

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00087395	2 Total pages filed: 79					
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Stephen M.	MI	OFFICE USE ONLY				
	NICKNAME Skeeter	LAST Hubert	SUFFIX		Date Received ELECTRONICALLY FILED 01/11/2024			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 2523 Pine Acres Dr. Conroe, TX 77384			Date Hand-delivered or Date Postmarked				
	Receipt #	Amount		Date Processed				
				Date Imaged				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Dr.	FIRST Bonnie L.	MI					
	NICKNAME	LAST Hubert	SUFFIX M.A.					
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2523 Pine Acres Dr Conroe, TX 77384							
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION					
	(936)	777-2848						
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)							
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)							
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year	
	07	01	2023		12	31	2023	
10 ELECTION	ELECTION DATE Month Day Year 03/05/2023			ELECTION TYPE				
				<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other		<input type="checkbox"/> General
11 OFFICE	OFFICE HELD (if any) Board of Trustees District Conroe				12 OFFICE SOUGHT (if known) State Representative District 15			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Hubert, Stephen M. (Mr.) **14** Filer ID (Ethics Commission Filers)
00087395

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	93,836.90
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	60,592.65
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	25,594.64
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

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

Mr. Stephen M. Hubert

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - C/OH

18 FILER NAME Hubert, Stephen M. (Mr.)		19 Filer ID (Ethics Commission Filers) 00087395
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 78,907.42
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 14,929.48
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 60,592.65
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 169.61

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/25 Rpt: 4/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 07/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACT for TCTA <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78767	7 Amount of Contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andree, Ryan (Mr.) <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Williamson Law
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Jeff (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Roofing		Employer (See Instructions) Fair Claims Rooming
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashton, Spencer (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77305	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Ashton Sawing and Drilling
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashton, Spencer (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77305	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Ashton Sawing and Drilling

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/25 Rpt: 5/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barney, Glen <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77384	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) Ensign
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bayer, Kevin (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$2,604.48
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Leading Edge Ceramic
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Chris (Mr.) <hr/> Contributor address; City; State; Zip Code Spring, TX 77381	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berlin, Evan <hr/> Contributor address; City; State; Zip Code Shenandoah, TX 77385	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Strategy Marketing Manager		Employer (See Instructions) Rotork
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berlin, Evan <hr/> Contributor address; City; State; Zip Code Shenandoah, TX 77385	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Strategy Marketing Manager		Employer (See Instructions) Rotork

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/25 Rpt: 6/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berlin, Evan <hr/> 6 Contributor address; City; State; Zip Code Shenandoah, TX 77385	7 Amount of Contribution (\$) \$750.00
8 Principal occupation / Job title (See Instructions) Strategy Marketing Manager		9 Employer (See Instructions) Rotork
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Jacqueline (Mrs.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Debt Collector		Employer (See Instructions) ASAP Debt Collection Services
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Marc (Mr.) <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) CRI
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair Law Firm PC <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryan, Patrick <hr/> Contributor address; City; State; Zip Code Houston, TX 77073	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) ABC Supply

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/25 Rpt: 7/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckalew, Denny (Mr.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Conroe, TX 77305	
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Self
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckalew Jr., Don (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Conroe, TX 77305	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassels, Amy (Mrs.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Magnolia, TX 77355	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassels, Amy (Mrs.)	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Magnolia, TX 77355	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassels, Amy (Mrs.)	Amount of Contribution (\$) \$875.00
	Contributor address; City; State; Zip Code Magnolia, TX 77355	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/25 Rpt: 8/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Stacey (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77382	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Director Internal Audit		9 Employer (See Instructions) Siemens
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheney, Tommy (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$521.15
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheney, Tommy (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$640.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Stacie (Mrs.) <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of Contribution (\$) \$260.73
Principal occupation / Job title (See Instructions) Insurance Services Consultant		Employer (See Instructions) Woodforest Wealth Strategies
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connell, Jeff (Mr.) <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78255	Amount of Contribution (\$) \$260.73
Principal occupation / Job title (See Instructions) Director - Assest Management		Employer (See Instructions) Affinius Capital

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/25 Rpt: 9/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Mark (Mr.)	7 Amount of Contribution (\$) \$80.00
	6 Contributor address; City; State; Zip Code Montgomery, TX 77356	
8 Principal occupation / Job title (See Instructions) VP Buisness Development		9 Employer (See Instructions) Spitzer Ind
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Thomas (Mr.)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Sweetlake, TX 70630	
Principal occupation / Job title (See Instructions) Mechanic		Employer (See Instructions) Self
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cramer, Jason (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Spring, TX 77382	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Winstead PC
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Alanna (Mrs.)	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Conroe, TX 77304	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Dustin (Mr.)	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code Conroe, TX 77304	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Union Pacific Railroad

