				
		Durant, OK 74702				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/04/2023	Cocke Jr., William (Mr.)				\$500.00
	I	Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78404				
		ipation / Job title (See Instructions)	Employer (See Instructions)			
	Principal		Will Cocke Holdings, LLC	C		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/13/2023	Cocke Jr., William (Mr.)				\$1,000.00
	I	Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78404		Ļ		
		ipation / Job title (See Instructions)	Employer (See Instructions)			
	Principal		Will Cocke Holdings, LLC	_		
	Date	Full name of contributor X out-of-state PAC (ID#: C	200248716)		Amount of Contribution (\$)	
	12/06/2023	Comcast Corporation & NBC Universal PAC				\$3,000.00
		Contributor address; City; State; Zip Code				
		Philadelphia, PA 19103				
	Dringing oog		Employer (See Instructions)	<u> </u>		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions))		
<u> </u>						

The Instru	ction Guide explains how	/ to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/52 Rpt: 15/149	
2 FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
Hunter, Todo	d A. (The Honorable)				00020493	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
12/06/2023	Congress Avenue Partner	rs LLC				\$500.00
	6 Contributor address; City; St	tate; Zip Code		1		
	Austin, TX 78701					
8 Principal occu	pation / Job title (See Instructions	;)	9 Employer (See Instructions	5)		
Date	Full name of contributor	x out-of-state PAC (ID#:	C00793711)		Amount of Contribution (\$)	
10/10/2023	Constellation Energy Corp					\$1,000.00
	Contributor address; City; St	tate; Zip Code				
	Washington, DC 20001					
Principal occu	-	-)	Employor (See Instructions	<u> </u>		
ΡΠΠΟμαι Ουυυ	<pre>upation / Job title (See Instructions</pre>	;)	Employer (See Instructions	5)		
Date	Full name of contributor	x out-of-state PAC (ID#:	000793711)		Amount of Contribution (\$)	
12/14/2023	Constellation Energy Corp	ρ Employee PAC (ECF	PAC)			\$1,500.00
	Contributor address; City; St	ate; Zip Code				
	Washington, DC 20001					
Principal occu	pation / Job title (See Instructions	;)	Employer (See Instructions	5)		
Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
10/10/2023	Consulting Engineers PAC	C				\$500.00
	Contributor address; City; St	ate; Zip Code				
	Austin, TX 78701					
Principal occu	pation / Job title (See Instructions	;)	Employer (See Instructions	5)		
Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
12/14/2023	Copano Oyster Company	LLC				\$1,500.00
	Contributor address; City; St	ate; Zip Code				
	Bayside, TX 78340					
Principal occu	ipation / Job title (See Instructions	;)	Employer (See Instructions	5)		

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/52 Rpt: 16/149	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
-		A. (The Honorable)		Ĵ	00020493	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	12/14/2023	Crestline Solutions LLC				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78701				
8	Principal occu		9 Employer (See Instructions)	<u> </u>		
Ū				,		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/18/2023	Cross Oak Group				\$2,500.00
	I	Contributor address; City; State; Zip Code				
	I					
	l					
	Drinsipal apou	Austin, TX 78701	Employer (Coo Instructions)	<u></u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
_	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/10/2023	Dallas Police Officers PAC				\$500.00
	I	Contributor address; City; State; Zip Code				
	I					
	l					
		Dallas, TX 75215				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/06/2023	Damaraco Holding LTD				\$1,000.00
		Contributor address; City; State; Zip Code				
	I					
		Corpus Christi, TX 78401				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/14/2023	Danielle Delgadillo Consulting				\$500.00
	I	Contributor address; City; State; Zip Code				
	I					
	l					
	<u></u>	Austin, TX 78701-1854				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		

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	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/52 Rpt: 17/149	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		d A. (The Honorable)				00020493	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	12/06/2023	Delisi Communications P					\$1,500.00
	,	6 Contributor address; City; St					
	ł						
		Austin, TX 78701					
8	Principal occu	upation / Job title (See Instructions	s)	9 Employer (See Instructions	;)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	12/29/2023	Dole, Michael					\$250.00
		Contributor address; City; Si					
	P						
		Corpus Christi, TX 78410					
	Principal occu	upation / Job title (See Instructions	s)	Employer (See Instructions	;)		
	GR Director			Driscoll Children's Healt	h S	System	
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/18/2023	Dominguez, Dominic (Mr.					\$750.00
	1	Contributor address; City; St					
	ł						
	1	1					
		Rockport, TX 78382-3725					
	•	upation / Job title (See Instructions	s)	Employer (See Instructions	;)		
	Sr. Vice Pres	sident of Christus Health		Christus Spohn			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	09/22/2023	Durrill, Jr., William					\$2,000.00
	ł	Contributor address; City; St		1			
	1						
	l	Corpus Christi, TX 78401	L				
⊢	Principal occu	I upation / Job title (See Instructions		Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	President		,	Durrill Properties			
F	Date	Full name of contributor	X out-of-state PAC (ID#:	C00523233)	Γ	Amount of Contribution (\$)	
	12/06/2023	EDF Renewable Inc PAC	,				\$4,000.00
	ł	Contributor address; City; Sf	tate; Zip Code				
	1						
	l	Portland, OR 97205					
	Principal occu	upation / Job title (See Instructions	s)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
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SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/52 Rpt: 18/149	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
_		d A. (The Honorable)			00020493	
4	Date	5 Full name of contributor X out-of-state PAC (ID#:	C00452755)	7	Amount of Contribution (\$)	
	11/13/2023	EDP Renewables North America LLC PAC (EDI	PR NA PAC)			\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77010				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date	Full name of contributor Out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/18/2023	Embrey, Robert			-	\$250.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78414-5630				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Electrical Co	intractor	Embrey Electric Co.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/13/2023	Engel, David (Mr.)				\$2,000.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78469-4128				
	•	pation / Job title (See Instructions)	Employer (See Instructions)			
	Self Employe	3d	Engel and Associates LL	_C		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/08/2023	Engelking, Betsy				\$1,000.00
		Contributor address; City; State; Zip Code				
		Minneapolis, MN 55416				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions))		
	Renewable I	Energy Exective	National Grid Renewable	es		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/06/2023	Erben & Yarbrough				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions))		

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	The Instru	ction Guide explains how to complete this	s form.		Total pages Schedule A1: Sch: 15/52 Rpt: 19/149	
2	FILER NAME				Filer ID (Ethics Commissio	on Filers)
		d A. (The Honorable)			00020493	,
4	Date	5 Full name of contributor out-of-state PAC (ID	#:)	7	Amount of Contribution (\$)	
	10/18/2023	Escamilla, Mark (Mr.)				\$100.00
		6 Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78418				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u>।</u>		
ľ	President		Del Mar College	5)		
⊨	Date	Full name of contributor Out-of-state PAC (ID		<u> </u>	Amount of Contribution (*)	
	08/23/2023	Evans, Eric Lewis	#:)		Amount of Contribution (\$)	\$500.00
	00/23/2023					ψ300.00
		Contributor address; City; State; Zip Code				
		Katy, TX 77494-2282				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	CEO		Corpus Christi Medical	Cen	ter	
⊨	Date	Full name of contributor out-of-state PAC (ID	#:)	Т	Amount of Contribution (\$)	
	10/30/2023	Exxon Mobil PAC of Texas	,			\$1,500.00
		Contributor address; City; State; Zip Code		·		
		Irving, TX 75039				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor 🔲 out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	11/20/2023	Fagan, Wayne (Mr.)				\$2,500.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78404				
┝	Bringinal occu	pation / Job title (See Instructions)	Employer (See Instructions			
	Physican		South Texas Dermatolo			
╞	-				Assessments of Operaturity stilling (dt)	
	Date 12/14/2023	Full name of contributor out-of-state PAC (ID Fairbanks, Lauren	#:)		Amount of Contribution (\$)	\$500.00
	12/14/2023					\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78704-4185				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Founder		Moonflower Public Affai		nc.	
⊢						
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/52 Rpt: 20/149	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
[I A. (The Honorable)		ľ	00020493	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/26/2023	Ferguson, Jason				\$10,000.00
		6 Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78418-7505				
8	Principal occu	· · · · · · · · · · · · · · · · · · ·	9 Employer (See Instructions	<u>ا</u> د)		
Ľ	President		Dynamic Drilling Fluids	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/18/2023	Finley, Trace (Mr.)				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Driftwood, TX 78619				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Partner		Gateway Partners Gov't	t Af	fairs	
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	11/03/2023	Finley III, George (Mr.))		Amount of Contribution (\$)	\$1,000.00
	11/00/2020					φ1,000.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78411				
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	President		CC Distributors	5)		
╞				_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	4050 00
	10/18/2023	Floyd, Gary				\$250.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78418				
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Physican		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/06/2023	Focused Advocacy PAC				\$5,000.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
1						

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/52 Rpt: 21/149	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		d A. (The Honorable)			00020493	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/10/2023	Foley & Lardner, LLP Texas Campaign Fund				\$1,000.00
		6 Contributor address; City; State; Zip Code		1		
		Dallas, TX 75201-3340				
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 (\$)	
	10/10/2023	Friends of the University PAC				\$5,000.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78763				
	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 (\$)	
	10/10/2023	Funds Available for Involved Reporters				\$500.00
		Contributor address; City; State; Zip Code				
		Athens, TX 75751				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	. 5)		
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/19/2023	Gardner, Becky (Ms.)				\$100.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78403				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> چ)		
	Retired		Retired			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/18/2023	Garza, Rudy (Dr.))			\$750.00
	10/10/2020	Contributor address; City; State; Zip Code				\$100.00
		Contributor address, City, State, Zip Code				
		Corpus Christi, TX 78401				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	Retired			.,		
⊢						

The Instru	ction Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 18/52 Rpt: 22/149	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
Hunter, Todo	d A. (The Honorable)		00020493	
4 Date		C (ID#:)	7 Amount of Contribution (\$)	
07/31/2023				\$5,000.00
	6 Contributor address; City; State; Zip Code			
	Corpus Christi, TX 78401			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
Oil and Gas		Gates Frac Water Recy	cling	
Date	Full name of contributor 🔲 out-of-state PA	.C (ID#:)	Amount of Contribution (\$)	
12/14/2023	Gilkey, Lukas			\$1,000.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78736-7764	<u> </u>		
	pation / Job title (See Instructions)	Employer (See Instructions	6)	
CEO		Hometown Heros		
Date	Full name of contributor out-of-state PA	.C (ID#:)	Amount of Contribution (\$)	
08/18/2023	Gill, James			\$2,500.00
	Contributor address; City; State; Zip Code			
	Corpus Christi, TX 78411			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Retired	paron, con and (con manager),	Retired	,	
Date	Full name of contributor out-of-state PA	.C (ID#:)	Amount of Contribution (\$)	
10/10/2023	Grace & McEwan Consulting LLC Politica	·		\$500.00
	Contributor address; City; State; Zip Code			T '
	Austin, TX 78701			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Date	Full name of contributor 🔲 out-of-state PA	.C (ID#:)	Amount of Contribution (\$)	
09/14/2023	Gregory, Donna			\$200.00
	Contributor address; City; State; Zip Code			
	Rockport, TX 78382			
-	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Retired		Retired		

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 19/52 Rpt: 23/149	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
-		I A. (The Honorable)		•	00020493	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/21/2023	Gresham, Kevin				\$500.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78739-2235				
8			9 Employer (See Instructions)		
	VP Governm	ent Relations	RWE Clean Energy			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/14/2023	Guernsey, Gene				\$1,000.00
		Corpus Christi, TX 78411				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Self		Gene Guernsey Realtor			
	Jeli					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/18/2023	Guerra, Gabriel				\$1,000.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78414				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	President &	CEO	IBC Bank			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/10/2023	HMWK LLC	,			\$250.00
		Contributor address; City; State; Zip Code				,
		Contributor address, City, State, Zip Code				
		Austin, TX 78701				
-	Bringinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Filicipal occu			9		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/10/2023	HOMEPAC of Texas				\$2,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
⊢						
1						

	The Instru	ction Guide explains how	<i>w</i> to complete this f	orm.	1	Total pages Schedule A1: Sch: 20/52 Rpt: 24/149	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		d A. (The Honorable)				00020493	, ,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	12/06/2023	HS Law PAC					\$1,000.00
		6 Contributor address; City; S	State; Zip Code				
<u> </u>	Drive sized, oppy	Austin, TX 78701			ŕ		
8	B Principal occupation / Job title (See Instructions) 9 Employer (See Instruction			9 Employer (See Instructions	;)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/10/2023	Halliburton Company PA	.C (HALPAC)				\$1,000.00
		Contributor address; City; S					
		Houston, TX 77072					
	Principal occu	upation / Job title (See Instruction	is)	Employer (See Instructions	;)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	12/08/2023	Hammonds, II, Willard					\$5,000.00
		Contributor address; City; S	State; Zip Code				
		Corpus Christi, TX 78412					
		upation / Job title (See Instruction	is)	Employer (See Instructions			
	Business Ov	vner		Apartment & Commercia	al 8	Services, Inc.	
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	11/13/2023	Hawn, Christina					\$1,500.00
		Contributor address; City; S		1			
		Corpus Christi, TX 78401			Ļ		
	•	upation / Job title (See Instruction	S)	Employer (See Instructions	;)		
	Self			Self	_		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/10/2023	Hendrix, Michael					\$250.00
		Contributor address; City; S	State; Zip Code				
		Austin, TX 78741-2530					
	Principal occu	upation / Job title (See Instruction	is)	Employer (See Instructions	;)		

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 21/52 Rpt: 25/149	
Ļ	FILER NAME			<u>,</u>	-	n Filore)
Ĺ		d A. (The Honorable)		3	Filer ID (Ethics Commission 00020493	on Fliers)
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/27/2023	Hicks, Gloria				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78415				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	 ;)		
	CPA		Hicks Automotive Group)		
╞	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/18/2023	Highway Barricades & Services, LLC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78409				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	-	· · · ·				
⊢	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/30/2023	Hill III, John (Thad) B				\$3,000.00
		Contributor address; City; State; Zip Code				· - ;
		Houston, TX 77019-3213				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	CEO		Calpine Corp			
F	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/06/2023	Hillco PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/20/2023	Hoskins, Wes (Mr.)				\$500.00
		Contributor address; City; State; Zip Code				
		Portland, TX 78374				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	President & 0	CEO	1st Community Bank			
⊢						

	The Instru	ction Guide explains how t	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 22/52 Rpt: 26/149	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Hunter, Todo	d A. (The Honorable)				00020493	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/18/2023	Hotel PAC of THLA	-				\$1,000.00
		6 Contributor address; City; State	e; Zip Code				
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions))		
					-		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	ቀጋርብ በበ
	09/11/2023	Huegele, Rose (Mrs.)					\$250.00
		Contributor address; City; State	e; Zip Code				
		Corpus Christi, TX 78412					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>ן</u>		
	Banker			American Bank)		
				\		Amount of Contribution (\$)	
	Date 11/24/2023	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	11/24/2025						ΦΟΟΟ.ΟΟ
		Contributor address; City; State	e; Zip Coae				
		Austin, TX 78746					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Lawyer	······································		Kelly Hart Attorneys at L		I	
⊨	Date	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	
	08/23/2023	Hunsaker, Jerry (Dr.)		,		/ uncant of contact (\$1,000.00
	•••	Contributor address; City; State	e. Zin Code				- ,
		Contributor address, ony, caa	e, zip couc				
		Corpus Christi, TX 78411					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions))		
	Ophthalmolo	ogist		Self Employed			
╞	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/18/2023	Hunsaker, Jerry (Dr.)					\$1,500.00
		Contributor address; City; State	e: Zip Code				
		Corpus Christi, TX 78411					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions))		
	Ophthalmolo	ogist		Self Employed			
			I				

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 23/52 Rpt: 27/149	
2	FILER NAME		+	3	Filer ID (Ethics Commissio	on Filers)
-		d A. (The Honorable)			00020493	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/13/2023	Huseman Law Firm, PLLC	ļ			\$500.00
		6 Contributor address; City; State; Zip Code				
	Duin singl good	Corpus Christi, TX 78401		Ĺ		
8	Phincipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	<i>.</i>)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/14/2023	Hussain, Steven				\$500.00
		Contributor address; City; State; Zip Code				
			ļ			
			ļ			
		Denver, CO 80238	ļ			
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions)	上 5)		
	Government		Prologis	,		
⊨				_	Amount of Contribution (\$)	
	Date	Full name of contributor out-of-state PAC (ID#:	/ I		Amount of Contribution (\$)	<u>ቀ1 000 00</u>
	10/16/2023	IBAT PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
			ļ			
		Austin, TX 78701]			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
╞	Date	Full name of contributor Out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	10/10/2023	Independent Insurance Agents of Texas PAC	/			\$250.00
	10/10/2020					Ψ200100
		Contributor address; City; State; Zip Code	ļ			
			ļ			
		Austin, TX 78768				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
	·			,		
╞	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	12/06/2023	Independent Insurance Agents of Texas PAC	, I			\$250.00
	12/00/2020					Ψ200.00
		Contributor address; City; State; Zip Code	ļ			
			ļ			
		Austin, TX 78768				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions)	لــــــــــــــــــــــــــــــــــــ		
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MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 24/52 Rpt: 28/149 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Hunter, Todd A. (The Honorable) 00020493 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 09/21/2023 Invenergy Investment Company LLC \$3,000.00 6 Contributor address; City; State; Zip Code Chicago, IL 60606 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/10/2023 \$500.00 Isett, Carl Contributor address; City; State; Zip Code Lubbock, TX 79424 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Business Owner** Carl Isett Consulting LLC Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 07/06/2023 Itkin, Jason \$5,000.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Arnold & Itkin Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/10/2023 \$1,000.00 J. Ancira Strategies Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/06/2023 \$1,000.00 Jackson Walker L.L.P. Political Action Committee Contributor address; City; State; Zip Code Dallas, TX 75201 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 25/52 Rpt: 29/149 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Hunter, Todd A. (The Honorable) 00020493 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/06/2023 James L Keffer Sole Member Keffer Konsulting LLC \$1,000.00 6 Contributor address; City; State; Zip Code Eastland, TX 76448 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/18/2023 \$1,000.00 Jayroe, Lowell Contributor address; City; State; Zip Code Rockport, TX 78382-6838 Principal occupation / Job title (See Instructions) Employer (See Instructions) Assistant Division Manager **Physicans Mutual** Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 12/14/2023 Jewell & Associates, PLLC \$750.00 Contributor address; City; State; Zip Code Austin, TX 78738-7674 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/12/2023 \$1,000.00 Johnson, Cliff (Mr.) Contributor address; City; State; Zip Code Austin, TX 75802 Principal occupation / Job title (See Instructions) Employer (See Instructions) Partner Capitol Access Partners Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: \$2,000.00 10/18/2023 Jones, Al (Mr.) Contributor address; City; State; Zip Code Corpus Christi, TX 78411 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired

The	Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 26/52 Rpt: 30/149	
2 FILER				3	Filer ID (Ethics Commission	on Filers)
		I A. (The Honorable)		ľ	00020493	
4 Date		5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
08/23	3/2023	Jordan, JP				\$200.00
		6 Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78413				
8 Princi	ipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Owne	er		JP Jordan Consulting			
Date		Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
07/14	4/2023	Junior and Community College PAC				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78701				
Princi	ipal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Date		Full name of contributor out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	4/2023	Kennedy III, Paul	/			\$250.00
		Contributor address; City; State; Zip Code				,
		Contributor address, City, State, Zip Code				
		Corpus Christi, TX 78413				
Princi	ipal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Denti	ist		Kennedy Dental Care			
Date		Full name of contributor out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	3/2023	Klein, Melvin	/			\$1,000.00
		Contributor address; City; State; Zip Code		•		
		Contributor address, City, State, Zip Code				
		Corpus Christi, TX 78401				
Princi	ipal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		repreneur	Self	-,		
Date		Full name of contributor		Г	Amount of Contribution (\$)	
	6/2023	KochPAC	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			\$5,000.00
12/00	0/2023					φ3,000.00
		Contributor address; City; State; Zip Code				
		Wichita, KS 67220				
Princi	inal occu		Employor (Soo Instructions	<u> </u>		
PIIICI	ipai uccu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 27/52 Rpt: 31/149	
2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
Hunter, Todd	d A. (The Honorable)			00020493	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
10/20/2023	Leshin, Richard (Mr.)				\$1,000.00
ļ	6 Contributor address; City; State; Zip Code				
	1				
	Corpus Christi, TX 78401				
	pation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
Attorney		Welder Leshin LLP			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
10/24/2023	Leyendecker, Dan (Mr.)				\$500.00
	Contributor address; City; State; Zip Code				
	1				
	1				
	Corpus Christi, TX 78418				
	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
Engineer		Ardurra Engineering	_		
Date	Full name of contributor out-of-state PAC (ID#:)	ſ	Amount of Contribution (\$)	
10/18/2023	Linebarger Goggan Blair & Sampson, LLP				\$2,500.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78760				
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u>ן</u>		
· ·			,		
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
08/24/2023	Lipman, Bill				\$300.00
	Contributor address; City; State; Zip Code				
	1				
	1				
	Corpus Christi, TX 78411				
	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
Professor		Del Mar College			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
10/10/2023	Lloyd Gosselink Rochelle & Townsend PC				\$1,000.00
	Contributor address; City; State; Zip Code				
	1				
	Austin, TX 78701				
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions)	\square		
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	The Instru	ction Guide explains ho	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 28/52 Rpt: 32/149	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		I A. (The Honorable)			-	00020493	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	12/14/2023	Locke Lord LLP					\$500.00
		6 Contributor address; City; S	State; Zip Code				
		Dallas, TX 75201					
8	Principal occu	pation / Job title (See Instruction	s)	9 Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/18/2023	Loeb, David					\$1,000.00
		Contributor address; City; S					
		Corpus Christi, TX 7841					
	-	pation / Job title (See Instruction	s)	Employer (See Instructions	5)		
	President			Landlord Resources			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/18/2023	Lomax, Brad (Mr.)					\$2,000.00
		Contributor address; City; S	State; Zip Code				
		Corpus Christi, TV 7940					
	Dringing ago	Corpus Christi, TX 78402		Employer (Cap Instructions			
	Restaurante	pation / Job title (See Instruction	S)	Employer (See Instructions Waterstreet Ltd	5)		
	Date	Full name of contributor)		Amount of Contribution (\$)	#0 500 00
	12/14/2023	Longbow Consulting Par					\$2,500.00
		Contributor address; City; S	State; Zip Code				
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/10/2023	MOAK Casey PAC	—				\$2,500.00
		Contributor address; City; S	State; Zip Code				
		Austin, TX 78746-5776					
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	5)		

