FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00084106 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Lindsey M. B. NAME Date Received **ELECTRONICALLY FILED** 01/16/2024 NICKNAME LAST **SUFFIX** Wynne CANDIDATE / Date Hand-delivered or Date Postmarked ADDRESS / PO BOX; APT / SUITE #; ZIP CODE **OFFICEHOLDER** MAILING Receipt # Amount **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Lindsey M.B. NAME NICKNAME LAST **SUFFIX** Wynne **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); STATE: ZIP CODE APT / SUITE #; CITY; **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (469) 767-6714 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff lx| appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2023 12/31/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/05/2024 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 468 Collin District Judge District 468

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 25

| 13 C / OH NAME | Wynne, Lindsey M. E | . (The Honorable) |) | 14 Filer ID 00084106 | (Ethics Con | nmission Filers) |
|---|----------------------------------|-----------------------|--|--|---------------------------------|-----------------------|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) | candidate / officeholder. | These expenditures | s accepted or political expenditus may have been made without equired to report this information | the candidate's or of | ficeholder's kn | owledge or |
| Additional Pages | COMMITTEE TYPE | COMMITTEE NAM | 1E | | | |
| | GENERAL | | | | | |
| | | COMMITTEE ADD | RESS | | | |
| | SPECIFIC | | | | | |
| | | COMMITTEE CAN | MPAIGN TREASURER NAME | | | |
| | | COMMITTEE CAN | MPAIGN TREASURER ADDRES | SS | | |
| | | | | | | |
| 16 CONTRIBUTION TOTALS | | | ONTRIBUTIONS(OTHER THAN CONTRIBUTIONS MADE ELE | | \$ | 0.00 |
| | | ICAL CONTRIBU | | S) | \$ | 56,300.00 |
| (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE TOTALS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) TOTAL UNITEMIZED POLITICAL EXPENDITURES | | | | \$ | 0.00 | |
| | 4. TOTAL POLIT | ICAL EXPENDIT | URES | | \$ | 3,523.11 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITIC REPORTING PE | | NS MAINTAINED AS OF THE L | AST DAY OF THE | \$ | 67,954.83 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIF OF THE REPOR | | LL OUTSTANDING LOANS AS | OF THE LAST DAY | \$ | 0.00 |
| 17 AFFIDAVIT | | | | | | |
| | | | I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code. | y of perjury, that the Il information require | accompanying d to be reporte | report is ed by me |
| | | | The Honora | ble Lindsey M. B. \ | Wynne | |
| | | | Signature of | Candidate or Office | holder | |
| AFFIX NO | TARY STAMP / SEAL AB | OVE | | | | |
| | | | | , this the | | day |
| of | , 20, to c | ertify which, witness | my hand and seal of office. | | | |
| | | | | | | |
| | | | | | | |
| Signature of offi | cer administering oath | Printed name | of officer administering oath | Title of offi | cer administer | ing oath |