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/25 Rpt: 10/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crosby, Douglas (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77384	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Solutions Architect		9 Employer (See Instructions) Exxon Mobil
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutler, Carrie (Mrs.) <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Houston
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davies, Gerald (Mr.) <hr/> Contributor address; City; State; Zip Code Fletcher, NC 28732	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Camille (Mrs.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77044	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Camille (Mrs.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77044	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/25 Rpt: 11/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 10/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Camille (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77044	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Demaret, Carol Ann (Mrs.) <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dolphin, Ed (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Arborist		Employer (See Instructions) Self
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dolphin, Ed (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$700.00
Principal occupation / Job title (See Instructions) Arborist		Employer (See Instructions) Self
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eulitt, H Kala <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77316	Amount of Contribution (\$) \$260.73
Principal occupation / Job title (See Instructions) Chiropractor		Employer (See Instructions) Back Pain & Joint Center of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/25 Rpt: 12/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farnsworth, Kevin (Mr.) <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77382	7 Amount of Contribution (\$) \$210.00
8 Principal occupation / Job title (See Instructions) Account Manager		9 Employer (See Instructions) ChampionX
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farnsworth, Kevin (Mr.) <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Account Manager		Employer (See Instructions) ChampionX
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fife, Jon (Mr.) <hr/> Contributor address; City; State; Zip Code Spring, TX 77381	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) FTI
Date 08/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Katherine (Mrs.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Research Scientist		Employer (See Instructions) College Board
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Katherine (Mrs.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Research Scientist		Employer (See Instructions) College Board

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/25 Rpt: 13/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Katherine (Mrs.)	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Conroe, TX 77385		
8 Principal occupation / Job title (See Instructions) Research Scientist		9 Employer (See Instructions) College Board
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Katherine (Mrs.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Conroe, TX 77385		
Principal occupation / Job title (See Instructions) Research Scientist		Employer (See Instructions) College Board
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fullmer, Ben (Mr.)	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Conroe, TX 77384		
Principal occupation / Job title (See Instructions) Security Sales		Employer (See Instructions) Ageint Security
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorewitz, Craig (Mr.)	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Conroe, TX 77384		
Principal occupation / Job title (See Instructions) Turd Wrangler		Employer (See Instructions) Heritage Sanitation, Inc.
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorewitz, Craig (Mr.)	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Conroe, TX 77384		
Principal occupation / Job title (See Instructions) Turd Wrangler		Employer (See Instructions) Heritage Sanitation, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/25 Rpt: 14/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Fredrick <hr/> 6 Contributor address; City; State; Zip Code Shenandoah, TX 77384	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Financial Advisor		9 Employer (See Instructions) Woodforest Wealth Strategies
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guajardo, Issac (Mr.) <hr/> Contributor address; City; State; Zip Code Pipe Creek, TX 78063	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Quest Masonry
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guajardo, Issac (Mr.) <hr/> Contributor address; City; State; Zip Code Pipe Creek, TX 78063	Amount of Contribution (\$) \$2,604.48
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Quest Masonry
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guajardo, Ruben (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77302	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Masonry Contractor		Employer (See Instructions) Capital Masonry
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, David (Mr.) <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/25 Rpt: 15/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Kym (Mrs.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Montgomery, TX 77356	
8 Principal occupation / Job title (See Instructions) Insurance		9 Employer (See Instructions) Woodforest Insurance Partners
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, Darrell	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Magnolia, TX 77354	
Principal occupation / Job title (See Instructions) Security Sales		Employer (See Instructions) Agent Security
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, Darrell	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Magnolia, TX 77354	
Principal occupation / Job title (See Instructions) Security Sales		Employer (See Instructions) Agent Security
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, Darrell	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Magnolia, TX 77354	
Principal occupation / Job title (See Instructions) Security Sales		Employer (See Instructions) Agent Security
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herber, Shane (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Conroe, TX 77384	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Heritage Sanitation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/25 Rpt: 16/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Honeycutt, Chris (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77384	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Roofer		9 Employer (See Instructions) Fair Claims Roofing
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubert, Kyle (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubert, Kyle (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$260.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubert, Scott <hr/> Contributor address; City; State; Zip Code Granbury, TX 76048	Amount of Contribution (\$) \$522.19
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Sandi (Mrs.) <hr/> Contributor address; City; State; Zip Code Spring, TX 77388	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/25 Rpt: 17/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Izatt, Ted (Mr.) <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77381	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff, Kolb (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77381	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Chevron
Date 08/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Edwin <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kidd, Scott (Mr.) <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Gauntt Koen Binney & Kidd, LLP
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lake, John (Mr.) <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78253	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/25 Rpt: 18/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 10/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Troy (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77378	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Manager of Operations		9 Employer (See Instructions) Knockout Pools LLC
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Troy (Mr.) <hr/> Contributor address; City; State; Zip Code Willis, TX 77378	Amount of Contribution (\$) \$1,360.00
Principal occupation / Job title (See Instructions) Manager of Operations		Employer (See Instructions) Knockout Pools LLC
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larsen, Devin (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Healthcare Administration		Employer (See Instructions) Blue Cloud Pediatric Surgery Centers
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leakey, Steven (Mr.) <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcbride, Loyd (Mr.) <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77316	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Sr Systems Engineer		Employer (See Instructions) Keysight Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/25 Rpt: 19/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millenson, Barry (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Shenandoah, TX 77381	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) General Manager		9 Employer (See Instructions) Buckalew Chevrolet
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Claude (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77386	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jud (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77302	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Bank of America
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milstead, Amy (Mrs.) <hr/> Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Entrepreneur
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milstead, Amy (Mrs.) <hr/> Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Entrepreneur