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 29/52 Rpt: 33/149	
2 FILER NAME			3 Filer ID (Ethics Commissi	on Filers)
	d A. (The Honorable)		00020493	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
12/14/2023	Manufactures PAC of Texas			\$1,500.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78711-1510			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	3)	
Date	Full name of contributor Dut-of-state PAC (ID#:_)	Amount of Contribution (\$)	
07/06/2023	Marquez, Brandy M			\$1,500.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78735-5411			
	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Principal		Marquez Public Affairs		
Date	Full name of contributor Dut-of-state PAC (ID#:_)	Amount of Contribution (\$)	
12/11/2023	Mason, John (Dr.)			\$250.00
	Contributor address; City; State; Zip Code			
	Corpus Christi, TX 78411		-	
	pation / Job title (See Instructions)	Employer (See Instructions	3)	
Owner/Denti	st	John Mason, DDS		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/03/2023	McCord, Mia			\$250.00
	Contributor address; City; State; Zip Code			
	Leander, TX 78641			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>)</u>	
Consultant		Hourglass Strategies)	
		,	Amount of Contribution (ft)	
Date 11/16/2023	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$500.00
11/10/2023	McDavid, Joseph			Φ200.00
	Contributor address; City; State; Zip Code			
	Rockport, TX 78382			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
Insurance Ag		GSM Insurors	7	

The Instruc	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 30/52 Rpt: 34/149
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	d A. (The Honorable)		00020493
4 Date	5 Full name of contributor out-of-state PAC (ID#	:)	7 Amount of Contribution (\$)
11/08/2023	McDavid, Jr, Travis		\$500.00
	6 Contributor address; City; State; Zip Code		1
	Rockport, TX 78382		
	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)
Partner		GSM Insurors	
Date	Full name of contributor out-of-state PAC (ID#)	:)	Amount of Contribution (\$)
10/10/2023	McGuire Revocable Trust		\$5,000.00
	Contributor address; City; State; Zip Code]
	Dallas TV 75205		
Principal occu	Dallas, TX 75205 Ipation / Job title (See Instructions)	Employer (See Instructions	~\
Minupa occu			>)
Poto			Amount of Contribution (\$)
Date 10/10/2023	Full name of contributor X out-of-state PAC (ID#) McGuire Woods Federal PAC Fund	.C00225342)	Amount of Contribution (\$) \$1,000.00
			ψ1,000.00
	Contributor address; City; State; Zip Code		
	Richmond, VA 23219		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	Σ δ)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
10/18/2023	McMonagle, Matthew		\$1,500.00
	Contributor address; City; State; Zip Code		1
	Highlands Ranch, CO 80129		
	ipation / Job title (See Instructions)	Employer (See Instructions	5)
Entrepreneu	r	Self	
Date	Full name of contributor out-of-state PAC (ID#))	Amount of Contribution (\$)
10/20/2023	McMullin, Keith		\$500.00
	Contributor address; City; State; Zip Code		
	Dort Araneae TV 79272		
Dringingl occu	Port Aransas, TX 78373	Employer (Soo Instructions	~\
Real Estate I	ipation / Job title (See Instructions) Broker	Employer (See Instructions) Port Aransas Realty	3)

	The Instru	ction Guide explains how to complete this fo	1 Total pages Schedule A1: Sch: 31/52 Rpt: 35/149		
2	FILER NAME		3 Filer ID (Ethics Commission Filers)		
		d A. (The Honorable)	00020493	,	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
	10/23/2023	McQueen, Mary			\$250.00
		6 Contributor address; City; State; Zip Code			
		Corpus Christi, TX 78414-2754			
8	Principal occu	pation / Job title (See Instructions)	5)		
	VP Advance	ment 7 Government Relation	Del Mar College Founda	ation	
	Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	12/05/2023	Medina, Vic (Mr.)			\$100.00
		Contributor address; City; State; Zip Code			
		Corpus Christi, TX 78412			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Retired		Retired		
F	Date	Full name of contributor X out-of-state PAC (ID#: C	00097485)	Amount of Contribution (\$)	
	10/18/2023	Merck Employees PAC	······································		\$1,000.00
		Contributor address; City; State; Zip Code			. ,
	Principal occu	Washington, DC 20004 pation / Job title (See Instructions)	Employer (See Instructions	;)	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	09/27/2023	Meroney, Mike			\$250.00
		Contributor address; City; State; Zip Code			
⊢	Duineir - L	Austin, TX 78731		<u> </u>	
		pation / Job title (See Instructions)	Employer (See Instructions		
	Consultant		Meroney Public Affairs,		
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	12/06/2023	Mike Toomey & Associates			\$1,000.00
		Contributor address; City; State; Zip Code			
		Austin, TX 78701			
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions) ;)	
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SCHEDULE	A1
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The Instrue	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 32/52 Rpt: 36/149		
2 FILER NAME		3	Filer ID (Ethics Commissio	on Filers)	
	lunter, Todd A. (The Honorable)			00020493	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
08/23/2023	Miller, Kelly				\$100.00
	6 Contributor address; City; State; Zip Code		1		
	Corpus Christi, TX 78413				
	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
President		TAMU CC			
Date	Full name of contributor out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
10/18/2023	Mintz , Laurie (Mrs.)				\$3,000.00
	Contributor address; City; State; Zip Code				
	Corpus Christi, TX 78411				
	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Homemaker		Self			
Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
08/23/2023	Moore, Margo (Mrs.)		5		\$5,000.00
	Contributor address; City; State; Zip Code		1		
	Corpus Christi, TX 78418				
	pation / Job title (See Instructions)	Employer (See Instructions			
Owner		Southside Animal Hospi	ital		
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
08/23/2023	Moore, Margo and Mike		. \$5,000.		\$5,000.00
	Contributor address; City; State; Zip Code				
	Corpus Christi, TX 78418	· · · · · · · · ·			
-	pation / Job title (See Instructions)	Employer (See Instructions			
Owner		Southside Animal Hospi	itai		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
10/23/2023	Moore, Minta (Ms.)				\$1,000.00
	Contributor address; City; State; Zip Code]		
	Corpus Christi, TX 78418				
-	pation / Job title (See Instructions)	Employer (See Instructions			
Executive Di	rector	New Life Refuge Ministr	ries		

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	The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 33/52 Rpt: 37/149	
2	FILER NAME			3 Filer ID (Ethics Commission Filers)	-
		d A. (The Honorable)		00020493	
4	Date	5 Full name of contributor X out-of-state PAC (ID#:	С00366559)	7 Amount of Contribution (\$)	
	10/18/2023	NRG Energy Inc, PAC		\$5,000.	00
		6 Contributor address; City; State; Zip Code			
		Princeton, NJ 08540-6023			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions		
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	_
	09/05/2023	Nabers, Mary Scott		\$350.	00
		Austin, TX 78735			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
	President/CE	ΞΟ	Strategic Partnerships, I	nc.	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	08/04/2023	Nash, Charles		\$500.	00
		Contributor address; City; State; Zip Code			
		San Marcos, TX 78667-1007	1		
	•	pation / Job title (See Instructions)	Employer (See Instructions	,	
	Self Employe		Chuck Nash Chevrolet E		
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	_
	10/18/2023			\$1,500.	00
		Contributor address; City; State; Zip Code			
		Port Aransas, TX 78373			
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
	Retired		Retired		
╞		Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
	Date 10/18/2023	Full name of contributor out-of-state PAC (ID#: Nedbalek, Bobby)	Amount of Contribution (\$) \$150.	00
	10/10/2023			φ100.	00
		Contributor address; City; State; Zip Code			
		Sinton, TX 78387			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	President		Texas Farm Bureau		
1					

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	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 34/52 Rpt: 38/149	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
-		d A. (The Honorable)				00020493	, , ,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/30/2023	Novotny, Andrew	_				\$2,000.00
		6 Contributor address; City; Si	tate; Zip Code		1		
		Houston, TX 77057-1143					
8		pation / Job title (See Instructions	5)	9 Employer (See Instructions	5)		
	President			Calpine Corp			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/18/2023	Olivarri, Leah					\$500.00
	1	Contributor address; City; Si			1		
		Corus Christi, TX 78412	·		Ĺ		
		pation / Job title (See Instructions	3)	Employer (See Instructions			
	Owner	.		Olivarri & Associates, In	ю. —		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/10/2023	Oncor Texas State PAC					\$2,500.00
		Contributor address; City; St	tate; Zip Code				
		Dallas, TX 75202-1234					
	Princinal occu	pation / Job title (See Instructions	e)	Employer (See Instructions	<u>ا</u>		
	T moipar cocc.		"		"		
	Date	Full name of contributor	x out-of-state PAC (ID#:	 C00554444)	Γ	Amount of Contribution (\$)	
	12/06/2023	One Gas, Inc. PAC					\$1,500.00
		Contributor address; City; Si	tate; Zip Code		1		
		Tulsa, OK 74103					
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	5)		
					—		
	Date	Full name of contributor	x out-of-state PAC (ID#:	200215384)		Amount of Contribution (\$)	ቀር ባቢ በቢ
	12/14/2023	OneOK Employees PAC					\$500.00
		Contributor address; City; Si	tate; Zip Code				
		Tulsa, OK 74102					
	Principal occu	pation / Job title (See Instructions	<u>s)</u>	Employer (See Instructions	L		
	1		<i>'</i>)		''		

	The Instru	ction Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 35/52 Rpt: 39/149	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		d A. (The Honorable)			00020493	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/18/2023	Oso Bridge Investors LLC	ļ			\$125.00
	!	6 Contributor address; City; State; Zip Code		·		
		Corpus Christi, TX 78415				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	s)		
	Date	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	08/23/2023	Palmer, Sally	ļ			\$50.00
		Contributor address; City; State; Zip Code				
		Port Aransas, TX 78373				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)			
	Communicat	tions Manager	University of Texas Mari	rine \$	Science Institute	
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	10/18/2023	Palmer, Sally	ļ			\$50.00
		Contributor address; City; State; Zip Code Port Aransas, TX 78373				
	•	upation / Job title (See Instructions)	Employer (See Instructions)	s)		
	Communicat	tions Manager	University of Texas Mari	rine \$	Science Institute	
	Date	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	08/23/2023	Parker, Robert E. (Mr.)	ļ			\$5,000.00
		Contributor address; City; State; Zip Code Corpus Christi, TX 78469				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	Principal		Repcon, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)]	Amount of Contribution (\$)	_
	12/06/2023	Patricia A Shipton Governmental Affairs				\$1,000.00
		Contributor address; City; State; Zip Code Austin, TX 78701-2157				
_	Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>ار</u>		

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 36/52 Rpt: 40/149	
2	FILER NAME			3	Filer ID (Ethics Commissio	n Filers)
 -		d A. (The Honorable)		•	00020493	511 1010,
4	Date	5 Full name of contributor X out-of-state PAC (ID#: <u>C</u>)))	7	Amount of Contribution (\$)	
	09/21/2023	Pattern PAC				\$2,500.00
		6 Contributor address; City; State; Zip Code				
		San Francisco, CA 94111				
Ļ	Principal occu		9 Employer (See Instructions)	\		
°	Ρπιομαί στου)		
╞	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/14/2023	Perkins, Jennifer				\$250.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78748				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Partner	,	Longbow Partners	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/28/2023	Pietsch, Christopher				\$2,500.00
		Contributor address; City; State; Zip Code				
<u> </u>	Drincinal occu	Corpus Christi, TX 78411	Employer (See Instructions)	\		
	Manager	pation / Job title (See Instructions)	Freedom Fitness)		
╞	Date	Full name of contributor Out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/12/2023	Pope, Clayton	/			\$1,000.00
	10, 11,	Contributor address; City; State; Zip Code				+- , · ····
		Austin, TX 78703				
		pation / Job title (See Instructions)	Employer (See Instructions))		
	Principle		Pope Strategies Group			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	<u>↑</u> 4 000 00
	10/24/2023	Ramirez, Philip (Mr.)				\$1,000.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78411				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Architect		Turner Ramirez Architec	ts		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 Total pages Schedule A1: 1 The Instruction Guide explains how to complete this form. Sch: 37/52 Rpt: 41/149 FILER NAME Filer ID (Ethics Commission Filers) 2 3 Hunter, Todd A. (The Honorable) 00020493 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/06/2023 Randy C Cain DBA Randy C Cain Attorney At Law \$250.00 6 Contributor address; City; State; Zip Code Austin, TX 78763 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/18/2023 Reddy, Sunil (Mr.) \$5,000.00 Contributor address; City; State; Zip Code Corpus Christi, TX 78427 Principal occupation / Job title (See Instructions) Employer (See Instructions) CEO Braintree Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 10/24/2023 Reddy, Vishnu (Dr.) \$3,000.00 Contributor address; City; State; Zip Code Corpus Christi, TX 78412 Principal occupation / Job title (See Instructions) Employer (See Instructions) Physician Advinity Healthcare Management Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/24/2023 \$2,000.00 Reddy, Vishnu (Dr.) Contributor address; City; State; Zip Code Corpus Christi, TX 78412 Principal occupation / Job title (See Instructions) Employer (See Instructions) Physician Advinity Healthcare Management Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/06/2023 \$500.00 **Riceland Consulting LLC** Contributor address; City; State; Zip Code Eagle Lake, TX 77434 Principal occupation / Job title (See Instructions) Employer (See Instructions)

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The Instru	ction Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 38/52 Rpt: 42/149
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Hunter, Todo	d A. (The Honorable)		00020493
4 Date	5 Full name of contributor out-of-state PA	AC (ID#:)	7 Amount of Contribution (\$)
08/23/2023	Rios, Patrick		\$500.00
	6 Contributor address; City; State; Zip Code		
	Rockport, TX 78382-3530		
	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)
Retired		Retired	
Date	Full name of contributor out-of-state PA	AC (ID#:)	Amount of Contribution (\$)
10/18/2023	Rivera, Augustin		\$250.00
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78412		
-	ipation / Job title (See Instructions)	Employer (See Instructions	,
Attorney		Del Mar Community Co)llege
Date	Full name of contributor out-of-state PA	AC (ID#:)	Amount of Contribution (\$)
10/18/2023	Rodd Village Development, LLC		\$100.00
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78415		<u> </u>
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	S)
			<u> </u>
Date	Full name of contributor out-of-state PA	AC (ID#:)	Amount of Contribution (\$)
12/06/2023	Ron Lewis & Associates		\$500.00
	Contributor address; City; State; Zip Code		
	Austin, TX 78701		
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	
Filiopa occa			5)
Data		· · · · · · · · · · · · · · · · · · ·	
Date 10/18/2023	Full name of contributor out-of-state PA	\C (ID#:)	Amount of Contribution (\$) \$100.00
10/10/2023			φ100.00
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78418		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	
Owner		NautyPineapple	3)
		······	

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 39/52 Rpt: 43/149	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
-		d A. (The Honorable)			00020493	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	12/27/2023	Rowling, Robert (Mr.)				\$5,000.00
		6 Contributor address; City; State; Zip Code				
		Dallas, TX 75219				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	CEO		TRT Holdings			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/13/2023	Rural Friends of Electric Cooperatives				\$3,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/18/2023	Salazar Investments				\$125.00
		Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78415	i			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/10/2023	Sampson Public Affairs LLC				\$2,000.00
		Contributor address; City; State; Zip Code		1		
		Austin TX 70740 5202				
	Dringinglassy	Austin, TX 78749-5202				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
╞				_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 4 000 00
	08/23/2023	Schwirtlich, Lonnie (Dr.)				\$1,000.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78418		1		
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	Physician		Self Employed	.,		
⊢						

	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 40/52 Rpt: 44/149	
2	FILER NAME			3	Filer ID (Ethics Commiss	ion Filers)
		d A. (The Honorable)			00020493	,
4	Date	5 Full name of contributor out-of-state PAC (I	D#:)	7	Amount of Contribution (\$)	
	10/24/2023	Scott, Carol (Mrs.)				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78411				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Public Affairs	s Consultant	Self			
⊨	Date	Full name of contributor Out-of-state PAC (D#:)	Г	Amount of Contribution (\$)	
	10/18/2023	Seaman, Eugene	υπ)			\$100.00
	10/10/2020					\$100.00
		Commodior address, City, State, Zip Code				
		Corpus Christi, TX 78413				
⊢	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired			,		
⊨	Date	Full name of contributor Out-of-state PAC (Т	Amount of Contribution (\$)	
	08/09/2023	Shaw, Michael J (Mr.)	D#)			\$10,000.00
	00/03/2020					\$10,000.00
		Contributor address, City, State, Zip Code				
		Fredericksburg, TX 78624				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	CEO		Mike Shaw Automotive			
	Date	Full name of contributor out-of-state PAC (I	D#:)	Ι	Amount of Contribution (\$)	
	10/18/2023	Sherman, Scott				\$250.00
		Contributor address; City; State; Zip Code		·		
		Corpus Christi, TX 78411-1519				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney		Branscomb PC			
	Date	Full name of contributor out-of-state PAC (I	D#:)		Amount of Contribution (\$)	
	10/18/2023	Shimaitis, Chad				\$500.00
		Contributor address; City; State; Zip Code		"		
		Port Aransas, TX 78373				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Partner		Under Way Construction	n		

	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 41/52 Rpt: 45/149	
2	FILER NAME			3 Filer ID (Ethics Commission	on Filers)
ľ		I A. (The Honorable)		00020493	511111013)
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
	10/11/2023	Smith, Robert (Mr.)			\$500.00
		6 Contributor address; City; State; Zip Code			
		Dallas, TX 75230			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	3)	
	President/CE	0	Accident & Injury Pain C	Centers Group	
	Date	Full name of contributor out-of-state PAC (ID#:	·)	Amount of Contribution (\$)	
	12/29/2023	Snyder, Joan			\$1,000.00
		Contributor address; City; State; Zip Code			
		Port Aransas, TX 78373			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	
	Advisor Dire	ctor	UT Marine Science Cen	ter	
	Date	Full name of contributor out-of-state PAC (ID#:	·)	Amount of Contribution (\$)	
	10/18/2023	Sooda, Kusumaker			\$2,000.00
		Contributor address; City; State; Zip Code			
		Corpus Christi, TX 78413-5817			
		pation / Job title (See Instructions)	Employer (See Instructions		
	Physican		Truecare Medical Assoc	ciates	
	Date	Full name of contributor X out-of-state PAC (ID#:	C00341602)	Amount of Contribution (\$)	
	10/10/2023	Southwest Airlines Co. Freedom Fund			\$1,500.00
		Contributor address; City; State; Zip Code			
		Dallas, TX 75235-1611			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	10/13/2023	Sperling, Cheri			\$2,500.00
		Contributor address; City; State; Zip Code			
⊢	<u> </u>	Corpus Christi, TX 78418			
		pation / Job title (See Instructions)	Employer (See Instructions	S)	
	Retired		USN		
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 42/52 Rpt: 46/149	
2	FILER NAME			3	Filer ID (Ethics Commissi	on Filers)
	Hunter, Tode	d A. (The Honorable)			00020493	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/14/2023	Stratmann, Robert				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		1				
		Austin, TX 78757				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
	Partner		Longbow Partners			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/14/2023	Susser, Sam L (Mr.)				\$10,000.00
		Contributor address; City; State; Zip Code				
		1				
		Dallas, TX 75220				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	President	, , , , , , , , , , , , , , , , , , ,	Susser Holdings II	,		
	Date	Full name of contributor)))))))))))))))))))))))))))))))))))))))	Γ	Amount of Contribution (\$)	
	12/06/2023	T-Mobile PAC	, ,		, uneant et et	\$2,500.00
		Contributor address; City; State; Zip Code				-
		1				
		1				
		Washington, DC 20004]			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	12/14/2023	Targa Resources Corp. Texas PAC				\$2,500.00
		Contributor address; City; State; Zip Code				
		1				
	Duincipal acci	Houston, TX 77002		Ĺ		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
_	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/18/2023	Tex-Pipe PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		1				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	L;)		
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	The Instru	ction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 43/52 Rpt: 47/149	
2	FILER NAME				3	Filer ID (Ethics Commissio	n Filers)
-		d A. (The Honorable)				00020493	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/14/2023	Tex-Pipe PAC					\$500.00
		6 Contributor address; City; State;					
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	;)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/17/2023	Texans For Lawsuit Reform P	PAC				\$5,000.00
		Contributor address; City; State;					
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/06/2023	Texas Agricultural Aviation As					\$1,000.00
		Contributor address; City; State;					
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date		out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/06/2023	Texas Alliance for Life PAC					\$100.00
		Contributor address; City; State;					
		Austin TV 707E1					
<u> </u>	Dringing occ	Austin, TX 78754	r	Employer (See Instructions	<u> </u>		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
⊨	Dete	Full name of contributor			-	Amount of Contribution (\$)	
	Date 08/22/2023	Texas Automobile Dealers As	out-of-state PAC (ID#:)		Amount of Contribution (\$)	ቀ⊑ ባባብ በበ
	0812212023						\$5,000.00
		Contributor address; City; State;	; Zip Code				
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
					,		
-							