SUBTOTALS - JC/OH

FORM JC/OH **COVER SHEET PG 3**

| | | | 3 | of 25 |
|------------------------------|--|-----------------------------|-----------------------|----------|
| 18 FILER NAME Wynne, Lind | dsey M. B. (The Honorable) | 19 Filer ID 00084106 | (Ethics Commission Fi | lers) |
| 20 SCHEDULE S | SUBTOTALS | | SUBTOTAL AMO | UNT |
| 1. X S | SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) | | \$ 54 | ,600.00 |
| 2. X S | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ 1 | .,700.00 |
| 3. X S | SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) | | \$ 3 | 3,000.00 |
| 4. S | SCHEDULE E(J): LOANS (JUDICIAL) | | \$ | |
| 5. X S | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | 6 | \$ 3 | 3,466.12 |
| 6. S | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ | |
| 7. S | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION | ONS | \$ | |
| 8. S | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | |
| 9. X S | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | | \$ | 56.99 |
| 10. S | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS | OF C/OH | \$ | |
| 11. S | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | DNS | \$ | |
| | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER | RETURNED | \$ | |
| | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | SCHEDULE A(J)1 |
|----|--|--|---------------------------------|--|
| | The Instru | ction Guide explains how to complete this | form. | 1 Total pages Schedule A(J)1: Sch: 1/14 Rpt: 4/25 |
| 2 | FILER NAME Wynne, Lind | lsey M. B. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084106 |
| 4 | Date 08/30/2023 | Full name of contributor out-of-state PAC (ID# Albin Oldner Contributor address; City; State; Zip Code Frisco, TX 75034 | :) | 7 Amount of Contribution (\$) \$500.00 |
| 8 | Contributor's I | Principal Occupation | 9 Contributor's Job Title | |
| 10 | 0 Contributor's employer/law firm 11 Law firm of con | | 11 Law firm of contributor's sp | oouse (if any) |
| 12 | If contributor is | s a child, law firm of parent(s) (if any) | 1 | |
| | Date Obligation Full name of contributor Out-of-state PAC (ID#: | | | Amount of Contribution (\$) \$2,500.00 |
| | Contributor's I | Principal Occupation | Contributor's Job Title | |
| | Contributor's | employer/law firm | Law firm of contributor's sp | oouse (if any) |
| | If contributor is | s a child, law firm of parent(s) (if any) | 1 | |
| | Date 08/30/2023 | Full name of contributor out-of-state PAC (ID#Balekian Hayes Contributor address; City; State; Zip Code Dallas, TX 75204 | :) | Amount of Contribution (\$) \$1,000.00 |
| | Contributor's I | I Principal Occupation | Contributor's Job Title | |
| | Contributor's | employer/law firm | Law firm of contributor's sp | oouse (if any) |
| | If contributor is | s a child, law firm of parent(s) (if any) | 1 | |
| | | | | |

| | MONET | ARY POLITICAL CO | NTRIBUTIC | ONS | | SCHEDULE A | A(J)1 |
|----|---------------------------|--|-------------------------------------|---------------------------------|-------------------|--|------------|
| | The Instru | ction Guide explains how to | complete this fo | orm. | 1 | ages Schedule A(J)1 14 Rpt: 5/25 | : |
| 2 | FILER NAME Wynne, Lind | lsey M. B. (The Honorable) | | | 3 Filer ID 000841 | (Ethics Commission (Ethics Commi | on Filers) |
| 4 | Date 08/30/2023 | Full name of contributor Bedgood, Donna (Mrs.) Contributor address; City; State; Sherman, TX 75092 | out-of-state PAC (ID#:_ Zip Code | | 7 Amount | of Contribution (\$) | \$200.00 |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | | |
| | Retired | | | Retired | | | |
| 10 | Waldo Fune | employer/law firm ral Home | | 11 Law firm of contributor's sp | ouse (if any) |) | |
| 12 | If contributor is | s a child, law firm of parent(s) (if any) | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Amount | of Contribution (\$) | |
| | 08/30/2023 | Best PM LLC Contributor address; City; State; Richardson, TX 75083 | Zip Code | | | | \$1,000.00 |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | | |
| | Continuator 3 i | - ппсіраї Оссарацоп | | Contributor 3 300 Title | | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | ouse (if any) |) | |
| | If contributor is | s a child, law firm of parent(s) (if any) | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Amount | of Contribution (\$) | |
| | 08/30/2023 | Bogdanowicz Family Law Contributor address; City; State; Plano, TX 75024 | Zip Code | | | | \$1,500.00 |
| | Contributor's I | I Principal Occupation | | Contributor's Job Title | <u> </u> | | |
| | Contributor's e | employer/law firm | | Law firm of contributor's sp | ouse (if any) |) | |
| | If contributor is | s a child, law firm of parent(s) (if any) | | | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL (| CONTRIBUTIO | DNS | SCHEDULE A(J)1 |
|----|--|---|---------------------------------|------------------------------|--|
| | The Instru | ction Guide explains hov | v to complete this f | orm. | 1 Total pages Schedule A(J)1: Sch: 3/14 Rpt: 6/25 |
| 2 | FILER NAME Wynne, Lind | lsey M. B. (The Honorable) | | | 3 Filer ID (Ethics Commission Filers) 00084106 |
| 4 | Date 08/30/2023 | 5 Full name of contributor Borserine Law6 Contributor address; City; SAllen, TX 75013 | out-of-state PAC (ID#:_ | | 7 Amount of Contribution (\$) \$1,500.00 |
| 8 | Contributor's I | Principal Occupation | | 9 Contributor's Job Title | |
| 10 | O Contributor's employer/law firm 11 Law firm of | | 11 Law firm of contributor's sp | oouse (if any) | |
| 12 | If contributor is | s a child, law firm of parent(s) (if | any) | <u> </u> | |
| | Date O8/30/2023 Full name of contributor out-of-state PAC (ID#: | | | | Amount of Contribution (\$) \$1,000.00 |
| | Contributor's I | McKinney, TX 75071 Principal Occupation | | Contributor's Job Title | |
| | Contributor's e | employer/law firm | | Law firm of contributor's sp | oouse (if any) |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | |
| | Date 08/30/2023 | Full name of contributor Cantrell , Jane (Mrs.) Contributor address; City; S Sherman, TX 75092 | out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) \$100.00 |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | |
| | Housewife | | | Housewife | |
| | Housewife | employer/law firm | | Law firm of contributor's sp | oouse (if any) |
| | ii contributor i | s a child, law firm of parent(s) (if | arry) | | |
| | | | | | |