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/25 Rpt: 20/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moody, John (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77019	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Parkside Capital
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bill (Mr.) <hr/> Contributor address; City; State; Zip Code Willis, TX 77378	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Billy <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77320	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, William <hr/> Contributor address; City; State; Zip Code Tomball, TX 77377	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newell, Ben (Mr.) <hr/> Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Roofer		Employer (See Instructions) Fair Claims Roofing

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/25 Rpt: 21/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 08/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neal, Justin <hr/> 6 Contributor address; City; State; Zip Code Magnolia, TX 77354	7 Amount of Contribution (\$) \$3,000.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Fair Claims Roofing
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neal, Justin <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77354	Amount of Contribution (\$) \$1,400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Fair Claims Roofing
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neal, Justin <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77354	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Fair Claims Roofing
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Peter (Mr.) <hr/> Contributor address; City; State; Zip Code Spring, TX 77380	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) ILS
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pilgrim, Steve (Mr.) <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77356	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/25 Rpt: 22/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 10/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Ben (Mr.)	7 Amount of Contribution (\$) \$521.15
	6 Contributor address; City; State; Zip Code Spring, TX 77386	
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Optinose
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Ben (Mr.)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Spring, TX 77386	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Optinose
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Chane (Mr.)	Amount of Contribution (\$) \$521.15
	Contributor address; City; State; Zip Code Montgomery, TX 77316	
Principal occupation / Job title (See Instructions) Financial Services		Employer (See Instructions) Chane Reagan Financial
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Chane (Mr.)	Amount of Contribution (\$) \$160.00
	Contributor address; City; State; Zip Code Montgomery, TX 77316	
Principal occupation / Job title (See Instructions) Financial Services		Employer (See Instructions) Chane Reagan Financial
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Frank (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code San Antonio, TX 78250	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/25 Rpt: 23/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jared (Mr.) <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78254	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Transportation		9 Employer (See Instructions) Copart
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Jared (Mr.) <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Transportation		Employer (See Instructions) Copart
Date 08/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Manuel (Mr.) <hr/> Contributor address; City; State; Zip Code Helotes, TX 78023	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhame, Jeff <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Rhame & Gorrell Wealth Management
Date 08/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richhart, Della <hr/> Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Reading Interventionist		Employer (See Instructions) Conroe ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/25 Rpt: 24/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 10/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richter, Roy <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77382	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Exxon Mobil Corporation
Date 08/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riggs, Michael <hr/> Contributor address; City; State; Zip Code Windsor, CO 80550	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self Employed
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Charlie (Commissioner) <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77355	Amount of Contribution (\$) \$2,604.48
Principal occupation / Job title (See Instructions) Pct 2 Commissioner		Employer (See Instructions) Montgomery County
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skipper, Kendrick <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Chick-fil-A
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jason (Mr.) <hr/> Contributor address; City; State; Zip Code Bentonville, AR 72713	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Heitmeyer Consulting