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 44/52 Rpt: 48/149	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		d A. (The Honorable)			00020493	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/06/2023	Texas Bail PAC	ļ			\$1,000.00
		6 Contributor address; City; State; Zip Code		1		
			ļ			
		Austin, TX 78731				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	3)		
	Date	Full name of contributor X out-of-state PAC (ID#:_		Γ	Amount of Contribution (\$)	
	10/10/2023	Texas Instruments Incorporated PAC				\$2,500.00
		Contributor address; City; State; Zip Code		1		
			ļ			
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		Dallas, TX 75243-0592				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		_
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/18/2023	Texas Insurance Professionals PAC Individual				\$5,000.00
		Contributor address; City; State; Zip Code		1		
			ļ			
		Houston, TX 77066	ļ			
_	Drincinal occi	pation / Job title (See Instructions)	Employer (See Instructions)	$\overline{\Gamma}$		
	Philopai occu			<i>י</i> ן		
╞═	Date	Full name of contributor out-of-state PAC (ID#:_		Γ	Amount of Contribution (\$)	
	10/10/2023	Texas Land Title Association PAC				\$5,000.00
		Contributor address; City; State; Zip Code		1		
			ļ			
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L		Austin, TX 78703				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
L				. 		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/18/2023	Texas Lobby Partners LLP				\$5,000.00
		Contributor address; City; State; Zip Code	ļ			
			ļ			
		Austin, TX 78701	ļ			
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u>ا</u>		
	гтпора осса			"		
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	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 45/52 Rpt: 49/149	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
Hunter, Todd	A. (The Honorable)		00020493	
4 Date	5 Full name of contributor out-of-state PAC (ID#:) 7	7 Amount of Contribution (\$)	
10/10/2023	Texas Medical Association PAC			\$250.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78701			
B Principal occuj	pation / Job title (See Instructions)	9 Employer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/06/2023	Texas Society of Architects Committee			\$2,000.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78702			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/27/2023	Texas Society of Certified Public Accountants			\$1,500.00
	Contributor address; City; State; Zip Code			
	Contributor address; City; State; Zip Code Addison, TX 75001			
Principal occu		Employer (See Instructions)		
Principal occur Date	Addison, TX 75001	Employer (See Instructions)	Amount of Contribution (\$)	
	Addison, TX 75001 pation / Job title (See Instructions))		\$1,500.00
Date	Addison, TX 75001 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:) Committee		\$1,500.00
Date	Addison, TX 75001 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Texas State Association of Fire Fighters Action of) Committee		\$1,500.00
Date 10/10/2023	Addison, TX 75001 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Texas State Association of Fire Fighters Action of Contributor address; City; State; Zip Code) Committee	Amount of Contribution (\$)	\$1,500.00
Date 10/10/2023	Addison, TX 75001 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Texas State Association of Fire Fighters Action of Contributor address; City; State; Zip Code Austin, TX 78701) Committee	Amount of Contribution (\$)	\$1,500.00
Date 10/10/2023 Principal occu	Addison, TX 75001 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Texas State Association of Fire Fighters Action of Contributor address; City; State; Zip Code Austin, TX 78701 pation / Job title (See Instructions)) Committee	Amount of Contribution (\$)	\$1,500.00
Date 10/10/2023 Principal occu Date	Addison, TX 75001 pation / Job title (See Instructions) Full name of contributor) Committee	Amount of Contribution (\$)	
Date 10/10/2023 Principal occu Date	Addison, TX 75001 pation / Job title (See Instructions) Full name of contributor) Committee	Amount of Contribution (\$)	

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 46/52 Rpt: 50/149	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		d A. (The Honorable)			00020493	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/14/2023	Texas Telephone Association PAC				\$1,500.00
	1	6 Contributor address; City; State; Zip Code				
		1				
		1				
		Austin, TX 78701				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/10/2023	Texas Trial Lawyers Association PAC			-	\$5,000.00
	I					
		1				
	I	Austin, TX 78701				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/22/2023	The AES Corporation PAC				\$1,000.00
	I	Contributor address; City; State; Zip Code		1		
		1				
		1				
		Arlington, VA 22203		L		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
L		J		—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/06/2023	The American Electric Power Company-Texas-C	Committee for			\$5,000.00
		Contributor address; City; State; Zip Code				
		1				
		Austin, TX 78701				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	T hhopa ooca			<i>''</i>		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/06/2023	The Chickasaw Nation				\$2,500.00
	I	Contributor address; City; State; Zip Code		1		
		1				
		1				
		ADA, OK 74820				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		

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	The Instru	ction Guide explains how t	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 47/52 Rpt: 51/149	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
		d A. (The Honorable)				00020493	,
	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/14/2023	The Posey Law Firm PC					\$1,000.00
		6 Contributor address; City; Stat	ate; Zip Code				
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	;)		
	Date	Full name of contributor	x out-of-state PAC (ID#: C)	Γ	Amount of Contribution (\$)	
	12/12/2023	The Williams Companies, I	nc. PAC				\$1,000.00
		Contributor address; City; Stat	ιte; Zip Code				
		Tulsa, OK 74172-0140	1				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
					_		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/18/2023	Tierra Motors, LLC					\$150.00
		Contributor address; City; Stat	te; Zip Code				
		Cornus Christi TV 79415					
	Drizoinal agai	Corpus Christi, TX 78415	r	Employer (Cap Instructions	Ļ		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	9		
⊨	Data				—	Amount of Contribution (ft)	
	Date 12/11/2023	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	12/11/2023	Townsend, Trent	·				\$200.00
		Contributor address; City; Stat	te; Zip Coae				
		Austin, TX 78703					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Consultant	•		Imperium Public Affairs	,		
╞	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	07/11/2023	Trevino, Roberto				.,	\$10,000.00
		Contributor address; City; Stat	ite: Zip Code				+,-
		Communication additional, 1.19, 1					
		Laredo, TX 78045					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Owner			Self employed			

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Hunter, Todd A. (The Honorable) 00020493					
Hunter, Todd A. (The Honorable) 00020433 Date \$ Full name of contributor Inter-state PAC (Do:::C002/2431) 7 Amount of Contribution (\$) 10/12/2023 Contributor address: Chy: State: Zip Code 7 Amount of Contribution (\$) Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor ont-of-state PAC (Do:::	The Instruc	ction Guide explains how to complete this f	örm.		
Hunter, Todd A. (The Honorable) 00020433 Date \$ Fill name of contributor	2 FILER NAME			3 Filer ID (Ethics Commissi	on Filers)
10/12/2023 United Health Group Inc PAC \$1,000.00 6 Contributor address; City: State; Zip Code \$1,000.00 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (De:		d A. (The Honorable)			
10/12/2023 United Health Group Inc PAC \$1,000.00 6 Contributor address; City; State; Zip Code \$1,000.00 Principal occupation / Job Itile (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (DE Amount of Contribution (S) 10/18/2023 Full name of contributor out-of-state PAC (DE Amount of Contribution (S) Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code Amount of Contribution (S) Principal occupation / Job Itie (See Instructions) Employer (See Instructions) Water Contributor Date Full name of contributor out-of-state PAC (DE Amount of Contribution (S) 12/11/2023 Full name of contributor out-of-state PAC (DE Amount of Contribution (S) Consultant Contributor address; City; State; Zip Code Amount of Contribution (S) \$\$2,500.00 Date Full name of contributor out-of-state PAC (DE Amount of Contribution (S) \$2,500.00 Consultant Full name of contributor out-of-state PAC (DE Amount of Contribution (S) \$2,500.00 Date Full name of contributor out-of-state PAC (DE Amount of Contribution	1 Date	5 Full name of contributor	С00274431)	7 Amount of Contribution (\$)	
Washington, DC 20005 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) S2,000.00 Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Chief Project Engineer Urban Engineering Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (IDE: Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (IDE: Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (IDE: Amount of Contribution (\$) 12/11/2023 Full name of contributor out-of-state PAC (IDE: Amount of Contribution (\$) 2018 Full name of contributor out-of-state PAC (IDE: Amount of Contribution (\$) 10/18/2023 Valeer O PAC Employer (See Instructions) Set/Employed Date Full name of contributor out-of-state PAC (IDE: Amount of Contribution (\$) \$2,500.00 D	10/12/2023				\$1,000.00
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Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$2,000.00 Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code Amount of Contribution (\$) \$2,000.00 Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code Date Principal occupation / Job title (See Instructions) Urban Engineering Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:					
Date Full name of contributor out-ot-state PAC (DB:) Amount of Contribution (\$) 10/19/2023 Urban, Larry (Mr.) \$2,000.00 Contributor address; Chy, State; Zip Code \$2,000.00 Corpus Christi, TX 78404 Employer (See Instructions) Chief Project Engineer Urban Engineering Date Full name of contributor out-ot-state PAC (DB:		Washington, DC 20005			
10/18/2023 Urban, Larry (Mr.) \$2,000.00 Contributor address; City, State; Zip Code Corpus Christi, TX 78404 Principal occupation / Job title (See Instructions) Employer (See Instructions) Chief Project Engineer Urban Engineering Date Full name of contributor out-of-state PAC (DE:) Amount of Contribution address; City; State; Zip Code Amount of Contribution (\$) 12/11/2023 Valdez, Jerry (Mr.) Amount of Contribution (\$) Consultant Seff Employer (See Instructions) \$500.00 Consultant Self Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (DE:) Amount of Contribution (\$) 10/18/2023 Valero PAC Self Employed \$2,500.00 Contributor address; City; State; Zip Code	B Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
10/18/2023 Urban, Larry (Mr.) \$2,000.00 Contributor address; City, State; Zip Code Corpus Christi, TX 78404 Principal occupation / Job title (See Instructions) Employer (See Instructions) Chief Project Engineer Urban Engineering Date Full name of contributor out-of-state PAC (DE:) Amount of Contribution address; City; State; Zip Code Amount of Contribution (\$) 12/11/2023 Valdez, Jerry (Mr.) Amount of Contribution (\$) Consultant Seff Employer (See Instructions) \$500.00 Consultant Self Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (DE:) Amount of Contribution (\$) 10/18/2023 Valero PAC Self Employed \$2,500.00 Contributor address; City; State; Zip Code					
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Principal occupation / Job title (See Instructions) Chief Project Engineer Employer (See Instructions) Urban Engineering Date 12/11/2023 Full name of contributor out-of-state PAC (ID#:) Valdez, Jerry (Mr.) Amount of Contribution (\$) \$500.00 Contributor address; City; State; Zip Code Austin, TX 78711 Principal occupation / Job title (See Instructions) Consultant Employer (See Instructions) Self Employed Date Full name of contributor out-of-state PAC (ID#:) Valero PAC Amount of Contribution (\$) Self Employed Date Full name of contributor out-of-state PAC (ID#:) Valero PAC Amount of Contribution (\$) Self Employed Principal occupation / Job title (See Instructions) Employer (See Instructions) \$2,500.00 Contributor address; City; State; Zip Code Amount of Contribution (\$) San Antonio, TX 78269 Amount of Contribution Principal occupation / Job title (See Instructions) Employer (See Instructions) \$1,000.00 Oate Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$1,000.00 \$1,000.00 Oate Full name of contributor out-of-state PAC (ID#:					
Principal occupation / Job title (See Instructions) Chief Project Engineer Employer (See Instructions) Urban Engineering Date 12/11/2023 Full name of contributor out-of-state PAC (ID#:) Valdez, Jerry (Mr.) Amount of Contribution (\$) \$500.00 Contributor address; City; State; Zip Code Austin, TX 78711 Principal occupation / Job title (See Instructions) Consultant Employer (See Instructions) Self Employed Date Full name of contributor out-of-state PAC (ID#:) Valero PAC Amount of Contribution (\$) Self Employed Date Full name of contributor out-of-state PAC (ID#:) Valero PAC Amount of Contribution (\$) Self Employed Principal occupation / Job title (See Instructions) Employer (See Instructions) \$2,500.00 Contributor address; City; State; Zip Code Amount of Contribution (\$) San Antonio, TX 78269 Amount of Contribution Principal occupation / Job title (See Instructions) Employer (See Instructions) \$1,000.00 Oate Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$1,000.00 \$1,000.00 Oate Full name of contributor out-of-state PAC (ID#:					
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Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Self Employed Date Full name of contributor out-of-state PAC (ID#:) 10/18/2023 Valero PAC \$2,500.00 Contributor address; City; State; Zip Code Amount of Contribution (\$) San Antonio, TX 78269 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributor out-of-state PAC (ID#:) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 08/23/2023 Valls Consulting Group Amount of Contribution (\$) Contributor address; City; State; Zip Code State; Zip Code State; Zip Code Corpus Christi, TX 78401 Corpus Christi, TX 78401 State; Zip Code		Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Self Employed Date Full name of contributor out-of-state PAC (ID#:) 10/18/2023 Valero PAC \$2,500.00 Contributor address; City; State; Zip Code Amount of Contribution (\$) San Antonio, TX 78269 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributor out-of-state PAC (ID#:) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 08/23/2023 Valls Consulting Group Amount of Contribution (\$) Contributor address; City; State; Zip Code State; Zip Code State; Zip Code Corpus Christi, TX 78401 Corpus Christi, TX 78401 State; Zip Code					
Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Self Employed Date Full name of contributor out-of-state PAC (ID#:) 10/18/2023 Valero PAC \$2,500.00 Contributor address; City; State; Zip Code Amount of Contribution (\$) San Antonio, TX 78269 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributor out-of-state PAC (ID#:) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 08/23/2023 Valls Consulting Group Amount of Contribution (\$) Contributor address; City; State; Zip Code State; Zip Code State; Zip Code Corpus Christi, TX 78401 Corpus Christi, TX 78401 State; Zip Code		Austin. TX 78711			
Consultant Self Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/18/2023 Valero PAC \$2,500.00 Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code \$2,500.00 San Antonio, TX 78269 Employer (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 08/23/2023 Contributor address; City; State; Zip Code Amount of Contribution (\$) Corpus Christi, TX 78401 Corpus Christi, TX 78401 Amount of Contribution (\$)	Principal occu		Employer (See Instructions	<u>)</u>	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/18/2023 Valero PAC \$2,500.00 Contributor address; City; State; Zip Code \$2,500.00 San Antonio, TX 78269 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 08/23/2023 Valls Consulting Group Amount of Contribution (\$) Contributor address; City; State; Zip Code \$1,000.00 Contributor address; City; State; Zip Code Corpus Christi, TX 78401				,	
10/18/2023 Valero PAC \$2,500.00 Contributor address; City; State; Zip Code \$2,500.00 San Antonio, TX 78269 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 08/23/2023 Valls Consulting Group Amount of Contribution (\$) Contributor address; City; State; Zip Code \$1,000.00 Corpus Christi, TX 78401 Lue	Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
Contributor address; City; State; Zip Code San Antonio, TX 78269 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Out-of-state PAC (ID#:) Valls Consulting Group Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code Corpus Christi, TX 78401			/		\$2.500,00
San Antonio, TX 78269 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/23/2023 Valls Consulting Group \$1,000.00 Contributor address; City; State; Zip Code Corpus Christi, TX 78401 Luber Contribution (\$)	10/20/200				Ψ=1000
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 08/23/2023 Valls Consulting Group Contributor address; City; State; Zip Code \$1,000.00 Corpus Christi, TX 78401 Employer (See Instructions)					
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 08/23/2023 Valls Consulting Group Contributor address; City; State; Zip Code \$1,000.00 Corpus Christi, TX 78401 Employer (See Instructions)					
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/23/2023 Valls Consulting Group \$1,000.00 Contributor address; City; State; Zip Code Corpus Christi, TX 78401 Luteral Contribution		San Antonio, TX 78269			
08/23/2023 Valls Consulting Group \$1,000.00 Contributor address; City; State; Zip Code Corpus Christi, TX 78401	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
08/23/2023 Valls Consulting Group \$1,000.00 Contributor address; City; State; Zip Code Corpus Christi, TX 78401					
08/23/2023 Valls Consulting Group \$1,000.00 Contributor address; City; State; Zip Code Corpus Christi, TX 78401	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
Corpus Christi, TX 78401	08/23/2023	Valls Consulting Group			\$1,000.00
		Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Corpus Christi, TX 78401			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	

	The Instru	ction Guide explains how to comp	plete this fo	rm.	1	Total pages Schedule A1: Sch: 49/52 Rpt: 53/149	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		d A. (The Honorable)				00020493	-
4	Date	5 Full name of contributor out-of-sta	state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/18/2023	Vanexan, Kenneth (Mr.)					\$250.00
		6 Contributor address; City; State; Zip Coc					
		Corpus Christi, TX 78404					
8		upation / Job title (See Instructions)	9	9 Employer (See Instructions)			
	Radiologist			Radiology & Imaging of S	So	uth Texas	
	Date	Full name of contributor X out-of-sta	state PAC (ID#: <u>CC</u>	00226548)		Amount of Contribution (\$)	
	10/10/2023	Vistra Employee PAC Vistra Corp					\$5,000.00
		Contributor address; City; State; Zip Coc					
		Irving, TX 75039					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions))		
	Date	Full name of contributor X out-of-sta	state PAC (ID#: <u>C0</u>)0093054)		Amount of Contribution (\$)	
	12/06/2023	WALPAC for Responsible Governme					\$2,000.00
		Contributor address; City; State; Zip Coc					
L		Bentonville, AR 72176					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions))		
	Date	Full name of contributor out-of-sta	state PAC (ID#:)		Amount of Contribution (\$)	
	12/06/2023	WR Brannan & Associates LLC					\$1,000.00
		Contributor address; City; State; Zip Coc					
		1					
L		Austin, TX 78701					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions))		
	Date	Full name of contributor out-of-sta	state PAC (ID#:)		Amount of Contribution (\$)	
	08/24/2023	Wallace, Ben B (Mr.)					\$2,500.00
		Contributor address; City; State; Zip Coc	de				
L		Corpus Christi, TX 78401					
	•	upation / Job title (See Instructions)		Employer (See Instructions))		
	President			Hawn Brothers			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 50/52 Rpt: 54/149	
2	FILER NAME	FILER NAME			Filer ID (Ethics Commissi	on Filers)
	Hunter, Todo	A. (The Honorable)			00020493	
4	Date	5 Full name of contributor X out-of-state PAC (ID#:	00119008)	7	Amount of Contribution (\$)	
	10/12/2023	Waste Management Employees Better Governn				\$3,000.00
		6 Contributor address; City; State; Zip Code				
		Washington, DC 20004				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	·					
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	08/23/2023	Webb Jr., Charles)		Amount of Contribution (\$)	\$500.00
	00/20/2020					\$500.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78412				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ນ		
	Attorney		Webb, Cason, PC	,		
╞				<u>г</u>	American the formation (d)	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢500.00
	10/23/2023	Webb Jr., Charles				\$500.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78412				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ນ		
	Attorney		Webb, Cason, PC	,		
╞				-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢1 000 00
	12/14/2023	Weber, David				\$1,000.00
		Contributor address; City; State; Zip Code				
		Victoria, TX 77904				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Vice Preside		Hochheim Prairie Insura		P	
╞				<u>1 10</u>		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢4 500 00
	10/26/2023	Weekley, Richard (Mr.)				\$1,500.00
		Contributor address; City; State; Zip Code				
		Houston TX 77027				
⊢	Drippinglass	Houston, TX 77027	Employer (Cas Jastrustics			
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
L	Real estate of		Self			

_	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 51/52 Rpt: 55/149	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Hunter, Todo	d A. (The Honorable)			00020493	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/16/2023	Welch Jr., Gordon R. (Dr.)				\$200.00
		6 Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78411				
8	Principal occu	1	9 Employer (See Instructions)	<u>ل</u> ۱		
	Physician		Corpus Christi Urology C		oup	
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/10/2023	Whitley, Gregory				\$1,000.00
		Contributor address; City; State; Zip Code				
		Augita TV 70701				
<u> </u>	Dringinal occi	Ausitn, TX 78701 Ipation / Job title (See Instructions)	Employer (See Instructions)			
	Self Employe		Gregory Strategies LLC			
<u> </u>				_	to a state of Contribution (ft)	
	Date 12/06/2023	Full name of contributor out-of-state PAC (ID#: Wholesale Beer Distributors of Texas PAC)		Amount of Contribution (\$)	ቀ1 000 በበ
	12/00/2025					\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
		1				
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/19/2023	Wilson, Alan (Mr.)				\$500.00
		Contributor address; City; State; Zip Code				
┝	Dringing occ	Corpus Christi, TX 78413	Employer (See Instructions	<u> </u>		
	CEO	pation / Job title (See Instructions)	Charter Bank	ŋ		
╞═	Date	Full name of contributor X out-of-state PAC (ID#: C	00425975)	Γ	Amount of Contribution (\$)	
	12/14/2023	Windstream Holdings II, LLC PAC				\$2,000.00
		Contributor address; City; State; Zip Code				
L		Little Rock, AR 72212-2459				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
			L			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 52/52 Rpt: 56/149	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		d A. (The Honorable)			00020493	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/08/2023	Yarbrough, Kirk				\$250.00
		6 Contributor address; City; State; Zip Code		1		
		Robstown, TX 78380				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	Self		Self	<i>,</i>		
	Date	Full name of contributor Out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	10/23/2023)		Amount of Contribution (\$)	¢500.00
	10/23/2023	Zahn Jr., Charles (Mr.)				\$500.00
		Contributor address; City; State; Zip Code				
		Port Aransas, TX 78373				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Self Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/18/2023	Zeba, LLC				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78463				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
1						
1						
-						

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A2: Sch: 1/1 Rpt: 57/149
2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Hunter, Tod	d A. (The Honorable)			00020493
4	TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	
5	Date 10/17/2023	 6 Full name of contributor out-of-state PAC (ID#: Lamantia, Anthony (Mr.) 7 Contributor address; City; State; Zip Code Corpus Christi, TX 78401)	8	Amount of contribution (\$) \$3,941.87 Catering 3236.87 Bar \$300.00 Valet \$405.00 for a I fundraiser.
10	Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JU	
	President		L&F Distributors		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title	(FC	OR 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)			

PLEDGED CONTRIBUTIONS

SCHEDULE E	3
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The	Instruction Guide expl	ains how to comple	1 Total pages Schedule B: Sch: 1/1 Rpt: 58/149						
2 FILER NAME Hunter, Toc	E dd A. (The Honorable)			3 Filer ID (Ethics 00020493 00020493 00020493	Commission Filers)				
⁴ TOTAL OI	F UNITEMIZED PLEDGI	ES		\$	0.00				
5 Date	 6 Full name of pledgor Clearway Energy Inc, F 7 Pledgor Address; 	X out-of-state PAC (ID#: PAC City; State; Zip Code	<u>C00708180</u>)	8 Amount of 9 pledge (\$) \$5,000.00	In-kind description (If applicable)				
11/07/2023	C								
10 Principal occ	San Francisco, CA 941 cupation / Job title (See Instruc	LCheck if travel outside	of Texas. Complete Schedule T.						
5 Date	 6 Full name of pledgor Phillips 66 PAC 7 Pledgor Address; 	X out-of-state PAC (ID#: City; State; Zip Code	C00513549)	8 Amount of 9 pledge (\$) \$1,000.66	In-kind description (If applicable)				
	Washington, DC 20004	1-3650		Check if travel outside	of Texas. Complete Schedule T.				
10 Principal occ	cupation / Job title (See Instruc	tions)	11 Employer (See Instru	uctions)					

	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 explair	Office Ove Polling Ex Printing E Salaries/V	erhea pense xpens Vages	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	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 1/44 Rpt: 59/149		Hunter, Todd A. (The Honorable)					00020493		
4	Date	5	Payee name							
	07/17/2023		ATT Teleconference Service							
6	Amount (\$)	7	Payee address; City; Sta	te; Zip Co	ode					
	\$19.58		PO Box 5002							
			Carol Stream, IL 60197-5002							
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description				
OF Teleconference expense Check if travel outside of Texas. Complete Schedule T.								de of Texas. Complete Schedule T.		
	EXPENDITURE							officeholder living expense		
	Teleconference expense									
_										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held		
	Date		Payee name							
	08/11/2023		ATT Teleconference Service							
	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode					
	\$8.93		PO Box 5002							
			Carol Stream, IL 60197-5002							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description				
	EXPENDITURE		Teleconference expense					de of Texas. Complete Schedule T. officeholder living expense		
						Teleconferen				
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	l Ight			Office held		
	expenditure to benefit C/OI	Н								
	Date		Payee name							
	07/14/2023		American Express							
	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode					
	\$1,516.95		P.O. BOX 650448							
			Dallas, TX 75265-0448		_					
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE		Credit Card Payment					de of Texas. Complete Schedule T.		
						Credit card pa		officeholder living expense		
						Cieun caiu p	ayı	nont		
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	l Iabt			Office held		
	expenditure to benefit C/OI			Cince 300	grit					
-										