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/25 Rpt: 25/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 10/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sonzaire LLC <hr/> 6 Contributor address; City; State; Zip Code Tyler, TX 75707	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Staley, Gil (Mr.) <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) EDP
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stockton, Sunny <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$215.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stockton, Sunny <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$215.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strong, Bret <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/25 Rpt: 26/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tough, Bruce (Mr.) <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77381	7 Amount of Contribution (\$) \$190.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tough, Bruce (Mr.) <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tough, Bruce (Mr.) <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsamouris, Ryan <hr/> Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Solutions Architect		Employer (See Instructions) Chevron Phillips
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tugwell, Andrew (Mr.) <hr/> Contributor address; City; State; Zip Code Kemah, TX 77565	Amount of Contribution (\$) \$521.15
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) PISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/25 Rpt: 27/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tugwell, Andrew (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Kemah, TX 77565	
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) PISD
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Upshaw, Ethan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Conroe, TX 77304	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Upshaw, Ethan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Conroe, TX 77304	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valora, Parker	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code The Woodlands, TX 77382	
Principal occupation / Job title (See Instructions) Contracting Geoscientist		Employer (See Instructions) Valora Geoscience LLC
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welbes, Timothy (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code The Woodlands, TX 77381	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/25 Rpt: 28/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 08/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Datren <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77381	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) Rig Runners
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Stephen (Mr.) <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of Contribution (\$) \$260.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/6 Rpt: 29/79	
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 09/27/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berlin, Evan (Mr.)	8 Amount of contribution (\$) \$750.00	9 In-kind contribution description Event Hosting
	7 Contributor address; City; State; Zip Code Shenandoah, TX 77385	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Strategy Marketing Manager		11 Employer (FOR NON-JUDICIAL) (See instructions) Rotork	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brand, Rosa (Mrs.)	Amount of contribution (\$) \$250.00	In-kind contribution description Fundraiser Marketing
	Contributor address; City; State; Zip Code Conroe, TX 77384	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Graphic Designer		Employer (FOR NON-JUDICIAL) (See instructions) RM Brand	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Tim (Mr.)	Amount of contribution (\$) \$300.00	In-kind contribution description Meet and Greet Hosting
	Contributor address; City; State; Zip Code Conroe, TX 77384	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Educator		Employer (FOR NON-JUDICIAL) (See instructions) CISD	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/6 Rpt: 30/79	
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 07/01/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubert, Bonnie	8 Amount of contribution (\$) \$236.88	9 In-kind contribution description Virtual Assistant Usage
	7 Contributor address; City; State; Zip Code Conroe, TX 77384		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Buisness Owner		11 Employer (FOR NON-JUDICIAL) (See instructions) Self	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubert, Bonnie (Dr.)	Amount of contribution (\$) \$203.64	In-kind contribution description Virtual Assistant Usage
	Contributor address; City; State; Zip Code Conroe, TX 77384		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Buisness Owner		Employer (FOR NON-JUDICIAL) (See instructions) Self	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubert, Bonnie (Dr.)	Amount of contribution (\$) \$262.00	In-kind contribution description Virtual Assistant Usage
	Contributor address; City; State; Zip Code Conroe, TX 77384		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Buisness Owner		Employer (FOR NON-JUDICIAL) (See instructions) Self	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 3/6 Rpt: 31/79	
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 07/26/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubert, Bonnie (Dr.)	8 Amount of contribution (\$) \$194.57	9 In-kind contribution description Virtual Assistant Usage
	7 Contributor address; City; State; Zip Code Conroe, TX 77384		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Buisness Owner		11 Employer (FOR NON-JUDICIAL) (See instructions) Self	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubert, Bonnie (Dr.)	Amount of contribution (\$) \$316.62	In-kind contribution description Virtual Assistant Usage
	Contributor address; City; State; Zip Code Conroe, TX 77384		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Buisness Owner		Employer (FOR NON-JUDICIAL) (See instructions) Self	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 08/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubert, Bonnie (Dr.)	Amount of contribution (\$) \$109.96	In-kind contribution description Virtual Assistant Usage
	Contributor address; City; State; Zip Code Conroe, TX 77384		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Buisness Owner		Employer (FOR NON-JUDICIAL) (See instructions) Self	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 4/6 Rpt: 32/79	
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 08/27/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubert, Bonnie (Dr.)	8 Amount of contribution (\$) \$205.81	9 In-kind contribution description Virtual Assistant Usage
	7 Contributor address; City; State; Zip Code Conroe, TX 77384		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Buisness Owner		11 Employer (FOR NON-JUDICIAL) (See instructions) Self	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 08/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubert, Bonnie (Dr.)	Amount of contribution (\$) \$600.00	In-kind contribution description Chairmans Ball Decor
	Contributor address; City; State; Zip Code Conroe, TX 77384		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Buisness Owner		Employer (FOR NON-JUDICIAL) (See instructions) Self	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Hailey	Amount of contribution (\$) \$500.00	In-kind contribution description Record Keeping for October
	Contributor address; City; State; Zip Code Conroe, TX 77385		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Student		Employer (FOR NON-JUDICIAL) (See instructions) Student	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 5/6 Rpt: 33/79	
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 11/30/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Hailey	8 Amount of contribution (\$) \$500.00	9 In-kind contribution description Record Keeping
	7 Contributor address; City; State; Zip Code Conroe, TX 77385		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Student		11 Employer (FOR NON-JUDICIAL) (See instructions) Student	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) One Way Life	Amount of contribution (\$) \$2,500.00	In-kind contribution description Social Media Management