			EXI	PENDITURE CATEG	ORIES FO	R BC	DX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awa nmittee Legal Se	verage Expense rds/Memorials Expense	Office Ov Polling Ex Printing E Salaries/V	verhead xpense Expense Wages	se s/Contract Labor		Travel in District Travel Out of Dis	quipment & Related	
1	Total pages Schedule F1:	2						3	Filer ID	(Ethics Commi	ssion Filers)
-	Sch: 2/44 Rpt: 60/149		Hunter, Todd A. (The Honorable)				-	00020493		3310111 11013)
4	Date	5	Payee name								
	10/13/2023		Aransas Pass Ch	amber of Commer	ce						
6	Amount (\$)	7	Payee address;	City; Sta	te; Zip Co	ode					
	\$500.00		130 W Goodnight								
			-								
			Aransas Pass, TX	78336							
_	DUDDOCE					(1-)					
8	PURPOSE OF	(a)		pries listed at the top of this	schedule)	(D)	Description	outsid	le of Texas, Com	plete Schedule T.	
	EXPENDITURE		Food/Beverage E	xpense					officeholder living		
							Meeting expe			•	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officehold	er name	Office sou	ught			Office he	eld	
	Date		Payee name								
	08/15/2023		Aransas Pass Pro	gress							
	Amount (\$)		Payee address;	-	te; Zip Co	nde					
	\$98.00		PO Box 2100	City, Sit		Jue					
	\$90.00		FO BUX 2100								
			Aransas Pass, TX	78335							
	PURPOSE	(a)	Category (See Catego	ories listed at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE		Subscription							plete Schedule T.	
	-							, TX,	officeholder living	expense	
							Subscription				
	Operation ONITY is diverged)		0				0#14	.1.1	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officehold	ername	Office sou	ignt			Office he	90	
		_									
	Date		Payee name								
	09/11/2023		Black Baldy Inves	tments, LLC							
	Amount (\$)		Payee address;		te; Zip Co	ode					
	\$1,050.00		4161 Hwy 35 N, L	Init 1							
			Rockport, TX 783	82							
	PURPOSE	(a)	Category (See Catego	pries listed at the top of this	schedule)	(b)	Description				
	OF		Office Overhead/F		,			outsid	le of Texas. Com	plete Schedule T.	
	EXPENDITURE								officeholder living	expense	
						1	Rental expen	se			
	Complete ONLY if direct		Candidate/Officehold	er name	Office sou	ught		_	Office he	eld	
L	expenditure to benefit C/OI										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office C Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printing	Overhead Expense Expense (Expense S/Wages	e /Contract Labor	Travel in District Travel Out of Dist	uipment & Related Expense			
1	Total pages Schedule F1:	2	FILER NAME		3	Filer ID	(Ethics Commission Filers)			
	Sch: 3/44 Rpt: 61/149		Hunter, Todd A. (The Honorable)			00020493	(
4	Date 10/09/2023	5	Payee name Brent Chesney Campaign							
6	Amount (\$) \$2,100.00	7	Payee address; City; State; Zip (242 Cape Aron Corpus Christi, TX 78412	Code						
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 outsic Check if Austin, TX, Political Contribu	officeholder living				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office so	ought		Office hel	d			
	Date		Payee name							
	07/10/2023		Bryan, Kenneth							
	Amount (\$) \$6,600.00		Payee address; City; State; Zip (1122 Colorado St, Apt. 2105	Code						
			Austin, TX 78701-2142							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Housing expense	(b)	Description Check if travel outsion Check if Austin, TX, Housing expense	officeholder living				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office so	ought		Office hel	d			
	Date		Payee name							
	10/13/2023		Burn Pits 360							
	Amount (\$) \$500.00		Payee address; City; State; Zip (201 N. Fourth St.	Code						
			Robstown, TX 78380							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Event Expense	(b)	Description Check if travel outsid Check if Austin, TX, Event sponsorsh	officeholder living				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name Office so	ought		Office hel	d			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Legal Services	e Expense emorials Expense	Office Ove Polling Exp Printing Ex Salaries/W	kpense /ages/Contract Labor	Trar Trav Trav	nsportation E vel in District vel Out of Dis	raising Expense quipment & Related Expense strict category not listed above)	
1	Total pages Schedule F1:	2 FILER	NAME				3 File	er ID	(Ethics Commission Filers)	
-	Sch: 4/44 Rpt: 62/149		er, Todd A. (The	Honorable)				020493	()	
4	Date 09/22/2023	Payee Carls	name on, Jessie							
6	Amount (\$) \$500.00	614 E	address; City Bel Air Dr us Christi, TX 78		e; Zip Co	de				
8	PURPOSE OF EXPENDITURE		Ory (See Categories I a expense	sted at the top of this sc	hedule)	(b) Description Check if travel Check if Austir Media expen	n, TX, office		plete Schedule T. expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	ate/Officeholder na	ime	Office sou	ght		Office he	eld	
	Date	Payee	name							
	09/29/2023	Carra	nza, Vicente (M	r.)						
	Amount (\$) \$500.00		address; City Jack Ave	; State	e; Zip Co	de				
			town, TX 78380							
	PURPOSE OF EXPENDITURE		ory (See Categories I rtising Expense	sted at the top of this sc	hedule)	(b) Description	n, TX, office	eholder living	plete Schedule T. I expense	
	Complete ONLY if direct expenditure to benefit C/OF	Candida	ate/Officeholder na	ime	Office sou	ght		Office he	eld	
	Date	Payee	name							
	10/04/2023		oration for Life							
	Amount (\$) \$1,000.00		address; City Robinson	; State	e; Zip Co	de				
			us Christi, TX 78		i					
	PURPOSE OF EXPENDITURE		ory (See Categories I E Expense	sted at the top of this sc	hedule)	(b) Description	n, TX, office		plete Schedule T. I expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	ate/Officeholder na	ime	Office sou	ght		Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 5/44 Rpt: 63/149	Hunter, Todd A. (The Honorable)	00020493							
4	Date 10/26/2023	5 Payee name Children's Coalition of Aransas County								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$1,000.00	401-B W. Market St								
		Rockport, TX 78382								
8	PURPOSE OF EXPENDITURE		ıtside of Texas. Complete Schedule T. IX, officeholder living expense rship							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	07/14/2023	Citi Bank Credit Card								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$4,922.28	P.O. BOX 78045 Phoenix, AZ 85062-8045								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. IX, officeholder living expense yment							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/10/2023	Citi Bank Credit Card								
	Amount (\$) \$4,237.26	Payee address;City;State;Zip CodeP.O. BOX 78045								
		Phoenix, AZ 85062-8045								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. FX, officeholder living expense ayment							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	xpense Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 6/44 Rpt: 64/149		Hunter, Todd A. (The Honorable)				00020493			
4	Date 08/23/2023		Payee name Citi Bank Credit Card							
6	6 Amount (\$) 7 Payee address; City; State; Zip Code \$1,845.40 P.O. BOX 78045 Phoenix, AZ 85062-8045 Phoenix, AZ 85062-8045									
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sc Credit Card Payment	hedule)		, тх	ide of Texas. Complete Schedule T. , officeholder living expense nent			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ught		Office held			
	Date		Payee name							
	09/21/2023		Citi Bank Credit Card							
	Amount (\$) \$2,316.44		Payee address; City; State P.O. BOX 78045	e; Zip Co	ode					
	PURPOSE OF EXPENDITURE	(a)	Phoenix, AZ 85062-8045 Category (See Categories listed at the top of this sci Credit Card Payment	hedule)		, тх	ide of Texas. Complete Schedule T. , officeholder living expense nent			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ught		Office held			
	Date		Payee name							
	10/17/2023		Citi Bank Credit Card							
	Amount (\$) \$9,740.29		Payee address; City; State P.O. BOX 78045	e; Zip Co	ode					
			Phoenix, AZ 85062-8045		1					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sc Credit Card Payment	hedule)		, тх	ide of Texas. Complete Schedule T. , officeholder living expense ment			
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	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 nmittee Legal Services The Instruction Guide expla	Office (Polling Printing Salarie:	Dverhe Expen I Exper s/Wage	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 F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 7/44 Rpt: 65/149		Hunter, Todd A. (The Honorable)					00020493			
4	Date	5	Payee name								
	09/29/2023		Coastal Bend Heros								
6	Amount (\$)	7	Payee address; City; S	tate; Zip (Code						
	\$200.00		7313 Pepper Ridge								
			Corpus Christi, TX 78413								
8	PURPOSE	(a)	Category (See Categories listed at the top of thi	s schedule)	(b) Description					
	OF		Event Expense	s solicule)			outsi	de of Texas. Complete Schedule T.			
	EXPENDITURE							officeholder living expense			
						Event sponse	orsł	nip			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office se	ough	t		Office held			
	expenditure to benefit e/or										
	Date		Payee name								
	07/20/2023		Coastal Bend Republicans								
	Amount (\$)		Payee address; City; S	tate; Zip (Code						
	\$500.00		15346 Cartagena Court								
			5								
			Corpus Christi, TX 78418								
	PURPOSE	(a)	Category (See Categories listed at the top of thi	s schedule)	(b) Description					
	OF EXPENDITURE		Contributions/Donations Made By					de of Texas. Complete Schedule T.			
			Candidate/Officeholder/Political Co	mmittee				officeholder living expense			
						Political cont	ridu	ltion			
				0.45							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	bugn	t		Office held			
		_									
	Date		Payee name								
	10/04/2023		Coastal Bend Republicans								
	Amount (\$)		Payee address; City; S	tate; Zip (Code						
	\$5,000.00		15346 Cartagena Court								
			Corpus Christi, TX 78418								
	PURPOSE	(a)	Category (See Categories listed at the top of thi	s schedule)	(b) Description					
	OF EXPENDITURE		Contributions/Donations Made By					de of Texas. Complete Schedule T.			
			Candidate/Officeholder/Political Co	mmittee				officeholder living expense			
						Political cont	UUU				
		Ľ	Condidate (Office held an analysis	Office		•		Office hold			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	Jugn	l		Office held			
	-										

			E	PENDITURE CA	FEGORIE	S FOR E	3OX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/E Gift/Av nmittee Legal	Expense leverage Expense lards/Memorials Expense Services nstruction Guide ex	Off Po e Pri Sa	fice Overhe Iling Exper Inting Expe Iaries/Wag	nse es/Contract Labor	-	Fransportation E Fravel in District Fravel Out of Dis		
1	Total pages Schedule F1:	2	FILER NAME					3 F	iler ID	(Ethics Commission Filers)	
	Sch: 8/44 Rpt: 66/149		Hunter, Todd A.	(The Honorable)				(00020493		
4	Date 09/25/2023		Payee name College Republic	ans Texas A&M	Universi	ity CC					
6	Amount (\$)		Payee address;	City;	State; Z	ip Code	•				
	\$1,200.00		6300 Ocean Driv Corpus Christi, 1	-							
8	PURPOSE	(a)	Catagony			. (h	Decoription				-
U	OF		Category _{(See Cate} Event Expense	gories listed at the top of	f this schedule	e) (r		n, TX, o	fficeholder living	plete Schedule T. g expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officehol	der name	Offic	e sough	t		Office he	eld	
	Date		Payee name								_
	10/04/2023		Corpus Christi A	rea Retired Tead	chers Ass	sociatio	n				
_	Amount (\$)		Payee address;	City;	State; Z						-
	\$100.00		P.O. Box 270986		State, Z	ip Coue					
			Corpus Christi, T								
	PURPOSE OF EXPENDITURE		Category _{(See Cate} Advertising Expe		f this schedule	_{e)} (b		n, TX, o	fficeholder living	plete Schedule T. J expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officehol	der name	Offic	e sough	t		Office he	eld	
	Date		Payee name								=
	08/04/2023	I	Corpus Christi H	ooks Baseball C	lub						
	Amount (\$)		Payee address;	City;	State; Z	in Code	•				
	\$1,000.00	I	734 E. Port Aver	-	,						
			Corpus Christi, T	X 78401							
	PURPOSE OF EXPENDITURE		Category _{(See Cate} Event Expense	gories listed at the top of	f this schedule	_{e)} (b		n, TX, o	fficeholder living	plete Schedule T. g expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officehol	der name	Offic	e sough	t		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	-	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 F1:	LER NAME		3 Filer ID (Ethics Commission Filers)						
	Sch: 9/44 Rpt: 67/149	unter, Todd A. (The Honorable)		00020493						
4	Date 09/06/2023	ayee name orpus Christi Rimz								
6	Amount (\$) \$250.00	ayee address; City; Sta L3 Havana St. orpus Christi, TX 78405	te; Zip Code							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	ndidate/Officeholder name	Office sought	Office held						
	Date	ayee name								
	07/08/2023	orpus Christi Road Runners								
	Amount (\$)	ayee address; City; Sta	te; Zip Code							
	\$1,000.00	O. Box 8750 orpus Christi, TX 78468								
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this vent Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense Orship						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	ndidate/Officeholder name	Office sought	Office held						
	Date	ayee name								
	09/12/2023	orpus Christi Symphony								
	Amount (\$) \$250.00	ayee address; City; Sta 55 N. Carancahua St, Tower II, Sui	te; Zip Code te 410							
		orpus Christi, TX 78401-0818								
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this dvertising Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	ndidate/Officeholder name	Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials	se Expense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	yment/ rhead/f ense pense ages/C	Reimbursement Rental Expense 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: 10/44 Rpt:		Hunter, Todd A. (The Hono	rable)					00020493	
4	Date	5	Payee name				1			
	07/10/2023		Cort Austin Rental							
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	de				
	\$900.00		9821A IH-35 North							
			Austin, TX 78753							
8	PURPOSE	(a)	Category (See Categories listed at th	ne top of this sch	edule)	(b) [Description			
	OF EXPENDITURE		Housing expense		,	Ľ	Check if travel of		de of Texas. Com	
	EXPENDITORE								officeholder living	expense
						ŀ	urniture rent	ai		
_	Complete ONIL V if direct		andidate/Officeholder name		Office sou	wh t			Office he	Jd
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Onicendider name	C	JIIICE SOUĮ	JUL			Onice he	910
	Date		Payee name							
	08/04/2023		Cort Austin Rental							
	Amount (\$)		Payee address; City;	State	; Zip Co	de				
	\$400.00		9821A IH-35 North							
			Austin, TX 78753							
	PURPOSE	(a)	Category (See Categories listed at th	ne top of this sch	edule)	(b) [Description			
	OF EXPENDITURE		Furniture rental			Ē			de of Texas. Com	
	_/					-			officeholder living	expense
						г	-urniture rent	ai		
	Complete ONLY if direct		andidate/Officeholder name		Office sou	nht			Office he	ald
	expenditure to benefit C/Oł				Since Soul	Jiii			Office fie	
_	Date	1	Payee name							
	10/13/2023	I	Dollar Tree							
	Amount (\$)		Payee address; City;	State	; Zip Co					
	\$8.12	I	4104 S. Staples	Olute,	, zip 00					
	40.12		+10+ 0. Otapies							
			Corpus Christi, TX 78411							
	PURPOSE	(a)	Category (See Categories listed at th	ne top of this sch	edule)	(b) [Description			
	OF EXPENDITURE		Office Overhead/Rental Exp	oense		Ē			de of Texas. Com	
	-					Ľ	Supplies	ΤX,	officeholder living	expense
							Juppingo			
-	Complete ONLY if direct		andidate/Officeholder name	(Office soug	nht			Office he	eld
	expenditure to benefit C/Oł				2.1100 000	,			Child He	
-										

	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 Git/Awards/Memorials Expense mittee Legal Services The Instruction Guide explain	Office Ov Polling Ex Printing E Salaries/V	erhea kpens Expens Nages	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	FILER NAME		-		3	Filer ID (Ethics Commission Filers)			
-	Sch: 11/44 Rpt:		Hunter, Todd A. (The Honorable)					00020493			
4	Date		Payee name				I				
_	09/12/2023		Dreamers and Walkers Consulting, L	LC							
6	Amount (\$)	7	Payee address; City; Stat	e; Zip Co	ode						
	\$2,000.00		PO Box 18639								
			Corpus Christi, TX 78418								
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description					
	OF EXPENDITURE		Consulting Expense	,			outsi	ide of Texas. Complete Schedule T.			
	EXPENDITORE							, officeholder living expense			
	Consulting expense										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught			Office held			
	Date		Payee name								
	09/26/2023		Dreamers and Walkers Consulting, L	LC							
⊢	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode						
	\$1,000.00		PO Box 18639	., .							
	+_,000.00										
			Corpus Christi, TX 78418								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description					
	EXPENDITURE		Consulting Expense					ide of Texas. Complete Schedule T. , officeholder living expense			
						Consulting ex					
						Consularly e	vhe				
⊢	Complete ONLY if direct		andidate/Officeholder name	Office sou	l Ight			Office held			
	expenditure to benefit C/OI			Onice Soc	Jynt			Onice held			
⊨	Data	1									
	Date 07/17/2023		Payee name Embry Communications								
			Embry Communications								
	Amount (\$)			e; Zip Co	ode						
	\$9,000.00		2614 Raindance								
			Leander, TX 78641		_						
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description					
	OF EXPENDITURE		Consulting Expense					ide of Texas. Complete Schedule T.			
						Consulting ex		officeholder living expense			
					1		vhg				
_	Complete ONIL V if direct		andidata/Officabalder same	Office	laht			Office hold			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	uynt			Office held			
\vdash											

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 Re Fees Office O Food/Beverage Expense Polling I Gift/Awards/Memorials Expense Printing			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 F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 12/44 Rpt:		Hunter, Todd A. (The Honorable)	00020493							
4	Date	5	5 Payee name								
	10/13/2023		Flour Bluff Jr. High School Math Clu	du							
6	Amount (\$)	7 Payee address; City; State; Zip Code									
	\$250.00		2505 Waldron Road								
			Corpus Christi, TX 78418								
8	PURPOSE	(a)	Category (See Categories listed at the top of this	s schedule)	(b) Description					
	OF EXPENDITURE		Event Expense	,				ide of Texas. Complete Schedule T.			
	EXPENDITORE							, officeholder living expense			
						Event spons	orsi	hip			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI										
	Date		Payee name								
	09/29/2023 Garza, Rolando										
	Amount (\$)	Payee address; City; State; Zip Code									
	\$500.00		414 Brooks Drive	, p							
	\$000.00										
			Corpus Christi, TX 78408								
	PURPOSE	(a)	Category (See Categories listed at the top of this	s schedule)	(b) Description					
OF EXPENDITURE			Advertising Expense					butside of Texas. Complete Schedule T.			
					Check if Austin, TX, officeholder living expense Advertising expense						
						Auventising	she	ense			
	-										
Complete <u>ONLY</u> if direct expenditure to benefit C/C			Candidate/Officeholder name	Office s	office held						
	Date 07/06/2023		Payee name Granado, Angie Flores								
Amount (\$) Payee address; City; State; Zip Code											
	\$6,500.00		418 Peoples St								
			# 505)5							
Corpus Christi, TX 78401											
	PURPOSE	(a)	Category (See Categories listed at the top of this	s schedule)	(b) Description					
	OF		Salaries/Wages/Contract Labor	, concurrence)			outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE		5			Check if Austin	ı, TX	, officeholder living expense			
						Contract Lab	or				
	Complete ONLY if direct		Candidate/Officeholder name	Office s	soug	ht		Office held			
	expenditure to benefit C/OI	Н									

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	nmittee	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME	<u> </u>					3	Filer ID	(Ethics Commission Filers	;)
Sch: 13/44 Rpt:									00020493	•		
4	Date	5	5 Payee name									
	08/04/2023		Granado, A	ngie Flore	es							
6	Amount (\$) \$6,500.00	7	Payee addre 418 People # 505 Corpus Chr	s St		State; Zip	Code	2				
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor 										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offi	ceholder n	ame	Office	sough	nt		Office h	eld	
	Date		Payee name									
	09/01/2023											
	Amount (\$) \$6,500.00		Payee addre 418 People # 505 Corpus Chr	s St		State; Zip	Code	2				
	PURPOSE OF EXPENDITURE	(a)	Category _{(S} Salaries/Wa		listed at the top of t tract Labor	his schedule)	(1		n, TX	ide of Texas. Con , officeholder livin	nplete Schedule T. g expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	ceholder n	ame	Office	sougł	nt		Office h	eld	
	Date		Payee name									-
09/25/2023			Granado, A	ngie Flore	es							
	Amount (\$) \$7,000.00		Payee addre 418 People # 505 Corpus Chr	s St		State; Zip	Code	9				
	PURPOSE OF EXPENDITURE	(a)	Category _{(S} Salaries/Wa		listed at the top of t tract Labor	his schedule)	(1		n, TX	ide of Texas. Con , officeholder livin	nplete Schedule T. g expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offi	ceholder n	ame	Office	sougł	nt		Office h	eld	