	Contributor address; City; State; Zip Code Conroe, TX 77384		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) One Way Life	Amount of contribution (\$) \$2,500.00	In-kind contribution description Social Media Management
	Contributor address; City; State; Zip Code Conroe, TX 77384		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 6/6 Rpt: 34/79	
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 11/30/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) One Way Life	8 Amount of contribution (\$) \$2,500.00	9 In-kind contribution description Social Media Management
	7 Contributor address; City; State; Zip Code Conroe, TX 77384	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) One Way Life	Amount of contribution (\$) \$2,500.00	In-kind contribution description Social Media Management
	Contributor address; City; State; Zip Code Conroe, TX 77384	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tompkins, Allie (Mrs.)	Amount of contribution (\$) \$500.00	In-kind contribution description Event hosting
	Contributor address; City; State; Zip Code The Woodlands, TX 77384	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Nanny		Employer (FOR NON-JUDICIAL) (See instructions) Self	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/44 Rpt: 35/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/10/2023	5 Payee name Academy	
6 Amount (\$) \$475.00	7 Payee address; City; State; Zip Code 1360 Lake Woodlands Dr The Woodlands, TX 77380	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Prives for Fundraiser
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2023	Payee name Agave Jalisco	
Amount (\$) \$341.37	Payee address; City; State; Zip Code 6263 S Highway 77 Rivera, TX 78379	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner with Fundraiser Participants
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/01/2023	Payee name Anedot	
Amount (\$) \$124.60	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/44 Rpt: 36/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 08/05/2023	5 Payee name Anedot	
6 Amount (\$) \$20.30	7 Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/07/2023	Payee name Anedot	
Amount (\$) \$10.30	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/09/2023	Payee name Anedot	
Amount (\$) \$2.30	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/44 Rpt: 37/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 08/14/2023	5 Payee name Anedot	
6 Amount (\$) \$4.30	7 Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/18/2023	Payee name Anedot	
Amount (\$) \$200.30	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/24/2023	Payee name Anedot	
Amount (\$) \$120.60	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/44 Rpt: 38/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 08/27/2023	5 Payee name Anedot	
6 Amount (\$) \$1.30	7 Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/28/2023	Payee name Anedot	
Amount (\$) \$8.30	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2023	Payee name Anedot	
Amount (\$) \$440.60	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/44 Rpt: 39/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 08/30/2023	5 Payee name Anedot	
6 Amount (\$) \$20.30	7 Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2023	Payee name Anedot	
Amount (\$) \$6.30	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2023	Payee name Anedot	
Amount (\$) \$60.30	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 6/44 Rpt: 40/79	2	FILER NAME Hubert, Stephen M. (Mr.)	3	Filer ID (Ethics Commission Filers) 00087395
4	Date 09/13/2023	5	Payee name Anedot		
6	Amount (\$) \$10.30	7	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 09/18/2023		Payee name Anedot		
	Amount (\$) \$4.30		Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 09/19/2023		Payee name Anedot		
	Amount (\$) \$40.30		Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/44 Rpt: 41/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 09/25/2023	5 Payee name Anedot	
6 Amount (\$) \$140.60	7 Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/27/2023	Payee name Anedot	
Amount (\$) \$5.60	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2023	Payee name Anedot	
Amount (\$) \$40.30	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 8/44 Rpt: 42/79	2	FILER NAME Hubert, Stephen M. (Mr.)	3	Filer ID (Ethics Commission Filers) 00087395
4	Date 10/11/2023	5	Payee name Anedot		
6	Amount (\$) \$50.60	7	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/13/2023		Payee name Anedot		
	Amount (\$) \$10.30		Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/24/2023		Payee name Anedot		
	Amount (\$) \$44.60		Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 9/44 Rpt: 43/79	2	FILER NAME Hubert, Stephen M. (Mr.)	3	Filer ID (Ethics Commission Filers) 00087395	
4	Date 10/27/2023	5	Payee name Anedot			
6	Amount (\$) \$1.30	7	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donor Collection Fees			
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 10/29/2023		Payee name Anedot			
	Amount (\$) \$64.90		Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 10/30/2023		Payee name Anedot			
	Amount (\$) \$45.20		Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/44 Rpt: 44/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 10/31/2023	5 Payee name Anedot	
6 Amount (\$) \$20.60	7 Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2023	Payee name Anedot	
Amount (\$) \$20.30	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/08/2023	Payee name Anedot	
Amount (\$) \$40.60	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/44 Rpt: 45/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/10/2023	5 Payee name Anedot	
6 Amount (\$) \$30.30	7 Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/13/2023	Payee name Anedot	
Amount (\$) \$8.90	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/18/2023	Payee name Anedot	
Amount (\$) \$20.30	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/44 Rpt: 46/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/22/2023	5 Payee name Anedot	
6 Amount (\$) \$2.30	7 Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
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 Anedot	
Amount (\$) \$1.30	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2023	Payee name Anedot	
Amount (\$) \$18.60	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/44 Rpt: 47/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/03/2023	5 Payee name Anedot	
6 Amount (\$) \$8.30	7 Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/07/2023	Payee name Anedot	
Amount (\$) \$10.30	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2023	Payee name Anedot	
Amount (\$) \$12.30	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/44 Rpt: 48/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/27/2023	5 Payee name Anedot	
6 Amount (\$) \$1.30	7 Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/07/2023	Payee name Anedot	
Amount (\$) \$8.30	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Fees Collection
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/28/2023	Payee name Anedot	
Amount (\$) \$40.30	Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/44 Rpt: 49/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
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4 Date 12/29/2023	5 Payee name Anedot
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6 Amount (\$) \$3.30	7 Payee address; City; State; Zip Code 920 McKinney Ave 7th floor Dallas, TX 75201
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Collection Fees
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/26/2023	Payee name Apricity Foundation
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Amount (\$) \$150.00	Payee address; City; State; Zip Code 2257 North Loop 336 W. Suite 140 Conroe, TX 77304
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Tickets
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2023	Payee name Ascend LLC. Accounting
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Amount (\$) \$7,500.00	Payee address; City; State; Zip Code 3211 English Way Prospect, KY 40059
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/44 Rpt: 50/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 08/08/2023	5 Payee name Blackwood Sporting Co	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 11400 FM 2854 Conroe, TX 77304	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Deposit for Fundraiser
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2023	Payee name Blackwood Sporting Co	
Amount (\$) \$10,027.58	Payee address; City; State; Zip Code 11400 FM 2854 Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser Event Hosting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/10/2023	Payee name Blankenship, Ben (Mr.)	
Amount (\$) \$625.00	Payee address; City; State; Zip Code 10617 Boyd Rd Conroe, TX 77306	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Fundraiser Deposit
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/44 Rpt: 51/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/13/2023	5 Payee name Blankenship, Ben (Mr.)	
6 Amount (\$) \$728.13	7 Payee address; City; State; Zip Code 10617 Boyd Rd Conroe, TX 77306	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Event (2/2)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2023	Payee name Boudreaux, Jennifer (Mrs.)	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 453 Sawdust Rd #102 Spring, TX 77380	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cake for Fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2023	Payee name CC Plus	
Amount (\$) \$2,268.92	Payee address; City; State; Zip Code 4205 W Davis St Conroe, TX 77304	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Fundraiser Auction
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/44 Rpt: 52/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/04/2023	5 Payee name Cantrell, Laurie (Mrs.)	
6 Amount (\$) \$75.63	7 Payee address; City; State; Zip Code 23 Tanager Trl Spring, TX 77381	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimburse for Fundraiser Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2023	Payee name Coa Parking Park	
Amount (\$) \$2.25	Payee address; City; State; Zip Code 111 Colorado St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting Parking
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/07/2023	Payee name Community Impact	
Amount (\$) \$405.00	Payee address; City; State; Zip Code 9601 Jones Rd Houston, TX 77065	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense News Ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/44 Rpt: 53/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/26/2023	5 Payee name Community Impact	
6 Amount (\$) \$648.00	7 Payee address; City; State; Zip Code 9601 Jones Rd Houston, TX 77065	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense News Ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/12/2023	Payee name Farrell Gjesdal Strategy Group	
Amount (\$) \$4,970.08	Payee address; City; State; Zip Code 4040 Hwy 6, Suite 200 College Station, TX 77845	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/03/2023	Payee name Farrell Gjesdal Strategy Group	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 4040 Hwy 6, Suite 200 College Station, TX 77845	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/44 Rpt: 54/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/04/2023	5 Payee name Farrell Gjesdal Strategy Group	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 4040 Hwy 6, Suite 200 College Station, TX 77845	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2023	Payee name Fiato, Missy (Mrs.)	
Amount (\$) \$78.00	Payee address; City; State; Zip Code 29980 FM 2978 Apt 3317 Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Prizes for Fundraiser Blast Shoot
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/14/2023	Payee name HEB	
Amount (\$) \$11.19	Payee address; City; State; Zip Code 409 E Kleberg Ave Kingsville, TX 78363	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Shoot Fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/44 Rpt: 55/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 10/28/2023	5 Payee name HEB	
6 Amount (\$) \$207.04	7 Payee address; City; State; Zip Code 10200 Highway 242 Conroe, TX 77385	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Skeet Shoot Fundraiser
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 10/28/2023	Payee name HEB	
Amount (\$) \$111.53	Payee address; City; State; Zip Code 10200 Highway 242 Conroe, TX 77385	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Skeet Shoot Fundraiser
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/30/2023	Payee name HEB	
Amount (\$) \$286.37	Payee address; City; State; Zip Code 10200 Highway 242 Conroe, TX 77385	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Fundraising Event
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/44 Rpt: 56/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/01/2023	5 Payee name Home Depot	
6 Amount (\$) \$174.41	7 Payee address; City; State; Zip Code 19103 I-45 North Conroe, TX 77385	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/11/2023	Payee name Home Depot	
Amount (\$) \$34.60	Payee address; City; State; Zip Code 19103 I-45 North Conroe, TX 77385	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2023	Payee name Hubert, Bonnie (Dr.)	
Amount (\$) \$789.25	Payee address; City; State; Zip Code 2523 Pine Acres Dr Conroe, TX 77384	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimburse for Fundraising Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/44 Rpt: 57/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 10/16/2023	5 Payee name Hubert, Bonnie (Dr.)	
6 Amount (\$) \$639.02	7 Payee address; City; State; Zip Code 2523 Pine Acres Dr Conroe, TX 77384	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimburse for Lodging Fee for Blast and Cast Weekend
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2023	Payee name Hubert, Bonnie (Dr.)	
Amount (\$) \$934.22	Payee address; City; State; Zip Code 2523 Pine Acres Dr Conroe, TX 77384	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Event Space Booking
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/14/2023	Payee name I Promote You	
Amount (\$) \$113.39	Payee address; City; State; Zip Code 25700 I-45 North Suite 4013 The Woodlands, TX 77386	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Name Tags	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name Tags Order
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 24/44 Rpt: 58/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/10/2023	5 Payee name I Promote You	
6 Amount (\$) \$70.42	7 Payee address; City; State; Zip Code 25700 I-45 North Suite 4013 The Woodlands, TX 77386	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name Badges
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2023	Payee name Jo-Ann Stores	
Amount (\$) \$15.14	Payee address; City; State; Zip Code 25415 I-45 Ste-d Spring, TX 77380	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/16/2023	Payee name King's Inn	
Amount (\$) \$474.16	Payee address; City; State; Zip Code 1116 E County Road 2270 Rivera, TX 78379	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner with Fundraiser Shoot Participants
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 25/44 Rpt: 59/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/11/2023	5 Payee name King, Hailey (Ms.)	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 31714 Cattail Park Ct Conroe, TX 77385	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense December Campaign Management
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/18/2023	Payee name King, Hailey (Ms.)	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 31714 Cattail Park Ct Conroe, TX 77385	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Manager
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/15/2023	Payee name King, Hailey (Ms.)	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 31714 Cattail Park Ct Conroe, TX 77385	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Management
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 26/44 Rpt: 60/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
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4 Date 08/22/2023	5 Payee name King, Hailey (Ms.)