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1		
	Sch: 14/44 Rpt:	Hunter, Todd A. (The Honorable)00020493
4	Date	5 Payee name
	10/30/2023	Granado, Angie Flores
6	Amount (\$) \$6,500.00	7 Payee address; City; State; Zip Code 418 Peoples St # 505 Corpus Christi, TX 78401
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/10/2023	Grassroots Consultants
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	4710 Hakel Corpus Christi, TX 78415
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/06/2023	Grassroots Consultants
	Amount (\$) \$800.00	Payee address; City; State; Zip Code 4710 Hakel
		Corpus Christi, TX 78415
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting expense
	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		Gift/Award nmittee Legal Serv	erage Expense Is/Memorials Expense	Office Ove Polling Ex Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 15/44 Rpt:		Hunter, Todd A. (T	he Honorable)				00020493
4	Date	5	Payee name				I	
	10/04/2023		Grassroots Consul	tants				
6	Amount (\$)	7	Payee address; (City; State;	Zip Co	de		
	\$800.00		4710 Hakel	,	, 1			
			Corpus Christi, TX	78415				
8	PURPOSE	(a)				(b) Description		
ľ	OF	(4)	Consulting Expens	ies listed at the top of this sch	edule)		outsi	de of Texas. Complete Schedule T.
	EXPENDITURE			C		Check if Austin	, TX,	officeholder living expense
						Consulting ex	кре	nse
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholde	r name C	Office sou	ght		Office held
	Date		Payee name					
	10/26/2023		Grassroots Consul	tants				
	Amount (\$)		Payee address; 0	City; State;	; Zip Co	de		
	\$1,000.00		4710 Hakel					
			Corpus Christi, TX	78415				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categor Consulting Expens	ies listed at the top of this sch e	edule)		, тх,	de of Texas. Complete Schedule T. officeholder living expense NSE
	Complete ONLY if direct		Candidate/Officeholde	r name C	Dffice sou	ght		Office held
	expenditure to benefit C/OI	Н				-		
	Date		Payee name					
	09/14/2023		Hardknocks Sports	Grill				
	Amount (\$)	\vdash	•		Zip Co	le		
	\$96.18		15401 SPID		, <u></u> p 00			
	++++++		10.01.01.02					
			Corpus Christi, TX	78418				
	PURPOSE OF	(a)		ies listed at the top of this sch	edule)	(b) Description	out-'	de ef Tevres, Complete Sebs tuts T
	EXPENDITURE		Food/Beverage Ex	pense			, TX,	de of Texas. Complete Schedule T. officeholder living expense e
-	Complete ONLY if direct	L(Candidate/Officeholde	r 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/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense hmittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	rhead/R pense pense /ages/Co	Reimbursement iental Expense ontract Labor 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: 16/44 Rpt:		Hunter, Todd A. (The Honorable)					00020493
4	Date	5	Payee name			I		
	10/12/2023		Hardknocks Sports Grill					
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	de			
	\$48.14		15401 SPID	· •				
			Corpus Christi, TX 78418					
8	PURPOSE	(a)	-		(h) D	escription		
Ũ	OF	(,	Category (See Categories listed at the top of this sc Food/Beverage Expense	nedule)	() Г		outsi	de of Texas. Complete Schedule T.
	EXPENDITURE				Ē	Check if Austin,	ΤX,	officeholder living expense
					N	leeting expe	nse	е
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght			Office held
	Date		Payee name					
	07/13/2023		Huerta, Isabella					
	Amount (\$)		Payee address; City; State	e; Zip Co	de			
	\$1,600.00		446 Pennington Dr.					
			Corpus Christi, TX 78412					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sc	hedule)	(b) D	escription		
	EXPENDITURE		Housing expense		F	4		de of Texas. Complete Schedule T. , officeholder living expense
					H	Lousing expe		
	Complete ONLY if direct	(Candidate/Officeholder name	Office sou	ght			Office held
	expenditure to benefit C/OF	Н						
	Date		Payee name					
	07/28/2023		Huerta, Isabella					
	Amount (\$)		Payee address; City; State	e; Zip Co	de			
	\$100.00		446 Pennington Dr.					
			-					
			Corpus Christi, TX 78412					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sc	hedule)	(b) D	escription		
	EXPENDITURE		Salaries/Wages/Contract Labor		Ļ	4		de of Texas. Complete Schedule T. , officeholder living expense
						Contract Labo		
-	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ght			Office held
	expenditure to benefit C/OF				-			
-								

EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	By - cal Committee Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel in District Travel Out of District OTHER (enter a category r The Instruction Guide explains how to complete this form.						quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME	Ξ				3	Filer ID	(Ethics Commission Filers)
	Sch: 17/44 Rpt:		Hunter, Too		Honorable)				00020493	
4	Date	5	Payee name							
	10/18/2023		Huerta, Isa	bella						
6	Amount (\$) \$800.00		Payee addre 446 Pennin Corpus Chi	gton Dr.	· · ·	; Zip Co	de			
8	PURPOSE	(a)	Category (s	oo Catogorios li	sted at the top of this sch	odulo)	(b) Description			
-	OF EXPENDITURE		Housing ex		sted at the top of this sch	ieurie)	Check if tra	avel outs ustin, TX	ide of Texas. Com 4, officeholder living 5 E	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	iceholder na	ime (Office sou	ght		Office he	eld
	Date		Payee name							
	08/11/2023		Hunter, Too	bb						
	Amount (\$)		Payee addre	ss; City	; State	; Zip Co	de			
	\$5,000.00		445 Cape H Corpus Chi	-	412					
	PURPOSE OF EXPENDITURE	(a)			sted at the top of this sch nbursement	nedule)		avel outs ustin, TX	side of Texas. Com K, officeholder living t	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder na	ime C	Office sou	ght		Office he	eld
	Date		Payee name							
	08/29/2023		Hunter, Too							
	Amount (\$)		Payee addre		; State	; Zip Co	de			
	\$7,500.00		445 Cape H	lenry						
			Corpus Chi			i				
	PURPOSE OF EXPENDITURE				sted at the top of this sch nbursement	nedule)		avel outs ustin, TX	ide of Texas. Com K, officeholder livinç Nt	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	iceholder na	ime C	Office sou	ght		Office he	eld

EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expen mittee Legal Services The Instruction Guide e		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 6		•		•	3	Filer ID	(Ethics Commission Filers)	
-	Sch: 18/44 Rpt:		Hunter, Todd A. (The Honorable	e)				00020493		
4	Date	5 F	Payee name							
	09/19/2023	ŀ	Hunter, Todd							
6	Amount (\$)	7 F	Payee address; City;	State;	; Zip Co	de				
	\$5,000.00	4	145 Cape Henry							
			Corpus Christi, TX 78412							
8	PURPOSE		-			(b) Description				
°	OF		Category (See Categories listed at the top Loan Repayment/Reimburseme		edule)	(b) Description	outsi	ide of Texas. Com	plete Schedule T.	
	EXPENDITURE		Joan Repayment/Reimbulseme	11L				, officeholder living	-	
						Loan reimbu	rsei	ment		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	yht		Office he	eld	
	Date	F	Payee name							
	07/05/2023		Hutchinson, Charlotte							
	Amount (\$)		Payee address; City;	State	; Zip Co	1e				
	\$100.00		621 Santa Monica Pl	State,	, zip co					
	\$100.00		JZI Santa Monica Fi							
		(Corpus Christi, TX 78411							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Gift/Awards/Memorials Expense		edule)		, TX	ide of Texas. Com , officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	jht		Office he	eld	
	Date	F	Payee name							
	10/16/2023		John Donner & Associates							
	Amount (\$)	F	Payee address; City;	State	; Zip Co	1e				
	\$35,300.00		L005 Congress Ave., Ste 580	otato,	, 20 00					
	\$00,000.00	-								
		,	Austin, TX 78701							
	PURPOSE OF		Category (See Categories listed at the top	of this sch	edule)	(b) Description	outsi	ide of Texas. Com	plete Schedule T.	
	EXPENDITURE		Consulting Expense				, TX	, officeholder living		
	Complete ONLY if direct	Cá	andidate/Officeholder name	C	Office sou	jht		Office he	eld	
	expenditure to benefit C/OI									
-										

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 Exper Gift/Awards/Memorial nmittee Legal Services The Instruction G	s Expense	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 19/44 Rpt:		Hunter, Todd A. (The Hond	orable)				00020493
4	Date	5	Payee name					
	08/09/2023		Legislative Solutions					
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le		
	\$350.00		PO Box 5643					
			Austin, TX 78763-5643					
8	PURPOSE	<u> </u>	Category (See Categories listed at	4h - 4		(b) Description		
ľ	OF	(~)	Advertising Expense	the top of this sch	edule)		outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE					Check if Austin	n, TX,	, officeholder living expense
						Advertising e	expe	ense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Office sou	ht		Office held
	Date		Payee name					
	10/26/2023		Legislative Solutions					
	Amount (\$)		Payee address; City;	State;	Zip Co	le		
	\$350.00		PO Box 5643					
			Austin, TX 78763-5643					
	PURPOSE OF	(a)	Category (See Categories listed at	the top of this sch	edule)	(b) Description		
	EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T.
						Advertising e		, officeholder living expense
						Advertising e	νpt	
	Complete ONLY if direct		Candidate/Officeholder name		Office soug	lht		Office held
	expenditure to benefit C/OI					int		Office field
_	Date	<u> </u>						
	10/13/2023		Payee name Lowe's Home Center					
					7. 0			
	Amount (\$)		Payee address; City;	State;	; Zip Coo	16		
	\$14.90		1530 Airline Rd					
			Corpus Christi, TX 78412					
	PURPOSE OF	(a)	Category (See Categories listed at	the top of this sch	edule)	(b) Description		
	EXPENDITURE		Office Overhead/Rental Ex	pense				ide of Texas. Complete Schedule T.
							1, IX,	, officeholder living expense
						Supplies		
_	Complete ONLV if direct	Ļ	Candidate/Officeholder name		Office soug	uht		Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			Ĺ	Surce Soul	pric		

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 explai	Office Ov Polling Ex Printing E Salaries/V	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	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 20/44 Rpt:		Hunter, Todd A. (The Honorable)					00020493
4	Date	5	Payee name					
	08/22/2023		Majic 104.9 FM					
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip Co	ode			
	\$1,500.00		P.O. Box 270547					
			Corpus Christi, TX 78427					
8	PURPOSE	(a)	Category (See Categories listed at the top of this		(b)	Description		
ľ	OF	(~)	Advertising Expense	schedule)	(,		outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE					Check if Austin	ı, ТХ,	, officeholder living expense
						Advertising e	xpe	ense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	07/24/2023		Marlin Athletic Booster Club					
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	ode			
	\$1,500.00		PO Box 231					
			Port Aransas, TX 78373					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Event Expense	schedule)	(b)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense hip
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	07/28/2023		Meyer, Carrie					
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	ode			
	\$200.00		4401 Gulfbreeze Blvd	<i>·</i>				
			Corpus Christi, TX 78402		1			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description	outoi	ide of Texas. Complete Schedule T.
	EXPENDITURE		Advertising Expense				ı, ТХ,	, officeholder living expense
-	Complete ONLY if direct	L(Candidate/Officeholder name	Office sou	L Jaht			Office held
	expenditure to benefit C/OF			2	5			

				EXPENDITURE	CATEGO)X 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fee Foo Gif nmittee Leg	ent Expense	pense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	aymer rhead bense cpens /ages	ht/Reimbursement d/Rental Expense e /Contract Labor		Transportation Travel in Distric Travel Out of D		
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	sion Filers)
-	Sch: 21/44 Rpt:	[A. (The Honoral	ble)				ľ	00020493	X • • • • • • •	,
		-)							
4	Date	5	Payee name	-								
	07/06/2023		Murphy Nasic									
6	Amount (\$)	7	Payee address;		State;	; Zip Co	de					
	\$18,850.00		815 - S Brazos	s St								
			Ste 304									
			Austin, TX 787	701								
8	PURPOSE	(a)	Category (See C	Categories listed at the I	on of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Consulting Ex			,			outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITORE									officeholder livir	ig expense	
								Consulting ex	кер	ense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officel	nolder name	C	Office sou	ght			Office h	eld	
	Date		Payee name									
	07/27/2023		Murphy Nasic	a								
	Amount (\$)		Payee address;	City;	State;	Zip Co	de					
	\$4,000.00		815 - S Brazos	s St								
			Ste 304									
			Austin, TX 787	701								
	DUDDOOD											
	PURPOSE OF	(a)		Categories listed at the	op of this sch	edule)	(b)	Description	outei	do of Toyas Cor	nplete Schedule T.	
	EXPENDITURE		Consulting Ex	pense						officeholder livir		
								Consulting ex				
	Complete ONLY if direct		Candidate/Officel	nolder name		Dffice sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н				·	0					
_	Date											
	08/30/2023		Payee name Murphy Nasica	2								
					a							
	Amount (\$)		Payee address;		State;	; Zip Co	de					
	\$9,394.58		815 - S Brazos	s St								
			Ste 304									
			Austin, TX 787	701								
	PURPOSE	(a)	Category (See C	Categories listed at the t	op of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Consulting Ex			,					nplete Schedule T.	
	EXFENDITORE									officeholder livir	ig expense	
								Consulting ex	кре	nse		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officel	nolder name	C	Office sou	ght			Office h	eld	
										. <u></u>		

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	EXPENDITUE Event Expense Fees Food/Beverage Expen Gift/Awards/Memorials Legal Services The Instruction G	se Expense	Loan Repa Office Ove Polling Ex Printing Ex Salaries/W	yment/Reimbursem rhead/Rental Expen pense pense 'ages/Contract Labo	ise or	Tra Tra Tra	ansportation E avel in District avel Out of Dis	raising Expense quipment & Related Expense trict category not listed above)	3
1	Total pages Schedule F1:	2		=				3	۲ Fi	ler ID	(Ethics Commission Fil	ers)
-	Sch: 22/44 Rpt:	[– dd A. (The Honc	vrahlo)			ľ		0020493		010)
					nable)				00	0020493		
4	Date	5	Payee name									
	09/14/2023		Murphy Na	sica								
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de					
	\$4,000.00		815 - S Bra	zos St								
			Ste 304									
				70701								
			Austin, TX	78701								
8	PURPOSE OF	(a)		ee Categories listed at	the top of this sch	nedule)	(b) Description					
	EXPENDITURE		Consulting	Expense							plete Schedule T.	
							Consultin			iceholder living	expense	
							Consului	iy exp	Jens	e		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	C	Office sou	ght			Office he	eld	
	Date		Payee name									
	09/15/2023		Murphy Na	sica								
_	Amount (\$)	┝	Payee addre		State	; Zip Co	de					
	\$13,111.76		815 - S Bra	-	Oluic	, 20 00						
	Ψ13,111.70			1203 31								
			Ste 304									
			Austin, TX	78701								
	PURPOSE	(a)	Category (S	ee Categories listed at t	the top of this sch	nedule)	(b) Description	n				
	OF EXPENDITURE		Consulting				Check if t	travel ou	itside o	of Texas. Com	plete Schedule T.	
	EXFENDITORE									iceholder living	expense	
							Consultin	ig exp	pens	e		
	Complete ONLY if direct		Candidate/Off	iceholder name	(Office sou	ght			Office he	eld	
	expenditure to benefit C/Oł	Н										
	Date		Payee name									
	09/29/2023		Murphy Na									
	Amount (\$)		Payee addre		State	; Zip Co	de					
	\$2,500.00		815 - S Bra	izos St								
			Ste 304									
			Austin, TX	78701								
-	PURPOSE	(a)		ee Categories listed at	the ten of the	adula)	(b) Description	n				
	OF	```	Consulting		the top of this sch	iedule)			itside d	of Texas. Com	plete Schedule T.	
	EXPENDITURE		Consularly	Expense						iceholder living		
							Consultin	ig exp	oens	e		
								- '				
-	Complete ONLY if direct	Ļ	Candidate/Off	iceholder name	(Office sou	nht			Office he	ald	
	expenditure to benefit C/Oł			icenoluer name	(511CC 50U	Jur			Unice He	Ju	

			EXPENDITURE CA	TECO			NX 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 Expens	se	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	ymer rhead bense pense ages/	t/Reimbursement I/Rental Expense e /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: 23/44 Rpt:		Hunter, Todd A. (The Honorable)					00020493	× ,
4	Date	5	Payee name							
	09/29/2023		Murphy Nasica							
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	de				
	\$4,000.00		815 - S Brazos St							
			Ste 304							
			Austin, TX 78701							
8	PURPOSE OF	(a)	Category (See Categories listed at the top of	of this sch	edule)	(b)	Description			
	EXPENDITURE		Consulting Expense						de of Texas. Com	
							Consulting ex		officeholder living	Jexpense
							Consularly e/	vhe	1130	
_									011	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	Office sou	ght			Office he	eld
	Date		Payee name							
	10/04/2023		Murphy Nasica							
	Amount (\$)		Payee address; City;	State:	Zip Co	de				
	\$898.00		815 - S Brazos St	,						
	+000100		Ste 304							
			Austin, TX 78701							
	PURPOSE OF	(a)	Category (See Categories listed at the top of	of this sch	edule)	(b)	Description			
	EXPENDITURE		Consulting Expense						de of Texas. Com	
									officeholder living	j expense
							Consulting ex	khe	lise	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	Office sou	ght			Office he	eld
	Date		Payee name							
	10/13/2023		Murphy Nasica							
	Amount (\$)		Payee address; City;	State;	; Zip Co	de				
	\$14,000.00		815 - S Brazos St							
			Ste 304							
			Austin, TX 78701							
	PURPOSE OF	(a)	Category (See Categories listed at the top of	of this sch	edule)	(b)	Description			alata Oshadudi T
	EXPENDITURE		Consulting Expense						de of Texas. Com	
							Consulting ex		officeholder living	Jexpense
								~hG	130	
	0					1.5				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	gnt			Office he	eia
		-								

			EXPENDITURE CATEGO						
	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	ayme erhea pense xpens Xpens Vages	nt/Reimbursement d/Rental Expense e se s/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2					3	Filer ID	(Ethics Commission Filers)
1	Sch: 24/44 Rpt:	-	Hunter, Todd A. (The Honorable)				ľ	00020493	
4	Date	5	Payee name						
	11/02/2023		Murphy Nasica						
6	Amount (\$)	7	Payee address; City; State	; Zip Co	ode				
	\$4,000.00		815 - S Brazos St						
			Ste 304						
			Austin, TX 78701						
					—				
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description			
	EXPENDITURE		Consulting Expense					de of Texas. Com officeholder living	plete Schedule T.
						Consulting ex		-	j expense
						Consulting e	vhe	1130	
_				<u></u>				0111	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ight			Office he	eld
	Date		Payee name						
	07/20/2023		Nueces County Republican Party						
	Amount (\$)		Payee address; City; State	; Zip Co	ode				
	\$15,000.00		PO Box 18016	, 1					
	\$10,000.00								
			Corpus Christi, TX 78480-8016						
	PURPOSE	(a)	Category (See Categories listed at the top of this scl	nedule)	(b)	Description			
	OF EXPENDITURE		Contributions/Donations Made By						plete Schedule T.
			Candidate/Officeholder/Political Comm	nittee				officeholder living	j expense
						Political cont	ribu	ition	
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ight			Office he	eld
	expenditure to benefit C/OI	H							
	Date		Payee name						
	08/17/2023		Nueces County Republican Women P	AC					
_	Amount (\$)		Payee address; City; State	; Zip Co	nde				
	\$40.00		P.O. Box 270054	, <u>Lip</u> 00	Juo				
	ψ+0.00		1.0. 00x 270004						
			Corpus Christi, TX 78427		-				
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description			
	OF EXPENDITURE		Food/Beverage Expense						plete Schedule T.
								officeholder living	j expense
						Meeting expe	ris	e	
	Complete <u>ONLY</u> if direct		Candidate/Officeholder name	Office sou	ight			Office he	eld
	expenditure to benefit C/OI	1							

			EXPENDITURE CATEGO	RIES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 25/44 Rpt:		Hunter, Todd A. (The Honorable)				00020493
4	Date	5	Payee name				
	10/13/2023		Nueces County Republican Women PA	AC			
6	Amount (\$)	7	Payee address; City; State;	; Zip Co	le		
	\$20.00		P.O. Box 270054				
			Corpus Christi, TX 78427				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	odulo)	(b) Description		
-	OF		Food/Beverage Expense	ieuuie)		outs	ide of Texas. Complete Schedule T.
	EXPENDITURE				Check if Austir	I, TX	a, officeholder living expense
					Meeting expe	ens	se
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office sou	Iht		Office held
	Date		Payee name				
	10/13/2023		Nueces County Sheriff Officers Associ	ation			
	Amount (\$)		Payee address; City; State;	; Zip Co	le		
	\$500.00		PO Box 704	, <u>_</u> .p ee			
	\$300.00						
			Corpus Chriti, TX 78403				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description		
	EXPENDITURE		Contributions/Donations Made By				ide of Texas. Complete Schedule T. 3. officeholder living expense
			Candidate/Officeholder/Political Comm	nittee			
					Folitical Con	lind	
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ubt		Office held
	expenditure to benefit C/OI				jiit		Once neid
	Data	-					
	Date		Payee name				
	10/13/2023		Office Depot				
	Amount (\$)			; Zip Co	le		
	\$16.90		Office Depot				
			201 Springtown Way				
			San Marcos, TX 78666				
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description		
	OF		Office Overhead/Rental Expense	icuaic)		outs	ide of Texas. Complete Schedule T.
	EXPENDITURE				Check if Austir	I, TX	, officeholder living expense
					Office suppli	es	
	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	Jht		Office held
	expenditure to benefit C/OI	Η					

EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Coi	nmittee	Event Expense Fees Food/Beverage Expen Gift/Awards/Memorials Legal Services The Instruction G	se Expense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	yment rhead/ bense pense ages/C	/Reimbursement Rental Expense Contract Labor		Transportation E Travel in District Travel Out of Di		
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission I	Filers)
	Sch: 26/44 Rpt:		Hunter, To	dd A. (The Hond	orable)					00020493		
4	Date	5	Payee name	2								
	09/14/2023		,	ms Consulting								
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de					
	\$1,000.00			dridge, Apt, 10d	·							
		Corpus Christi, TX 78414										
8	PURPOSE	(a)	Category (s	See Categories listed at t	the top of this sch	nedule)	(b) [Description				
	OF EXPENDITURE		Consulting				Į				nplete Schedule T.	
							L	Consulting ex		officeholder livin	g expense	
							,		vhe	1130		
٩	Complete ONLY if direct		Candidate/Of	ficeholder name		Office soug	thr			Office h	eld	
,	expenditure to benefit C/O		candidate/On				JIIC			Office II		
	Date		Payee name	9								
	10/13/2023		Orlando Si	ms Consulting								
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	de					
	\$1,000.00		5757 Wool	dridge Apt 10 d								
			Corpus Ch	risti, TX 78414								
	PURPOSE OF	(a)	Category (S	See Categories listed at t	the top of this sch	nedule)	(b) [Description				
	EXPENDITURE		Consulting	Expense			Ļ			de of Texas. Con officeholder livin	nplete Schedule T.	
							L	Consulting ex			y expense	
									-1			
	Complete ONLY if direct		Candidate/Of	ficeholder name	(Office soud	aht			Office h	eld	
	expenditure to benefit C/OI	Н										
-	Date		Payee name	à								
	10/13/2023		Otherside I									
	Amount (\$)	-	Payee addre		State	; Zip Co	he					
	\$70.03		1104 W. 34	-	Otato	, <u></u> p ee.						
	+											
			Austin, TX	78705								
	PURPOSE	(a)	Category (s	See Categories listed at t	the top of this sch	nedule)	(b) [Description				
	OF EXPENDITURE		Food/Beve	rage Expense			Į				nplete Schedule T.	
							Ļ			officeholder livin	g expense	
							I	Meeting expe	:15	C		
	Complete ONLY if direct	Ļ	Candidato/Of	ficeholder name		Office soug	thr			Office h	old	
	expenditure to benefit C/OI			neenoluer name	(2006 2006	JIIL			Onice II		