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6 Amount (\$) \$2,725.00	7 Payee address; City; State; Zip Code 31714 Cattail Park Ct Conroe, TX 77385
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Management
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/03/2023	Payee name Kirkland's
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Amount (\$) \$103.82	Payee address; City; State; Zip Code 27842 Interstate 45 N The Woodlands, TX 77385
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Fundraiser
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/01/2023	Payee name Montgomery County Hispanic Chamber
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Amount (\$) \$500.00	Payee address; City; State; Zip Code 4576 Research Forest Dr Suite 200 The Woodlands, TX 77382
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Membership	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Chamber of Commerce Membership Expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 27/44 Rpt: 61/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
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4 Date 12/07/2023	5 Payee name Montgomery County Republican Party
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6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 921 W Austin St Conroe, TX 77301
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense State Rep Filing Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/12/2023	Payee name Montgomery County Republican Women
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Amount (\$) \$50.00	Payee address; City; State; Zip Code P.O. Box 1766 Conroe, TX 77305
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Local Republican Club Networking
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/18/2023	Payee name Montgomery County Republican Women
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Amount (\$) \$55.00	Payee address; City; State; Zip Code P.O. Box 1766 Conroe, TX 77305
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch Networking Ticket
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 28/44 Rpt: 62/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
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4 Date 08/22/2023	5 Payee name Montgomery County Republican Women
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6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code P.O. Box 1766 Conroe, TX 77305
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Associate Membership Fees
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/21/2023	Payee name Montgomery County Republican Women
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Amount (\$) \$25.00	Payee address; City; State; Zip Code P.O. Box 1766 Conroe, TX 77305
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Ticket
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/06/2023	Payee name Office Depot
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Amount (\$) \$67.10	Payee address; City; State; Zip Code 907 W 5th St Austin, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting Handouts
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 29/44 Rpt: 63/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 10/08/2023	5 Payee name Office Depot	
6 Amount (\$) \$13.00	7 Payee address; City; State; Zip Code 1680 Lake Woodlands Dr Spring, TX 77380	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/08/2023	Payee name Office Depot	
Amount (\$) \$13.00	Payee address; City; State; Zip Code 1680 Lake Woodlands Dr The Woodlands, TX 77380	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/22/2023	Payee name Office Depot	
Amount (\$) \$87.40	Payee address; City; State; Zip Code 907 W 5th St Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Info Print Outs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 30/44 Rpt: 64/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/07/2023	5 Payee name PMC Parking	
6 Amount (\$) \$24.90	7 Payee address; City; State; Zip Code 313 Red River St Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking for Meeting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2023	Payee name Party City	
Amount (\$) \$39.08	Payee address; City; State; Zip Code 19189 Interstate 45 S Shenandoah, TX 77385	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Balloons for Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/02/2023	Payee name Pelagio, Cindy (Mrs.)	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 470 W Private Rd 2137 Kingsville, TX 78363	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Space Cleaner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 31/44 Rpt: 65/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/07/2023	5 Payee name Pilot Travel Hub	
6 Amount (\$) \$103.33	7 Payee address; City; State; Zip Code 2000 FM 1488 Hempstead, TX 77455	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/14/2023	Payee name Post Net	
Amount (\$) \$18.29	Payee address; City; State; Zip Code 634 E King Avenu Kingsville, TX 78363	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Guides for Shoot Fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2023	Payee name Post Net	
Amount (\$) \$80.06	Payee address; City; State; Zip Code 634 E King Avenue Kingsville, TX 78363	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Info for Fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 32/44 Rpt: 66/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 07/24/2023	5 Payee name Quickbooks Online	
6 Amount (\$) \$58.41	7 Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bookkeeping Record Software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/22/2023	Payee name Quickbooks Online	
Amount (\$) \$58.41	Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bookkeeping Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/22/2023	Payee name Quickbooks Online	
Amount (\$) \$58.41	Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 33/44 Rpt: 67/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 10/23/2023	5 Payee name Quickbooks Online	
6 Amount (\$) \$58.41	7 Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Software
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/22/2023	Payee name Quickbooks Online	
Amount (\$) \$58.41	Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Software
	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 Quickbooks Online	
Amount (\$) \$63.72	Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Software
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 34/44 Rpt: 68/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/15/2023	5 Payee name Ross, Vince (Mr.)	
6 Amount (\$) \$450.00	7 Payee address; City; State; Zip Code 11321 Grand Harbour Blvd Montgomery, TX 77356	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Auctioneer for Event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/16/2023	Payee name Signs365	
Amount (\$) \$792.90	Payee address; City; State; Zip Code 51245 Filomena Dr. Shelby Township, MI 48315	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs Purchase
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/08/2023	Payee name Signs365	
Amount (\$) \$246.50	Payee address; City; State; Zip Code 51245 Filomena Dr Shelby Township, MI 48315	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Order
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 35/44 Rpt: 69/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/06/2023	5 Payee name Signs365	
6 Amount (\$) \$3,139.00	7 Payee address; City; State; Zip Code 51245 Filomena Dr Shelby Township, MI 48315	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Purchase
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 TX Vintage Bar & Grill	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 219 Simonton St Conroe, TX 77301	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Placement for Festival
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2023	Payee name Taco Bell	
Amount (\$) \$13.92	Payee address; City; State; Zip Code 2150 FM 1488 Hempstead, TX 77445	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch with Staff
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 36/44 Rpt: 70/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/08/2023	5 Payee name Taquero Mucho	