	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 Equipment a Food/Beverage Expense Polling Expense Travel in District y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District						
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 27/44 Rpt:		Hunter, Todd A. (The Honorable)					00020493
4	Date	5	Payee name					
	09/22/2023		Padre Island Business Association					
6	Amount (\$)	7	Payee address; City; S	State; Zip Co	ode			
	\$2,000.00		4493 SPID, Ste A PMB 313					
			Corpus Christi, TX 78418					
8	PURPOSE	(a)	Category (See Categories listed at the top of th	is schedule)	(b)	Description		
	OF	Ľ	Event Expense	iis schedule)	Ľ		outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE					Check if Austin	, TX,	, officeholder living expense
						Event sponse	orsł	nip
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	07/31/2023		Piryx, Inc					
_	Amount (\$)		Payee address; City; S	State; Zip Co	ode			
	\$924.38		401 West 15th Street , Suite 520					
	\$0Z4.00							
			Austin, TX 78701					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of the Online processing fee	is schedule)	(b)			ide of Texas. Complete Schedule T. , officeholder living expense
						Online proces		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	l ught			Office held
-	Date		Payee name					
	08/31/2023		Piryx, Inc					
	Amount (\$)		-	State; Zip Co	odo			
	\$437.75		401 West 15th Street , Suite 520	nale, zip ci	Jue			
	ψ437.73		401 West 15th Street, Suite 520					
			Austin, TX 78701					
	PURPOSE OF	(a)	Category (See Categories listed at the top of th	is schedule)	(b)	Description		
	EXPENDITURE		Fees					ide of Texas. Complete Schedule T.
								, officeholder living expense
					1	Online proce	اادد	19 ICC
	Complete ONUM Station	L		0#:	 			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ugnt			Office held

			EXPENDITURE CA	ATEGORIES	FOR E	3OX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							quipment & Related Expense	
1	Total pages Schedule F1:	2 FI	LER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 28/44 Rpt:	н	unter, Todd A. (The Honorable	e)				00020493	
4	Date	5 Pá	ayee name						
	09/29/2023		ryx, Inc						
6	Amount (\$)	7 Pá	ayee address; City;	State; Zip	Code	9			
	\$25.51)1 West 15th Street , Suite 52	0					
			ustin, TX 78701						
8	PURPOSE OF		ategory (See Categories listed at the top	of this schedule)	(k	Description			
	EXPENDITURE	F	ees					ide of Texas. Comp , officeholder living	
						Online proce		-	o,pense
						,		5	
9	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	Office	sough	t		Office he	ld
	Date	Pa	ayee name						
	10/31/2023	Pi	ryx, Inc						
	Amount (\$)	Pa	ayee address; City;	State; Zip	Code)			
	\$507.88	40	01 West 15th Street , Suite 52	0					
		A	ustin, TX 78701						
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the top	of this schedule)	(k		n, TX,	ide of Texas. Comp , officeholder living ng fee	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	Office	sough	t		Office he	ld
_	Date	D	2000 00000						
	11/30/2023		ayee name ryx, Inc						
			-	Stata: Zin	Code				
	Amount (\$) \$74.38		ayee address; City;)1 West 15th Street , Suite 52	State; Zip ∩	COUE	;			
	φ14.30	40	JI WEST ISTI STEET, Suite SZ	0					
			ustin, TX 78701						
	PURPOSE OF		Ategory (See Categories listed at the top	of this schedule)	(t	Description Check if travel	Olitei	ide of Texas. Comp	blete Schedule T
	EXPENDITURE	- E	ees					, officeholder living	
						Online proce			
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	Office	sough	t		Office he	ld

			EXPENDITURE (CATEGORIE	S 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 Exp ee Legal Services The Instruction Guide	Of Po Po Pr Sa	ffice Overh olling Expe rinting Exp 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 Schedule F1:	2 FIL	ER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 29/44 Rpt:		nter, Todd A. (The Honorat	ole)				00020493		
4	Date 12/29/2023	-	vee name yx, Inc							
_										
6	Amount (\$) \$99.77	7 Payee address; City; State; Zip Code 401 West 15th Street , Suite 520 Austin, TX 78701								
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online processing fee								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholder name	Offic	ce sougl	nt		Office held		
	Date	Pay	vee name							
	07/27/2023	Po	rt Aransas Chamber Found	ation						
	Amount (\$) \$500.00	403	vee address; City; 3 W. Cotter Ave rt Arnasas, TX 78373	State; Z	Zip Cod	e				
	PURPOSE OF EXPENDITURE		egory (See Categories listed at the to ent Expense	op of this schedul	le) (n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense hip		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholder name	Offic	ce soug	nt		Office held		
	Date	Pay	vee name							
	11/02/2023	Po	rt Aransas Chamber of Con	nmerce						
	Amount (\$) \$1,000.00		vee address; City; 3 W. Cotter	State; Z	Zip Cod	9				
		Po	rt Aransas, TX 78373							
	PURPOSE OF EXPENDITURE		egory (See Categories listed at the to ent Expense	pp of this schedul	le) (n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense hip		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholder name	Offic	ce soug	nt		Office held		

			EXPENDITURE CATEG	ORIES FO	DR B	OX 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 explai	Office O Polling E Printing Salaries	Expension Expension Experior Wage	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 F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 30/44 Rpt:		Hunter, Todd A. (The Honorable)					00020493
4	Date	5	Payee name					
	07/21/2023		Rockport Fulton Chamber of Comme	erce				
6	Amount (\$)	7	Payee address; City; Sta	te; Zip C	ode			
	\$300.00		319 Broadway St					
			Rockport, TX 78382					
8	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description		
	OF		Event Expense	schedule)			outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE		·			Check if Austin	, TX,	, officeholder living expense
						Event sponse	orsł	hip
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ought			Office held
	Date		Payee name					
	08/17/2023		Rockport Fulton Chamber of Comme	erce				
⊢	Amount (\$)		Payee address; City; Sta	te; Zip C	code			
	\$300.00		319 Broadway St					
			, ,					
			Rockport, TX 78382		_			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description	outoi	ide of Texas. Complete Schedule T.
	EXPENDITURE		Event Expense					, officeholder living expense
						Event sponse		
								•
⊢	Complete ONLY if direct		Candidate/Officeholder name	Office so	ught			Office held
	expenditure to benefit C/OI	H			U			
	Date		Payee name					
	10/09/2023		Rockport Fulton Chamber of Comme	erce				
	Amount (\$)		Payee address; City; Sta	te; Zip C	code			
	\$1,000.00		319 Broadway St					
			Rockport, TX 78382					
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description		
	OF EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.
						Event sponse		, officeholder living expense
							5131	h
	Complete ONLY if direct	Ľ	Candidate/Officeholder name	Office so				Office held
	expenditure to benefit C/OI			Unice St	uyn			Onice neid
I								

			EXPENDITURE CATEGOR	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)	
	Sch: 31/44 Rpt:		Hunter, Todd A. (The Honorable)				00020493	
4	Date 10/27/2023		Payee name Rockport Fulton ISD Education Founda	ation				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le			
-	\$1,500.00		PO Box 195	F				
			Rockport, TX 78381					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name C	Office sou	ht		Office held	
	Date		Payee name					
	10/04/2023		Rockport Fulton Young Professionals					
	Amount (\$)		Payee address; City; State;	Zip Co	le			
	\$200.00		319 Broadway St Rockport, TX 78382					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Event Expense	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense hip	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ht		Office held	
	Date		Payee name					
	08/04/2023		Rockport Pilot					
	Amount (\$)		Payee address; City; State;	Zip Co	le			
	\$2,197.00		P.O. Box 730					
			Rockport, TX 78381-0730					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Advertising Expense	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense ENSE	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name C	Dffice sou	ht		Office held	

			EXPENDITURE	CATEGOR	RIES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex mittee Legal Services The Instruction Guid		Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 32/44 Rpt:		Hunter, Todd A. (The Honoral	ble)				00020493
4	Date	5	Payee name					
	07/21/2023		Romeros, Christianna					
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le		
	\$200.00		429 Naples					
			Corpus Christi, TX 78401					
_	DUDDOCE		-		i			
8	PURPOSE OF		Category (See Categories listed at the t		edule)	(b) Description	outei	de of Texas. Complete Schedule T.
	EXPENDITURE		Salaries/Wages/Contract Lab	or				officeholder living expense
						Contract Lab		
							-	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	С	Dffice soug	ht		Office held
	Date		Payee name					
	08/17/2023		Romeros, Christianna					
	Amount (\$)		Payee address; City;	State:	Zip Co	10		
	\$100.00			State,	, zip cot			
	\$100.00		429 Naples					
			Corpus Christi, TX 78401					
	PURPOSE OF		Category (See Categories listed at the t		edule)	(b) Description		
	EXPENDITURE		Salaries/Wages/Contract Lab	or				de of Texas. Complete Schedule T. , officeholder living expense
						Contract Lab		
						Contract Lab	01	
			andidata/Office helder respect			h4		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	Int		Office held
	Date		Payee name					
	09/14/2023		Romeros, Christianna					
	Amount (\$)		Payee address; City;	State;	; Zip Coo	le		
	\$100.00		429 Naples					
			Corpus Christi, TX 78401					
	PURPOSE	(a)	Category (See Categories listed at the t	on of this sch	edule)	(b) Description		
	OF		Salaries/Wages/Contract Lab				outsi	de of Texas. Complete Schedule T.
	EXPENDITURE					Check if Austin	, TX,	officeholder living expense
						Contract Lab	or	
	Complete ONLY if direct		andidate/Officeholder name	C	Office sou	ht		Office held
	expenditure to benefit C/OF	Н						

			EXPENDITURE C	ATEGOR	RIES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expo mittee Legal Services The Instruction Guide		Office Over Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 33/44 Rpt:		Hunter, Todd A. (The Honorab	le)				00020493
4	Date	5	Payee name					
	10/23/2023		Romeros, Christianna					
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	de		
	\$200.00		429 Naples					
			Corpus Christi, TX 78401					
8	PURPOSE	(a)	Category (See Categories listed at the to	p of this sche	edule)	(b) Description		
	OF EXPENDITURE		Salaries/Wages/Contract Labo	r				ide of Texas. Complete Schedule T.
						Contract Lab		, officeholder living expense
						Contract Lat	101	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		andidate/Officeholder name	C)ffice sou	ght		Office held
	Date		Payee name					
	10/13/2023		Romeros, Christianna					
	Amount (\$)		Payee address; City;	State;	Zip Co	de		
	\$260.86		429 Naples					
			Corpus Christi, TX 78401					
	PURPOSE OF		Category (See Categories listed at the to		edule)	(b) Description		
	EXPENDITURE		Salaries/Wages/Contract Labo	r				ide of Texas. Complete Schedule T. , officeholder living expense
						Contract Lab		
							-	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held
		_						
	Date		Payee name					
	08/04/2023		Rotary Club of Corpus Christi					
	Amount (\$)		Payee address; City;	State;	Zip Co	de		
	\$500.00		921 N. Chaparral, Ste. 210					
			Corpus Christi, TX 78401					
	PURPOSE	(a)	Category (See Categories listed at the to	p of this sche	edule)	(b) Description		
	OF EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.
								, officeholder living expense
						Event spons	UISI	nih
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		andidate/Officeholder name	C	Office sou	ght		Office held

		EXPENDITURE CATEGO	RIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nittee Legal Services The Instruction Guide explains	Loan Repayment/Reimburse Office Overhead/Rental Expe Polling Expense Printing Expense Salaries/Wages/Contract Lat 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: 34/44 Rpt:	Hunter, Todd A. (The Honorable)		00020493			
4	Date 10/13/2023	Payee name Sam's Club					
6 Amount (\$) \$247.98 7 Payee address; City; State; Zip Code 4833 SPID Corpus Christi, TX 78411							
8	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sc Office Overhead/Rental Expense	Check i	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name	Office sought	Office held			
	Date	Payee name					
	09/14/2023	San Patricio County Republican Wom	en				
	Amount (\$) \$50.00	P.O. Box 1222	; Zip Code				
	PURPOSE OF EXPENDITURE	Portland, TX 78374-1222 Category (See Categories listed at the top of this sc Food/Beverage Expense	Check i	on travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name	Office sought	Office held			
	Date	Payee name					
	07/18/2023	South Jetty					
	Amount (\$) \$514.08	Payee address; City; State P.O. Box 1117	; Zip Code				
		Port Aransas, TX 78373					
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sc Advertising Expense	Check i	on travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense ing expense			
	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	/ - al Cor	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 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 Filers)			
	Sch: 35/44 Rpt:		Hunter, Todd A. (The Honorable)				00020493			
4	Date 07/27/2023	5	Payee name South Jetty							
6	Amount (\$)	7	,	; Zip Co						
ľ	\$31.00	ľ	P.O. Box 1117	, zip co						
	ψ01.00		1.0.0001117							
			Port Aransas, TX 78373							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description					
	OF EXPENDITURE		Subscription				de of Texas. Complete Schedule T.			
					Subscription	, IX,	officeholder living expense			
					Subscription					
_	Complete ONLY if direct		Candidate/Officeholder name	Office cour	~h+		Office held			
9	expenditure to benefit C/OI		andidate/Onicendider name	Office sou	JIIL		Onice held			
	Date		Payee name							
	08/04/2023		South Jetty							
-	Amount (\$)	-	,	; Zip Co	de					
	\$228.48		P.O. Box 1117	, בוף כס						
	φ220.40									
			Port Aransas, TX 78373							
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description					
	OF EXPENDITURE		Advertising Expense				de of Texas. Complete Schedule T.			
					Advertising e		officeholder living expense			
					Auventising e	vhe				
			Candidate/Officeholder name							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Landidate/Officenoider name	Office sou	jni		Office held			
		_								
	Date		Payee name							
	09/16/2023		South Jetty							
	Amount (\$)			; Zip Co	de					
	\$560.60		P.O. Box 1117							
			Port Aransas, TX 78373							
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description					
	OF		Advertising Expense	,	Check if travel	outsi	de of Texas. Complete Schedule T.			
	EXPENDITURE						officeholder living expense			
					Advertising e	хре	ense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ght		Office held			
		1								

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expe Innittee Legal Services The Instruction Guide		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2					2	Filer ID (Ethics Commission Filers)
1	Sch: 36/44 Rpt:	2	Hunter, Todd A. (The Honorabl	e)			3	00020493
4	Date	5	Payee name					
	10/13/2023		South Jetty					
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	de		
	\$228.48		P.O. Box 1117					
			Port Aransas, TX 78373					
8	PURPOSE	(a)				(b) Description		
ľ	OF	(a)	Category (See Categories listed at the top Advertising Expense	o of this sch	edule)		outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE							, officeholder living expense
						Advertising e	хре	ense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held
	Date		Payee name					
	07/05/2023		South Texas Alliance of Repub	licans				
	Amount (\$)		Payee address; City;	State:	; Zip Co	de		
	\$1,100.00		P.O. Box 61012					
	+_,							
			Corpus Christi, TX 78466					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Event Expense	o of this sch	iedule)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense hip
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	ght		Office held
-	Date		Payee name					
	07/20/2023		South Texas Alliance of Repub	licans				
-	Amount (\$)		Payee address; City;		; Zip Co	10		
	\$500.00		P.O. Box 61012	State,	, zip co			
	\$000.00		1.0. Dox 01012					
			Corpus Christi, TX 78466					
	PURPOSE OF	(a)	Category (See Categories listed at the top Event Expense	o of this sch	edule)	(b) Description	outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE		Event Expense				, тх,	, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice 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		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/V	erhead pense xpens Vages	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	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 37/44 Rpt:		Hunter, Todd A. (The Honorable)					00020493		
4	Date	5	Payee name							
	08/04/2023		South Texas Alliance of Republicans							
6	Amount (\$)	7	Payee address; City; State; Zip Code							
	\$300.00		4934 High Meadow Dr							
			Corpus Christi, TX 78413							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sc	hodulo)	(b)	Description				
-	OF		Event Expense	neuule)			outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE					Check if Austin	, TX,	, officeholder living expense		
						Event sponso	orsł	hip		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held		
	Date		Payee name							
	09/05/2023		South Texas Alliance of Republicans							
	Amount (\$)		Payee address; City; State	; Zip Co	de					
	\$1,000.00		4934 High Meadow Dr	.,						
	41,000,000									
			Corpus Christi, TX 78413							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sc	hedule)	(b)	Description				
	EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T. , officeholder living expense		
						Event sponso				
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	aht			Office held		
	expenditure to benefit C/OI			0	.g					
_	Date		Payee name							
	09/22/2023		South Texas Alliance of Republicans							
	Amount (\$)		Payee address; City; State	; Zip Co	ode					
	\$500.00		4934 High Meadow Dr	, <u>_</u> p ee						
	\$000100									
			Corpus Christi, TX 78413							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sc	hedule)	(b)	Description				
	EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.		
	-							, officeholder living expense		
						Event sponso	וכונ	чін Чіп		
				0#1						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ignt			Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 38/44 Rpt:	Hunter, Todd A. (The Honorable)	00020493						
4	Date	Payee name							
	10/23/2023	South Texas Alliance of Republicans							
6	Amount (\$) \$300.00	Payee address; City; State; Zip Code 4934 High Meadow Dr Fight Meadow Dr Fight Meadow Dr							
		Corpus Christi, TX 78413							
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Event Expense	outside of Texas. Complete Schedule T.						
			TX, officeholder living expense						
		Event sponso	isnip						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	10/01/2023	South Texas Botanical Gardens & Nature Center							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$2,000.00	8545 S. Staples							
		Corpus Christi, TX 78412							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense rShip						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/17/2023	Sugar Bakers							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$48.72	2766 Santa Fe							
		Corpus Christi, TX 78404							
	PURPOSE OF EXPENDITURE	DF Ecod/Beverage Expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Ov Polling Ex Printing E Salaries/	verhea xpens Expens Wage:	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	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 39/44 Rpt:		Hunter, Todd A. (The Honorable)					00020493
4	Date	5	Payee name					
	09/14/2023		Sugar Bakers					
6	Amount (\$)	7	Payee address; City; Sta	te; Zip Co	ode			
	\$38.63		2766 Santa Fe					
			Corpus Christi, TX 78404					
8	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description		
	OF EXPENDITURE		Food/Beverage Expense					de of Texas. Complete Schedule T.
								officeholder living expense
						Meeting expe	ens	e
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	08/11/2023		Texans for Greg Abbott					
	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode			
	\$1,000.00		P.O. 308					
	¢1,000.00		1.0.000					
			Austin, TX 78767					
	PURPOSE	(a)	Category (See Categories listed at the top of this s	schedule)	(b)	Description		
	OF EXPENDITURE		Contributions/Donations Made By	•				de of Texas. Complete Schedule T.
			Candidate/Officeholder/Political Com	imittee		Political Cont		officeholder living expense
						Political Com	וטנ	ution
	-			- <i>m</i>				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	09/21/2023		Texans for Greg Abbott					
	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode			
	\$1,500.00		P.O. 308					
			Austin, TX 78767					
	PURPOSE	(a)	Category (See Categories listed at the top of this s	schedule)	(b)	Description		
	OF EXPENDITURE		Contributions/Donations Made By					de of Texas. Complete Schedule T.
			Candidate/Officeholder/Political Com	imittee				officeholder living expense
						Political Cont	ומו	
					L			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held
	Superioration to benefit 0/01	•						

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp	oense	Loan Repa Office Ove Polling Ex Printing Ex Salaries/W	yment/Rein rhead/Renta iense pense ages/Contra	nbursement al Expense act Labor		Transportation E Travel in District Travel Out of Dis		
	Total pages Schedule F1:	2						3	Filer ID	(Ethics Commission Filers	3)
Ľ	Sch: 40/44 Rpt:	[Hunter, Todd A. (The Honorat	(مار				Ŭ	00020493		,
	· .			jie)					00020493		
4	Date	5	Payee name								
	08/15/2023		Texas Federation of Republica	an Wome	en						
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	de					
	\$1,500.00		515 Capital of Texas Hwy								
	·		Suite 133								
			Austin, TX 78746								
8	PURPOSE	(a)	Category (See Categories listed at the to	op of this sch	edule)	(b) Des	cription				
	OF EXPENDITURE		Event Expense							nplete Schedule T.	
									officeholder living	g expense	
						Eve	nt sponso	orsr	np		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	(Office sou	ght			Office h	eld	
	Date		Payee name								
	08/04/2023		Texas Young Republicans Fe	deration							
⊢	Amount (\$)		Payee address; City;		; Zip Co	de					
	.,		PO Box 2206	State	, zip co	ue					
	\$1,000.00		PO B0x 2200								
			Austin, TX 78768								
	PURPOSE OF	(a)	Category (See Categories listed at the to	op of this sch	edule)	(b) Des	•				
	EXPENDITURE		Event Expense						officeholder living	nplete Schedule T.	
							nt sponso			gexpense	
						LVC	nt sponse	151	пÞ		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	Office sou	gnt			Office h	eid	
[Date		Payee name								
	07/27/2023		The Pirate Club								
	Amount (\$)		Payee address; City;	State	; Zip Co	de					
	\$500.00		PO Box 907		· •						
	+000.00										
			Rockport, TX 78381-0907								
⊢	PURPOSE	(a)	Category (See Categories listed at the to	on of this	odule)	(b) Des	cription				
	OF	`` `	Event Expense	אר טי גע scu	ieuuie)			outsi	de of Texas. Com	nplete Schedule T.	
	EXPENDITURE		Event Expense						officeholder living		
Í							nt sponso				
							-				
-	Complete ONLY if direct	L	Candidate/Officeholder name	(Office sou	nht			Office h	eld	
	expenditure to benefit C/OI				2	j. it			Childe Hi		