6 Amount (\$) \$54.38	7 Payee address; City; State; Zip Code 508 West Avenue Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch with Staff
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/04/2023	Payee name Taylorized PR	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 11720 Thousand Trails Rd #94 Willis, TX 77318	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Press Release
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/12/2023	Payee name The Woodlands Republican Women	
Amount (\$) \$71.76	Payee address; City; State; Zip Code P.O. Box 7294 The Woodlands, TX 77387	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Local Organization Networking Event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 37/44 Rpt: 71/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/13/2023	5 Payee name The Woodlands Republican Women	
6 Amount (\$) \$43.05	7 Payee address; City; State; Zip Code P.O. Box 7294 The Woodlands, TX 77387	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Luncheon Tickets
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2023	Payee name Tompkins, Allie	
Amount (\$) \$84.65	Payee address; City; State; Zip Code 15 Sleeping Creek Place Conroe, TX 77384	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimburse for Event Decorations
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/21/2023	Payee name Tompkins, Allie	
Amount (\$) \$99.09	Payee address; City; State; Zip Code 15 Sleeping Creek Place Conroe, TX 77384	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flyer Reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 38/44 Rpt: 72/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/12/2023	5 Payee name Tractor Supply	
6 Amount (\$) \$489.00	7 Payee address; City; State; Zip Code 10800 Hwy 242 Conroe, TX 77385	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Signage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Posts
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/12/2023	Payee name Tractor Supply	
Amount (\$) \$23.98	Payee address; City; State; Zip Code 10800 Hwy 242 Conroe, TX 77385	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Signage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Posts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/17/2023	Payee name Ultra Screen Printing	
Amount (\$) \$201.76	Payee address; City; State; Zip Code 603 County Rd 110 Riviera, TX 78379	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense shirts and hat purchase
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 39/44 Rpt: 73/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 10/16/2023	5 Payee name Valero	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 1208 Voss Avenue Odem, TX 78370	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel for Transporting Shoot Fundraiser Participants
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/11/2023	Payee name WISE Conference	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 3 Plum Blossom Pl Spring, TX 77381	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Booth for Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/05/2023	Payee name Walling, J. Sue (Mrs.)	
Amount (\$) \$35.00	Payee address; City; State; Zip Code 7139 Edgewater Dr Willis, TX 77318	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cake for Campaign Donor Dinner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 40/44 Rpt: 74/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 10/13/2023	5 Payee name Walmart	
6 Amount (\$) \$10.76	7 Payee address; City; State; Zip Code 1133 East General Cavazos Blvd Kingsville, TX 78363	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Hunt Fundraiser
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2023	Payee name Walmart	
Amount (\$) \$176.02	Payee address; City; State; Zip Code 1133 E General Cavazos Blvd Kingsville, TX 78363	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Hunt Fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/18/2023	Payee name Walmart	
Amount (\$) \$428.86	Payee address; City; State; Zip Code 1133 E General Cavazos Blvd Kingsville, TX 78363	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Hunt Fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 41/44 Rpt: 75/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
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4 Date 11/06/2023	5 Payee name Walmart
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6 Amount (\$) \$236.62	7 Payee address; City; State; Zip Code 3040 College Park Drive The Woodlands, TX 77384
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Fundraiser
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/06/2023	Payee name Walmart
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Amount (\$) \$55.34	Payee address; City; State; Zip Code 3040 College Park Drive The Woodlands, TX 77384
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Fundraiser
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/07/2023	Payee name Walmart
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Amount (\$) \$85.65	Payee address; City; State; Zip Code 3040 College Park Drive The Woodlands, TX 77384
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser Items
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 42/44 Rpt: 76/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/10/2023	5 Payee name Walmart	
6 Amount (\$) \$512.78	7 Payee address; City; State; Zip Code 3040 College Park Drive The Woodlands, TX 77384	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2023	Payee name Walmart	
Amount (\$) \$311.76	Payee address; City; State; Zip Code 3040 College Park Drive The Woodlands, TX 77384	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Fundraising Dinner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2023	Payee name Walmart	
Amount (\$) \$16.72	Payee address; City; State; Zip Code 3040 College Park Drive The Woodlands, TX 77384	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Donor Dinner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 43/44 Rpt: 77/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 12/02/2023	5 Payee name Walmart	
6 Amount (\$) \$127.77	7 Payee address; City; State; Zip Code 3040 College Park Drive The Woodlands, TX 77384	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Donor Dinner
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/20/2023	Payee name Walmart	
Amount (\$) \$8.53	Payee address; City; State; Zip Code 3040 College Park Drive The Woodlands, TX 77384	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/18/2023	Payee name Wilhite, Cheryl (Mrs.)	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 963 E County Rd 2350 Riviera, TX 78379	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Space for Fundraiser Activity
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 44/44 Rpt: 78/79	2 FILER NAME Hubert, Stephen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395
4 Date 09/29/2023	5 Payee name Woodforest National Bank	
6 Amount (\$) \$15.00	7 Payee address; City; State; Zip Code 1330 Lake Robbins Rd. The Woodlands, TX 77380	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Card Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/24/2023	Payee name Woodlands Area Chamber of Commerce	
Amount (\$) \$350.00	Payee address; City; State; Zip Code 9320 Lakeside Blvd #200 The Woodlands, TX 77381	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tickets for Networking Event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2023	Payee name Woodlands Area Chamber of Commerce	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 9320 Lakeside Blvd #200 The Woodlands, TX 77381	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Networking Event Tickets
Complete ONLY 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 Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 79/79
2 FILER NAME Hubert, Stephen M. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087395
4 Date 11/14/2023	5 Name of person from whom amount is received Walmart	8 Amount (\$) \$169.61
	6 Address of person from whom amount is received; City; State; Zip Code The Woodlands, TX 77384	
	7 Purpose for which amount is received Refund for Not Used Items	<input type="checkbox"/> Check if political contribution returned to filer