	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	2	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 41/44 Rpt:		Hunter, Todd A. (The Honorable)					00020493
4	Date	5	Payee name					
	08/09/2023		Tuloso-Midway Educational Foun	dation	l			
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le		
	\$300.00		9760 LaBranch					
			Corpus Christi, TX 78410					
8	PURPOSE	(2)	-			(b) Description		
ľ	OF	(a)	Category (See Categories listed at the top of Event Expense	this scheo	dule)	(b) Description Check if travel	outs	ide of Texas. Complete Schedule T.
	EXPENDITURE							, officeholder living expense
						Event spons	ors	hip
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Of	ffice sou	ht		Office held
⊨	Date		Payee name					
	08/17/2023		United Chamber of Commerce					
_				Chata	7:0 00			
	Amount (\$)			State;	Zip Co	le		
	\$60.00		602 N Staples, Ste 150					
			Corpus Christi, TX 78401					
	PURPOSE	(a)	Category (See Categories listed at the top of	this scheo	dule)	(b) Description		
	OF EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.
								, officeholder living expense
						Event spons	ors	nip
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Of	ffice sou	ht		Office held
	Date		Payee name					
	07/17/2023		V Fit Productions					
	Amount (\$)		Payee address; City;	State;	Zip Co	le		
	\$3,100.00		750 Everhart					
			Corpus Christi, TX 78411					
	PURPOSE	(a)	Category (See Categories listed at the top of	this scheo	dule)	(b) Description		
	OF EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.
								, officeholder living expense
						Event spons	ors	nıp
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Of	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		-	als Expense	Office Ove Polling Exp Printing Exp Salaries/W			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: 42/44 Rpt:		Hunter, Todd A. (The Hor	iorable)				00020493
4	Date 10/04/2023		Payee name V Fit Productions					
6	Amount (\$) \$500.00		Payee address; City; 750 Everhart Corpus Christi, TX 78411	State;	Zip Co	de		
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship 					, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	С	Office sou	ght		Office held
	Date		Payee name					
	10/18/2023		V Fit Productions					
	Amount (\$) \$1,670.00		Payee address; City; 750 Everhart	State;	; Zip Co	de		
	DUDDOCE	<u> </u>	Corpus Christi, TX 78411					
	PURPOSE OF EXPENDITURE		Category (See Categories listed a Event Expense	t the top of this sch	edule)		n, TX,	ide of Texas. Complete Schedule T. K, officeholder living expense hip
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	С	Office sou	ght		Office held
	Date		Payee name					
	10/26/2023		VFW Auxilliary 8967					
	Amount (\$) \$338.00		Payee address; City; PO Box 244	State;	Zip Co	de		
			Port Aransas, TX 78373					
	PURPOSE OF EXPENDITURE		Category (See Categories listed a Event Expense	t the top of this sch	edule)		n, TX,	ide of Texas. Complete Schedule T. K, officeholder living expense hip
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	С	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	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing 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:	FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 43/44 Rpt:	Hunter, Todd A. (The Honorable)	00020493			
4	Date	Payee name				
	10/30/2023	VFW Post 3904				
6	Amount (\$)	Payee address; City; State; Zip Code				
	\$300.00	916 HWY 35 S				
		Rockport, TX 78382				
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description				
-	OF		outside of Texas. Complete Schedule T.			
	EXPENDITURE	Candidate/Officeholder/Political Committee	n, TX, officeholder living expense			
		Contribution				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	08/04/2023	Veterans Memorial Football Booster Club				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$500.00	3750 Cimarron Blvd,				
		······································				
		Corpus Christi, TX 78414				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense OrShip			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	08/14/2023	World Affairs Council of South Texas				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$500.00	4409 Sue Circle				
	·					
		Corpus Christi, TX 78410				
	PURPOSE OF	Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense orship			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Fees C Food/Beverage Expense F Gift/Awards/Memorials Expense F	oan Repayment/Reimbursement Office Overhead/Rental Expense Yolling Expense Printing Expense Galaries/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: 44/44 Rpt:	Hunter, Todd A. (The Honorable)		00020493		
· ·			00020433		
4 Date 09/22/2023	5 Payee name World Affairs Council of South Texas				
6 Amount (\$) \$500.00	 Payee address; City; State; 4409 Sue Circle Corpus Christi, TX 78410 	Zip Code			
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship 				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ice sought	Office held		
Date	Payee name				
09/29/2023	Young Business Professionals of the Co	astal Bend			
Amount (\$)	-	Zip Code			
\$1,000.00	P.O. Box 462 Corpus Christi, TX 78403				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedu Event Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense D rShip		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ice sought	Office held		

POLITICAL EX	PENDITURES FROM PERSON	IAL FUNDS	SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	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 G: Sch: 1/45 Rpt: 103/149	2 FILER NAME Hunter, Todd A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020493			
4 Date 11/15/2023	5 Payee name ATT Teleconference Service					
6 Amount (\$) \$15.15 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 5002					
8 PURPOSE OF EXPENDITURE	Carol Stream, IL 60197-5002 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			
Date	Payee name					
11/27/2023	Access Storage					
Amount (\$) \$170.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 8041 S. Padre Island Dr. Ste A	ode				
PURPOSE OF EXPENDITURE	Corpus Christi, TX 78412 Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought	Office held			
Date 12/28/2023	Payee name Access Storage					
Amount (\$) \$170.00	Payee address; City; State; Zip C 8041 S. Padre Island Dr. Ste A	ode				
X Reimbursement from political contributions intended	Corpus Christi, TX 78412					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	expenditure to benefit					

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made I Candidate/Officeholder/Politie Credit Card Payment	Fees Office O Food/Beverage Expense Polling E By - Gift/Awards/Memorials Expense Printing f	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)					
1 Total pages Schedule G: Sch: 2/45 Rpt: 104/149	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493					
4 Date 12/02/2023	5 Payee name American Legion Post 0229						
6 Amount (\$) \$2,500.00 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 13526 Peseta Corpus Christi, TX 78418						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held					
Date 10/25/2023	Payee name AthleteGuild						
Amount (\$) \$54.35 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 103 Gattuso Rd, Unit 25 New Braunfels, TX 78132	ode					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held					
Date 11/20/2023	Payee name AthleteGuild						
Amount (\$) \$33.13	Payee address; City; State; Zip C 103 Gattuso Rd, Unit 25	ode					
X Reimbursement from political contributions intended	New Braunfels, TX 78132						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T.					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	expenditure to benefit						

POLITICAL EX	(PENDITURES FROM PERSON	AL FUNDS SCHEDULE G				
	EXPENDITURE CATEGORIES FO	R BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Rep Fees Office Ow Food/Beverage Expense Polling Ex y - Gift/Awards/Memorials Expense Printing E	ayment/Reimbursement Solicitation/Fundraising Expense erhead/Rental Expense Transportation Equipment & Related Expense spense Travel in District xpes/Contract Labor OTHER (enter a category not listed above)				
1 Total pages Schedule G: Sch: 3/45 Rpt: 105/149	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493				
4 Date	5 Payee name					
11/02/2023	AthleteGuild					
6 Amount (\$) \$22.75	Payee address; City; State; Zip Code 103 Gattuso Rd, Unit 25					
X Reimbursement from political contributions intended	New Braunfels, TX 78132					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
Date	Payee name					
12/08/2023	AthleteGuild					
Amount (\$) \$33.13	Payee address; City; State; Zip Co 103 Gattuso Rd, Unit 25	bde				
X Reimbursement from political contributions intended	New Braunfels, TX 78132					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
Date	Payee name					
11/02/2023	Avis Rental Car					
Amount (\$) \$1,073.35	Payee address; City; State; Zip Co 6 Sylvan Way	ode				
X Reimbursement from political contributions intended	Parsippany, NJ 07054					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description Check if travel outside of Texas. Complete Schedule T.				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Ex y - Gift/Awards/Memorials 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 G: Sch: 4/45 Rpt: 106/149	2 FILER NAME Hunter, Todd A. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020493			
4 Date 11/20/2023	5 Payee name Avis Rental Car					
6 Amount (\$) \$437.48 X Reimbursement from political contributions intended	 7 Payee address; City; State; Zip Code 6 Sylvan Way Parsippany, NJ 07054 					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			
Date 12/22/2023	Payee name Avis Rental Car					
Amount (\$) \$1,482.04 X Reimbursement from political contributions intended		6 Sylvan Way				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			
Date 12/18/2023	Payee name Bell Holloway, Ginny					
Amount (\$) \$3,000.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code D Capitol Building Ext 52.108 Austin, TX 78768					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH						

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y Gift/Awards/Memorials Expense Printing I	payment/Reinbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District			
 Total pages Schedule G: Sch: 5/45 Rpt: 107/149 	The Instruction Guide explains how to c 2 FILER NAME Hunter, Todd A. (The Honorable)	omplete this form. 3 Filer ID (Ethics Commission Filers) 00020493			
4 Date 09/11/2023	5 Payee name Black Baldy Investments, LLC	00020433			
6 Amount (\$) \$500.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip C 4161 Hwy 35 N, Unit 1 Rockport, TX 78382	ode			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Rockport office rent expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date	Payee name				
11/10/2023	Black Baldy Investments, LLC				
Amount (\$) \$1,050.00		ode			
PURPOSE OF EXPENDITURE	Rockport, TX 78382 Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Rockport office rental expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought Office held			
Date 10/18/2023	Payee name Blossom Shop				
Amount (\$) \$286.75	Payee address; City; State; Zip C 5417 South Staples	ode			
X Reimbursement from political contributions intended	Corpus Christi, TX 78411	·			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Flowers for constituents.			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			

POLITICAL EX	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Ex By - Gift/Awards/Memorials Expense Printing E	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)				
1 Total pages Schedule G: Sch: 6/45 Rpt: 108/149	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493				
4 Date 12/16/2023	5 Payee name CVS Pharmacy					
6 Amount (\$) \$25.94 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 4801 S. Alameda					
8 PURPOSE OF EXPENDITURE	Corpus Christi, TX 78412 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
Date	Payee name					
12/16/2023	CVS Pharmacy					
Amount (\$) \$116.86	Payee address; City; State; Zip Co	ode				
X Reimbursement from political contributions intended	Corpus Christi, TX 78412					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
Date 12/19/2023	Payee name Capitol Extension					
Amount (\$) \$16.24	Payee address;City;State;Zip Co1400 Congress Ave E1.006	ode				
X Reimbursement from political contributions intended	Austin, TX 78701					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
	EXPENDITURE CATEGORIES FO	R BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Event Expense Loan Rej Fees Office Ov Food/Beverage Expense Polling E Y - Glfd/Awards/Memorials Expense Printing F	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)	
1 Total pages Schedule G: Sch: 7/45 Rpt: 109/149	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493	
4 Date 08/23/2023	5 Payee name Carlson, Jessie		
6 Amount (\$) \$500.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 614 Bel Air Dr		
8 PURPOSE OF EXPENDITURE	Corpus Christi, TX 78418 (a) Category (See Categories listed at the top of this schedule) Media expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Media expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date	Payee name		
11/10/2023	Carlson, Jessie		
Amount (\$) \$500.00	Payee address; City; State; Zip Code		
Reimbursement from political contributions intended	Corpus Christi, TX 78418		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Media expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Media expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date	Payee name		
11/16/2023	Carranza, Vicente (Mr.)		
Amount (\$) \$400.00	Payee address; City; State; Zip Code 3690 Jack Ave		
X Reimbursement from political contributions intended	Robstown, TX 78380		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	

POL	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Accounti Consultir Contribut Candi	ng Expense ng/Banking Ig Expense tions/ Donations Made B date/Officeholder/Politica ard Payment	Fees Office Ov Food/Beverage Expense Polling Ex y - Gift/Awards/Memorials Expense Printing E	bayment/Reimbursement Solicitation/Fundraising Expense erhead/Rental Expense Transportation Equipment & Related Expense kpense Travel in District xpense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)	
	ges Schedule G: 45 Rpt: 110/149	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493	
4 Date 11/16/2	2023	5 Payee name Christmas On the Beach		
X polit	(\$) \$500.00 nbursement from ical contributions ided	7 Payee address; City; State; Zip Code 1919 Hwy 35 N Unit 27 Rockport, TX 78328		
	POSE DF IDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.	
	te <u>ONLY</u> if direct ture to benefit	Candidate/Officeholder name	Office sought Office held	
Date 08/09/2	2023	Payee name Citizens Defending Freedom		
	\$1,000.00 nbursement from ical contributions	Payee address; City; State; Zip Code P.O. Box 156 Mulberry, FL 33860		
	POSE DF IDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution	
	te <u>ONLY</u> if direct ture to benefit	Candidate/Officeholder name	Office sought Office held	
Date 07/26/2	2023	Payee name Coffee Waves Flour Bluff		
Amount	(\$) \$13.25	Payee address; City; State; Zip Co 10309 SPID, Ste F	ode	
X polit	nbursement from ical contributions nded	Corpus Christi, TX 78412		
	POSE DF IDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting expense	
	te <u>ONLY</u> if direct ture to benefit	Candidate/Officeholder name	Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	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 G: Sch: 9/45 Rpt: 111/149	2 FILER NAME Hunter, Todd A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020493
4 Date 08/04/2023	5 Payee name Coffee Waves Flour Bluff		
6 Amount (\$) \$23.25 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 10309 SPID, Ste F Corpus Christi, TX 78412		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
08/18/2023	Coffee Waves Flour Bluff		
Amount (\$) \$22.04 Reimbursement from political contributions	Payee address; City; State; Zip C 10309 SPID, Ste F	ode	
intended	Corpus Christi, TX 78412		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
09/15/2023	Coffee Waves Flour Bluff		
Amount (\$) \$20.71	Payee address; City; State; Zip C 10309 SPID, Ste F	ode	
X Reimbursement from political contributions intended	Corpus Christi, TX 78412		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing I	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 G: Sch: 10/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020493	
4 Date 09/29/2023	5 Payee name Coffee Waves Flour Bluff			
6 Amount (\$) \$24.07 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 10309 SPID, Ste F Corpus Christi, TX 78412			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
Date	Payee name			
10/13/2023	Coffee Waves Flour Bluff			
Amount (\$) \$15.14 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 10309 SPID, Ste F			
PURPOSE OF EXPENDITURE	Corpus Christi, TX 78412 Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
Date 12/15/2023	Payee name Coffee Waves Flour Bluff			
Amount (\$) \$21.50	Payee address; City; State; Zip C 10309 SPID, Ste F	ode		
X Reimbursement from political contributions intended	Corpus Christi, TX 78412			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing I	payment/Reinbursement 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 G: Sch: 11/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020493	
4 Date 11/10/2023	5 Payee name Constant Contact			
6 Amount (\$) \$61.83 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code Constant Contact Waltham, ME 02451			
8 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	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
Date 12/10/2023	Payee name Constant Contact			
Amount (\$) \$61.83 X Reimbursement from political contributions intended	Payee address; City; State; Zip C Constant Contact Waltham, ME 02451	ode		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
Date 12/18/2023	Payee name Cookies by Design			
Amount (\$) \$83.48	Payee address; City; State; Zip C 4709 S. Alameda	ode		
Reimbursement from political contributions intended	Corpus Christi, TX 78412			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	bayment/Reimbursement erhead/Rental Expense kpense xpense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 12/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	:	3 Filer ID (Ethics Commission Filers) 00020493
4 Date 12/16/2023	5 Payee name Cookies by Design		
6 Amount (\$) \$106.48 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 4709 S. Alameda Corpus Christi, TX 78412		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tS.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
12/18/2023	Cookies by Design		
Amount (\$) \$147.47 Reimbursement from	Payee address; City; State; Zip Code 4709 S. Alameda		
X political contributions intended	Corpus Christi, TX 78412		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tS.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
11/07/2023	Corpus Christi Road Runners - Beach to Bay	Relay Marathon	
Amount (\$) \$264.69	Payee address; City; State; Zip C P.O. Box 8750	ode	
X Reimbursement from political contributions intended	Corpus Christi, TX 78468		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POL	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Accountir Consultin Contribut Candid	ng Expense ng/Banking g Expense ions/ Donations Made B date/Officeholder/Politica rd Payment	Fees Office Over Food/Beverage Expense Polling Ex 9 - Gift/Awards/Memorials Expense Printing E	bayment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District xpense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)	
	ges Schedule G: 8/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493	
4 Date 11/10/2	023	5 Payee name Corpus Christi Road Runners	•	
	\$1,000.00 nbursement from cal contributions	7 Payee address; City; State; Zip Code P.O. Box 8750 Corpus Christi, TX 78468		
_	POSE DF IDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship	
	te <u>ONLY</u> if direct ture to benefit	Candidate/Officeholder name	Office sought Office held	
Date 11/06/2	2023	Payee name Corpus Christi Road Runners		
	\$264.69 hbursement from cal contributions	Payee address; City; State; Zip Co P.O. Box 8750 Corpus Christi, TX 78468	ode	
(POSE DF IDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship	
	te <u>ONLY</u> if direct ture to benefit	Candidate/Officeholder name	Office sought Office held	
Date 11/13/2	2023	Payee name Corpus Christi Santa's Elves Party		
Amount	(\$) \$300.00	Payee address; City; State; Zip Co 101 Ocean Way St	ode	
	nbursement from ical contributions ided	Corpus Christi, TX 78412		
(POSE DF IDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship	
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/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 G: Sch: 14/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3	3 Filer ID (Ethics Commission Filers) 00020493	
4 Date 11/10/2023	5 Payee name Cort Austin Rental			
6 Amount (\$) \$700.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 9821A IH-35 North Austin, TX 78753			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Housing expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
Date	Payee name			
12/16/2023	Cox Racing Services			
Amount (\$) \$33.28 Reimbursement from political contributions	Payee address; City; State; Zip Code 3028 Gardenia Dr,			
X political contributions intended	Ft. Worth, TX 76119			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
Date 11/26/2023	Payee name Events.com			
Amount (\$) \$42.33	Payee address; City; State; Zip C 811 Prospect St,	code		
X Reimbursement from political contributions intended	La Jolla, CA 92037			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought	Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense	EXPENDITURE CATEGORIES FO	R BOX 8(a) payment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	verhead/Rental Expense xpense Expense Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 15/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	:	3 Filer ID (Ethics Commission Filers) 00020493
4 Date 08/09/2023	5 Payee name Flour Bluff Business Association		
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip C P.O. Box 181423	ode	
X Reimbursement from political contributions intended	Corpus Christi, TX 78418		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
11/28/2023	GODaddy.com		
Amount (\$) \$23.42	Payee address;City;State;Zip Code14455 N. Hayden Rd. Suite 219		
X Reimbursement from political contributions intended	Scottsdale, AZ 85260		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
11/16/2023	Garza, Rolando		
Amount (\$) \$400.00	Payee address; City; State; Zip C 414 Brooks Drive	ode	
X Reimbursement from political contributions intended	Corpus Christi, TX 78408		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y Gift/Awards/Memorials Expense Printing F	ayment/Reimbursement rhead/Rental Expense pense xpense /ages/Contract Labor Solicitation/Fundrais Transportation Equi Travel in District Travel Out of Distric OTHER (enter a cat	pment & Related Expense
1 Total pages Schedule G: Sch: 16/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethi 00020493	cs Commission Filers)
4 Date 11/18/2023	5 Payee name Gloria Hicks Elementary School	•	
6 Amount (\$) \$250.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 3602 McfArdle Road Corpus Christi, TX 78415		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		of Texas. Complete Schedule T. ceholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office	ce held
Date	Payee name		
12/10/2023	GoFundMe		
Amount (\$) \$232.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 855 Jefferson Ave Redwood City, CA 94063-9992	de	
			of Taylog Complete Cabadula T
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		of Texas. Complete Schedule T. ceholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office	ce held
Date	Payee name		
12/02/2023	Granado, Angie Flores		
Amount (\$) \$6,500.00	Payee address; City; State; Zip C 418 Peoples St	de	
X Reimbursement from political contributions intended	# 505 Corpus Christi, TX 78401		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	· 🖵	of Texas. Complete Schedule T. ceholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	expenditure to benefit		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	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 G: Sch: 17/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020493
4 Date 12/18/2023	5 Payee name Granado, Angie Flores		
6 Amount (\$) \$3,000.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 418 Peoples St # 505 Corpus Christi, TX 78401		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Xpense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
11/16/2023	Grassroots Consultants		
Amount (\$) \$500.00 Reimbursement from political contributions	Payee address; City; State; Zip Code 4710 Hakel		
intended	Corpus Christi, TX 78415		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/22/2023	Payee name Grassroots Consultants		
Amount (\$) \$500.00	Payee address; City; State; Zip C 4710 Hakel	ode	
X Reimbursement from political contributions intended	Corpus Christi, TX 78415		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
╞		EXPENDITURE CATEGORIES FO		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Expense Polling Expense Printing E	xpense Travel Out of District Vages/Contract Labor OTHER (enter a category not listed above)	
	Total pages Schedule G: Sch: 18/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493	
4	Date 07/03/2023	5 Payee name HEB #6		
6	Amount (\$) \$15.98 Reimbursement from political contributions intended	 7 Payee address; City; State; Zip Code 4320 South Alameda Corpus Christi, TX 78412 		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Supplies	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
	Date	Payee name		
	12/15/2023	HEB #6		
	Amount (\$) \$258.98 Reimbursement from political contributions	Payee address; City; State; Zip Co 4320 South Alameda	ode	
	intended	Corpus Christi, TX 78412		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
	Date 12/18/2023	Payee name HEB #6		
	Amount (\$) \$221.50	Payee address; City; State; Zip Co 4320 South Alameda	ode	
	Reimbursement from political contributions intended	Corpus Christi, TX 78412		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies expense	
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y Gift/Awards/Memorials Expense Printing I	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense Expense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 19/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493
4 Date 10/04/2023	5 Payee name Harris County GOP	
6 Amount (\$) \$5,000.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 8588 Katy Fwy #445 Spring Valley Village, TX 77024	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship for Fall 2023 Dinner
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
12/15/2023	Huerta, Isabella	
Amount (\$) \$2,000.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 446 Pennington Dr. Corpus Christi, TX 78412	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name Huerta, Isabella	
Amount (\$) \$800.00	Payee address; City; State; Zip C 446 Pennington Dr.	rode
X Reimbursement from political contributions intended	Corpus Christi, TX 78412	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Housing expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Housing expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense
Credit Card Payment 1 Total pages Schedule G:	The Instruction Guide explains how to c	Somplete this form. 3 Filer ID (Ethics Commission Filers)
Sch: 20/45 Rpt:	Hunter, Todd A. (The Honorable)	00020493
4 Date 12/14/2023	5 Payee name Hutchinson, Charlotte	
6 Amount (\$) \$2,000.00 Reimbursement from political contributions	7 Payee address; City; State; Zip Code 621 Santa Monica Pl	
X political contributions intended	Corpus Christi, TX 78411	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
12/14/2023	John Donner & Associates	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code 0 1005 Congress Ave., Ste 580	
Reimbursement from political contributions intended	Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/20/2023	Payee name Lancaster Hotel	
Amount (\$) \$339.25	Payee address; City; State; Zip C 701 Texas Ave.	code
X Reimbursement from political contributions intended	Houston, TX 77002	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Hotel expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	ayment/Reimbursement erhead/Rental Expense pense Travel in District yages/Contract Labor OTHER (enter a categ	ent & Related Expense
1 Total pages Schedule G: Sch: 21/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics 00020493	Commission Filers)
4 Date 12/04/2023	5 Payee name Majic 104.9 FM		
6 Amount (\$) \$1,500.00 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 270547 Corpus Christi, TX 78427		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Check if Austin, TX, office	Fexas. Complete Schedule T. holder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office	held
Date	Payee name		
11/10/2023	Murphy Nasica		
Amount (\$) \$13,447.53 Reimbursement from political contributions intended	Payee address; City; State; Zip C 815 - S Brazos St Ste 304 Austin, TX 78701	de	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Check if Austin, TX, office	Texas. Complete Schedule T. holder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office	held
Date 11/24/2023	Payee name Murphy Nasica		
Amount (\$)	Payee address; City; State; Zip C 815 - S Brazos St	de	
\$13,111.76 Reimbursement from political contributions intended	Ste 304 Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of T Check if Austin, TX, office Consulting expense	Fexas. Complete Schedule T. holder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office	held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ove Food/Beverage Expense Polling Ex y - Gift/Awards/Memorials Expense Printing E	ayment/Reinbursement Solicitation/Fundraising Expense brhead/Rental Expense Transportation Equipment & Related Expense pense Travel in District xpense Travel Out of District /ages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 22/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493
4 Date 12/14/2023	5 Payee name Murphy Nasica	
6 Amount (\$) \$4,000.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 815 - S Brazos St Ste 304 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
12/11/2023	Nueces County Republican Party	
Amount (\$) \$1,500.00 Reimbursement from	Payee address; City; State; Zip Code	
x political contributions intended	Corpus Christi, TX 78480-8016	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
12/14/2023 Amount (\$) \$500.00	Nueces County Republican Party Payee address; City; State; Zip Cc PO Box 18016 City; State; Zip Cc	de
Reimbursement from political contributions intended	Corpus Christi, TX 78480-8016	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	bayment/Reinbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 23/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493
4 Date 11/13/2023	5 Payee name Nueces County Republican Women PAC	
6 Amount (\$) \$25.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 270054 Corpus Christi, TX 78427	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Dues expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dues expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
11/13/2023	Nueces County Republican Women PAC	
Amount (\$)	Payee address; City; State; Zip C	nde
Reimbursement from political contributions intended	P.O. Box 270054 Corpus Christi, TX 78427	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Dues expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dues expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
12/15/2023	Nueces County Republican Women PAC	
Amount (\$) \$20.00	Payee address; City; State; Zip C P.O. Box 270054	ode
X Reimbursement from political contributions intended	Corpus Christi, TX 78427	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing I	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 G: Sch: 24/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020493
4 Date 11/19/2023	5 Payee name Orlando Sims Consulting		
6 Amount (\$) \$1,000.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 5757 Wooldridge Apt 10 d Corpus Christi, TX 78414		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
12/11/2023	Orlando Sims Consulting		
Amount (\$) \$1,000.00 Reimbursement from political contributions intended	Payee address; City; State; Zip Code 5757 Wooldridge Apt 10 d		
PURPOSE OF EXPENDITURE	Corpus Christi, TX 78414 Category (See Categories listed at the top of this schedule) Consulting Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/21/2023	Payee name Padre Island Business Association		
Amount (\$) \$250.00	Payee address; City; State; Zip C 4493 SPID, Ste A PMB 313	ode	
X Reimbursement from political contributions intended	Corpus Christi, TX 78418		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	bayment/Reinbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 25/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493
4 Date 12/08/2023	5 Payee name Padre Island Business Association	
6 Amount (\$) \$95.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 4493 SPID, Ste A PMB 313 Corpus Christi, TX 78418	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Dues expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dues expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
12/15/2023	Padre Island Business Association	
Amount (\$)	Payee address; City; State; Zip C	nde
\$56.81		
X political contributions intended	Corpus Christi, TX 78418	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
12/27/2023	Police Officer's Christmas Angels, Inc	
Amount (\$) \$200.00	Payee address; City; State; Zip C PO Box 2504	ode
X Reimbursement from political contributions intended	Corpus Christi, TX 78403	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL E	XPENDITURES FROM PERSON	IAL FUNDS SCHEDULE G	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Mad Candidate/Officeholder/Po Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E By - Gift/Awards/Memorials Expense Printing I	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)	
1 Total pages Schedule G Sch: 26/45 Rpt:	: 2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493	
4 Date 11/10/2023	5 Payee name Port Aransas Chamber of Commerce	I	
6 Amount (\$) \$125.0 Reimbursement from political contributions intended		403 W. Cotter	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Dues expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Due expense	
9 Complete <u>ONLY</u> if direc expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date	Payee name		
11/20/2023	Port Aransas Chamber of Commerce		
Amount (\$) \$140.(Reimbursement from political contributions	Payee address; City; State; Zip Code 403 W. Cotter		
intended	Port Aransas, TX 78373		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship	
Complete <u>ONLY</u> if direc expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date	Payee name		
11/13/2023	Portland Chamber of Commerce		
Amount (\$) \$120.0	Payee address; City; State; Zip C 1605 US Highway 181, #A	ode	
Reimbursement from political contributions intended	Portland, TX 78374		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship	
Complete <u>ONLY</u> if direc expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing f	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 G: Sch: 27/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020493
4 Date 11/02/2023	5 Payee name Quorum Report		
6 Amount (\$) \$389.70 X Reimbursement from political contributions intended	 Payee address; City; State; Zip C P.O. Box 8 Austin, TX 78767 	ode	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Subscription expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Check Barton Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/31/2023	Payee name Reach Ministries		
Amount (\$) \$250.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 401 N. Shoreline Blvd Corpus Christi, TX 78401	ode	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/27/2023	Payee name Republican Club of Aransas County		
Amount (\$) \$20.00	Payee address; City; State; Zip C PO Box 2296	ode	
X Reimbursement from political contributions intended	Fulton, TX 78358		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Dues Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G		
F		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule G: Sch: 28/45 Rpt:	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Hunter, Todd A. (The Honorable) 00020493	
4	Date 08/11/2023	5 Payee name Republican Party of Texas	
6	Amount (\$) \$6,000.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1108 Lavaca Street, Suite 500 Austin, TX 78701	
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 Austin, TX, officeholder living expense Political Contribution 	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
F	Date	Payee name	
	11/09/2023	Rockport ABC Learning Center	
	Amount (\$) \$142.42 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1422 E Cedar St Rockport, TX 78382	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. Event Expense Check if Austin, TX, officeholder living expense Event sponsorship Event sponsorship	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	11/09/2023	Rockport Fulton Chamber of Commerce	
	Amount (\$) \$300.00	Payee address; City; State; Zip Code 319 Broadway St	
	X Reimbursement from political contributions intended	Rockport, TX 78382	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. Event Expense Check if Austin, TX, officeholder living expense Event sponsorship	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			SCHEDULE G
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	bayment/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 G: Sch: 29/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3	3 Filer ID (Ethics Commission Filers) 00020493
4 Date 11/10/2023	5 Payee name Rockport Pilot		
6 Amount (\$) \$2,197.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 730 Rockport, TX 78381-0730		
8 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 SE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
12/15/2023	Rockport Pilot		
Amount (\$) \$93.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip C P.O. Box 730 Rockport, TX 78381-0730	ode	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Subscription expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense NSE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/10/2023	Payee name Romeros, Christianna		
Amount (\$) \$400.00	Payee address; City; State; Zip C 429 Naples	ode	
Reimbursement from political contributions intended	Corpus Christi, TX 78401		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	epayment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense Expense Travel in District Expense Travel Out of District /Wages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 30/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493
4 Date 11/20/2023	5 Payee name Romeros, Christianna	
6 Amount (\$) \$50.00 Reimbursement from political contributions	7 Payee address; City; State; Zip Code 429 Naples	
8 PURPOSE OF EXPENDITURE	Corpus Christi, TX 78401 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought Office held
Date	Payee name	
12/15/2023	Romeros, Christianna	
Amount (\$) \$100.00 Reimbursement from political contributions intended	Payee address; City; State; Zip C 429 Naples Corpus Christi, TX 78401	code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought Office held
Date 12/18/2023	Payee name Romeros, Christianna	
Amount (\$) \$3,000.00	Payee address; City; State; Zip C 429 Naples	code
X Reimbursement from political contributions intended	Corpus Christi, TX 78401	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EX	PENDITURES FROM PERSON	IAL FUNDS	SCHEDULE G
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing I	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 G: Sch: 31/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	:	3 Filer ID (Ethics Commission Filers) 00020493
4 Date 11/13/2023	5 Payee name Rotary Club of Corpus Christi	l	
6 Amount (\$) \$250.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 260682 Corpus Christi, TX 78426		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
12/15/2023	Rotary Club of Corpus Christi		
Amount (\$) \$95.00 Reimbursement from political contributions	Payee address; City; State; Zip C PO Box 260682	ode	
intended	Corpus Christi, TX 78426		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
11/24/2023	RunSignUp.com		
Amount (\$) \$38.93	Payee address; City; State; Zip C 300 Mill Street, Suite 200	ode	
X Reimbursement from political contributions intended	Moorestown, NJ 08057		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EX	PENDITURES FROM PERSON	IAL FUNDS SCHEDULE G	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense Expense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)	
1 Total pages Schedule G: Sch: 32/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493	
4 Date 12/16/2023	5 Payee name RunSignUp.com		
6 Amount (\$) \$43.70 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 300 Mill Street, Suite 200 Moorestown, NJ 08057		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date	Payee name		
11/20/2023	San Patricio County Republican Women		
Amount (\$) \$20.00 Reimbursement from political contributions	Payee address; City; State; Zip Code P.O. Box 1222		
	Portland, TX 78374-1222 Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date 11/20/2023	Payee name San Patricio County Republican Women		
Amount (\$) \$25.00	Payee address; City; State; Zip C P.O. Box 1222	ode	
X Reimbursement from political contributions intended	Portland, TX 78374-1222		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Dues expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dues expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E / - Gift/Awards/Memorials Expense Printing E	bayment/Reimbursement Solicitation/Fundraising Expense erhead/Rental Expense Transportation Equipment & Related Expense kpense Travel in District kypense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule G: Sch: 33/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493
4	Date 09/01/2023	5 Payee name San Patricio County Republican Women	
6	Amount (\$) \$40.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 1222 Portland, TX 78374-1222	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
F	Date	Payee name	
	11/13/2023	South Jetty	
	Amount (\$) \$228.48 Reimbursement from political contributions	Payee address; City; State; Zip Co P.O. Box 1117	ode
	X political contributions intended	Port Aransas, TX 78373	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date 11/15/2023	Payee name South Jetty	
	Amount (\$) \$255.00	Payee address; City; State; Zip Co P.O. Box 1117	ode
	X Reimbursement from political contributions intended	Port Aransas, TX 78373	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y Gift/Awards/Memorials Expense Printing I	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 G: Sch: 34/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020493
4 Date 12/15/2023	5 Payee name South Jetty		
6 Amount (\$) \$81.60 X Reimbursement from political contributions intended	 Payee address; City; State; Zip C P.O. Box 1117 Port Aransas, TX 78373 	ode	
8 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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/13/2023	Payee name South Rockport Neighbors, Inc.		
Amount (\$) \$15.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 1919 Hwy 35 N PMB 367 Rockport, TX 78382	ode	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Dues	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/13/2023	Payee name South Rockport Neighbors, Inc.		
Amount (\$) \$100.00	Payee address; City; State; Zip C 1919 Hwy 35 N PMB 367	ode	
Reimbursement from political contributions intended	Rockport, TX 78382		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Ex g - Gift/Awards/Memorials Expense Printing E	ayment/Reimbursement Solicitation/Fundraising Expense erhead/Rental Expense Transportation Equipment & Related Expense opense Travel in District xpense Travel Out of District Vages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 35/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493
4 Date 11/20/2023	5 Payee name South Rockport Neighbors, Inc.	
6 Amount (\$) \$200.00 X Reimbursement from political contributions intended	 7 Payee address; City; State; Zip Co 1919 Hwy 35 N PMB 367 Rockport, TX 78382 	ode
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Dues expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dues expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
11/10/2023	South Texas Alliance of Republicans	
Amount (\$) \$500.00 Reimbursement from political contributions	Payee address; City; State; Zip Co 4934 High Meadow Dr	ode
X political contributions intended	Corpus Christi, TX 78413	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
11/04/2023	South Texas Alliance of Republicans	
Amount (\$) \$100.00	Payee address; City; State; Zip Co 4934 High Meadow Dr	ode
X Reimbursement from political contributions intended	Corpus Christi, TX 78413	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing E	bayment/Reimbursement Solicitation/Fundraising Expense erhead/Rental Expense Transportation Equipment & Related Expense cpense Travel in District xpense Travel Out of District Vages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 36/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493
4 Date	5 Payee name	
12/15/2023	South Texas Alliance of Republicans	
6 Amount (\$) \$60.00 Reimbursement from	 7 Payee address; City; State; Zip Code 4934 High Meadow Dr 	
X political contributions intended	Corpus Christi, TX 78413	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
12/27/2023	South Texas Alliance of Republicans	
Amount (\$)	Payee address; City; State; Zip C	ode
\$500.00	4934 High Meadow Dr	
Reimbursement from political contributions intended	Corpus Christi, TX 78413	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense Political contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
11/13/2023	South Texas Council Boy Scouts of America	
Amount (\$) \$300.00	Payee address; City; State; Zip Co 700 Everhart Rd, Ste A	ode
X Reimbursement from political contributions intended	Corpus Christi, TX 78411	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing I	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 G: Sch: 37/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020493
4 Date 12/16/2023	5 Payee name Sprouts Farmers Market		
6 Amount (\$) \$48.35 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1440 Airline Rd Corpus Christi, TX 78412		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
09/30/2023	Subway 22842-0		
Amount (\$) \$16.59 Reimbursement from political contributions intended	Payee address; City; State; Zip C 711 N. Carancahua Corpus Christi, TX 78475	ode	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/11/2023	Payee name Texans for Greg Abbott		
Amount (\$) \$250.00	Payee address;City;State;Zip CP.O. 308	ode	
X Reimbursement from political contributions intended	Austin, TX 78767		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E> - Gitt/Awards/Memorials Expense Printing E	ayment/Reimbursement Prhead/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 G: Sch: 38/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020493
4	Date 10/26/2023	5 Payee name Texas Capitol Giftshop		
6	Amount (\$) \$231.66 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1400 Congress Ave Austin, TX 78701		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Supplies		neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense tituents
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/27/2023	Payee name Texas House of Representatives		
	Amount (\$) \$318.90 X Reimbursement from political contributions intended	Payee address; City; State; Zip Co P.O. Box 2910 Austin, TX 78768	de	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/16/2023	Payee name Texas Maritime Museum		
	Amount (\$) \$450.00	Payee address; City; State; Zip Co 1202 Navigation Circle	de	
	X Reimbursement from political contributions intended	Rockport, TX 78382		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
F				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B	Fees Office O Food/Beverage Expense Polling E	ayment/Reimbursement Solicitation/Fundraising Expense rerhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District
Candidate/Officeholder/Politica Credit Card Payment		Wages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 39/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493
4 Date 11/16/2023	5 Payee name Toucan Graphics	·
6 Amount (\$) \$420.55	7 Payee address; City; State; Zip Code 1817 Padre Blvd, # 1	
X Reimbursement from political contributions intended	South Padre Island, TX 78597	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
11/10/2023	Trinity Day School	
Amount (\$) \$1,000.00	Payee address; City; State; Zip C PO Box 346	ode
Reimbursement from political contributions intended	Port Aransas, TX 78373	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
11/06/2023	UHaul Moving & Storage	
Amount (\$) \$146.11	Payee address; City; State; Zip C 4344 SPID	ode
X Reimbursement from political contributions intended	Corpus Christi, TX 78411	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Moving expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Moving expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing E	payment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
1 Total pages Schedule G: Sch: 40/45 Rpt:	The Instruction Guide explains how to co 2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493 00020493
4 Date 08/19/2023	5 Payee name USPS - Lamar Station	I
6 Amount (\$) \$52.80 Reimbursement from political contributions	7 Payee address; City; State; Zip Code 4801 Everhart	
8 PURPOSE OF EXPENDITURE	Corpus Christi, TX 78411-9998 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stamps expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	 Candidate/Officeholder name	Office sought Office held
Date 10/12/2023	Payee name USPS - Lamar Station	
Amount (\$) \$52.80 X Reimbursement from political contributions intended	Payee address; City; State; Zip Co 4801 Everhart Corpus Christi, TX 78411-9998	ode
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stamps expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/28/2023	Payee name USPS - Lamar Station	
Amount (\$) \$52.80	Payee address; City; State; Zip Co 4801 Everhart	ode
X political contributions intended	Corpus Christi, TX 78411-9998	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stamps expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	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 G: Sch: 41/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020493
4 Date 11/11/2023	5 Payee name USPS - Lamar Station		
6 Amount (\$) \$52.80 X Reimbursement from political contributions intended	 Payee address; City; State; Zip Ci 4801 Everhart Corpus Christi, TX 78411-9998 	ode	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
11/20/2023	USPS - Lamar Station		
Amount (\$) \$52.80	Payee address; City; State; Zip C 4801 Everhart	ode	
Reimbursement from political contributions intended	Corpus Christi, TX 78411-9998		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
12/09/2023	USPS - Lamar Station		
Amount (\$) \$52.80	Payee address; City; State; Zip C 4801 Everhart	ode	
X Reimbursement from political contributions intended	Corpus Christi, TX 78411-9998		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing E	bayment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District xpense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)	
1 Total pages Schedule G: Sch: 42/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493	
4 Date 12/22/2023	5 Payee name USPS - Lamar Station		
6 Amount (\$) \$52.80 X Reimbursement from political contributions intended	 Payee address; City; State; Zip City; 4801 Everhart Corpus Christi, TX 78411-9998 	ode	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stamps expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date 12/26/2023	Payee name USPS - Lamar Station		
Amount (\$) \$52.80 X Reimbursement from political contributions intended	Payee address; City; State; Zip Co 4801 Everhart Corpus Christi, TX 78411-9998	ode	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stamps expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date 07/26/2023	Payee name United States Postal Service - Lamar Station		
Amount (\$) \$52.80	Payee address; City; State; Zip Co 4801 Everhart	oue	
X Reimbursement from political contributions intended	Corpus Christi, TX 78411		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Stamps	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stamps	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	payment/Reinbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 43/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493		
4 Date 11/20/2023	5 Payee name V Fit Productions			
6 Amount (\$) \$43.74 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 750 Everhart Corpus Christi, TX 78411			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	expenditure to benefit			
Date 11/20/2023	Payee name V Fit Productions			
Amount (\$) \$43.74 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 750 Everhart Corpus Christi, TX 78411			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	gories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	expenditure to benefit			
Date 11/20/2023	Payee name V Fit Productions			
Amount (\$) \$33.24	Payee address; City; State; Zip Code \$33.24 750 Everhart			
X Reimbursement from political contributions intended	Corpus Christi, TX 78411			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E /- Gift/Awards/Memorials Expense Printing E	bayment/Reimbursement verhead/Rental Expense xpense xpense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1 Total pages Schedule G: Sch: 44/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493		
4 Date 11/20/2023	5 Payee name V Fit Productions			
6 Amount (\$) \$27.99 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 750 Everhart Corpus Christi, TX 78411			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Date 11/26/2023	Payee name V Fit Productions			
Amount (\$) \$27.99 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 750 Everhart Corpus Christi, TX 78411			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedu Check if Austin, TX, officeholder living expense Event sponsorship		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	expenditure to benefit			
Date 11/06/2023	Payee name V Fit Productions			
Amount (\$) \$33.24	Payee address; City; State; Zip C 750 Everhart	ode		
X Reimbursement from political contributions intended	Corpus Christi, TX 78411			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense p	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing E	epayment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense Expense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 45/45 Rpt:	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493		
4 Date 12/16/2023	5 Payee name V Fit Productions			
6 Amount (\$) \$38.49 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 750 Everhart Corpus Christi, TX 78411			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Event sponsorship		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	expenditure to benefit			
Date 11/10/2023	Payee name Visit Corpus Christi			
Amount (\$) \$625.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 400 Mann St., Ste 1100 Corpus Christi, TX 78401			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	sted at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	expenditure to benefit			
Date 11/01/2023	Payee name Warwick Melrose Hotel			
Amount (\$) \$1,619.69	Payee address; City; State; Zip C 3015 Oak Lawn Ave	ode		
X Reimbursement from political contributions intended	Dalllas, TX 75219			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Catering expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		

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

SCHEDULE K

The Instru	ction Guide explains how to complete this form.	1 Total pages Schedule K: Sch: 1/2 Rpt: 148/149		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Hunter, Todo	Hunter, Todd A. (The Honorable) 00020			
4 Date	5 Name of person from whom amount is received	8 Amount (\$)		
07/31/2023	American Bank	\$164.31		
	6 Address of person from whom amount is received; City; State; Zip Code			
	Corpus Christi, TX 78401			
	7 Purpose for which amount is received Check if political cont			
	Interest on deposits			
Date	Date Name of person from whom amount is received A			
08/31/2023	American Bank	\$161.40		
	Address of person from whom amount is received; City; State; Zip Code			
	Corpus Christi, TX 78401			
		olitical contribution returned to filer		
	Interest on deposits			
Date	Name of person from whom amount is received	Amount (\$)		
09/29/2023	American Bank	\$154.32		
	Address of person from whom amount is received; City; State; Zip Code			
	Corpus Christi, TX 78401			
		olitical contribution returned to filer		
	Interest on deposits			
10/31/2023	Name of person from whom amount is received American Bank	Amount (\$) \$162.01		
10/01/2020	Address of person from whom amount is received; City; State; Zip Code			
	Address of person non-whom another is received, only, date, zip oode			
	Corpus Christi, TX 78401			
	Purpose for which amount is received Check if p	olitical contribution returned to filer		
	Interest on deposits			
Date	Name of person from whom amount is received	Amount (\$)		
11/30/2023	American Bank	\$162.96		
	Address of person from whom amount is received; City; State; Zip Code			
	Corpus Christi, TX 78401			
Purpose for which amount is received Check if political contribution returned to				
Interest on deposits				

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

SCHEDULE K

I he instruction Guide explains how to complete this form		ages Schedule K: 2/2 Rpt: 149/149				
2	2 FILER NAME 3 Filer ID Hunter, Todd A. (The Honorable) 000204			0 (Ethics Commission Filers) 0493		
4	Date 12/29/2023	5	Name of person from whom amount is received American Bank			8 Amount (\$) \$179.67
		6	Address of person from whom amount is received; City; State; Zip Code			
		7	Corpus Christi, TX 78401 Purpose for which amount is received Check if	noliti		ribution not unod to filor
		7	Interest on deposits	politio	cal cont	ribution returned to filer