| | MONET | ARY POLITICAL (| CONTRIBUTIO | DNS | SCHEDULE A(J)1 | |
|----|---|---|---------------------------------|------------------------------|--|-----|
| | The Instru | ction Guide explains hov | v to complete this f | orm. | 1 Total pages Schedule A(J)1: Sch: 4/14 Rpt: 7/25 | |
| 2 | FILER NAME Wynne, Lind | sey M. B. (The Honorable) | | | 3 Filer ID (Ethics Commission Filers) 00084106 | |
| 4 | Date 08/30/2023 | Full name of contributor Connatser Family Law Contributor address; City; S | out-of-state PAC (ID#:_ | | 7 Amount of Contribution (\$) \$5,000 | .00 |
| 8 | Contributor's I | Dallas , TX 75219 Principal Occupation | | 9 Contributor's Job Title | | |
| 10 | O Contributor's employer/law firm 11 Law firm of contributor's | | 11 Law firm of contributor's sp | spouse (if any) | | |
| 12 | If contributor is | s a child, law firm of parent(s) (if a | any) | L | | |
| | Date 08/30/2023 | Cowles and Thompson Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) \$1,500 | .00 |
| | Contributor's I | Dallas, TX 75202 Principal Occupation | | Contributor's Job Title | | |
| | Contributor's 6 | employer/law firm | | Law firm of contributor's sp | spouse (if any) | |
| | If contributor is | s a child, law firm of parent(s) (if a | any) | | | |
| | Date 08/30/2023 | Full name of contributor Duffee & Eitzen Contributor address; City; S Dallas, TX 75219 | out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) \$1,000 | .00 |
| | Contributor's I | I Principal Occupation | | Contributor's Job Title | | |
| | Contributor's e | employer/law firm | | Law firm of contributor's sp | spouse (if any) | |
| | If contributor is | s a child, law firm of parent(s) (if a | any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL C | ONTRIBUTIO |)NS | | SCHE | EDULE A | A(J)1 |
|----|---|--|-------------------------|---------------------------------|--|--------------------------------------|-------------|------------|
| | The Instru | ction Guide explains how | to complete this f | orm. | 1 | Total pages Sche Sch: 5/14 Rpt: 8 | | L: |
| 2 | FILER NAME Wynne, Lind | dsey M. B. (The Honorable) | | | 3 | Filer ID (Ethics 00084106 | Commissi | on Filers) |
| 4 | Date 08/30/2023 | 5 Full name of contributorEpstein Family Law6 Contributor address; City; Sta | out-of-state PAC (ID#: |) | 7 | Amount of Contrib | oution (\$) | \$500.00 |
| Q | Contributor's | Dallas, TX 75225 Principal Occupation | | 9 Contributor's Job Title | <u>L</u> | | | |
| 6 | Continuator 3 r | чистран Оссиранон | | 9 CUITIDUTOLS SON LINE | | | | |
| 10 | 10 Contributor's employer/law firm 11 Law firm of contributor's s | | | 11 Law firm of contributor's sp | ous | se (if any) | | |
| 12 | If contributor is | is a child, law firm of parent(s) (if a | iny) | | _ | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | op | Amount of Contrib | bution (\$) | |
| | 08/30/2023 Garner Law Firm Contributor address; City; State; Zip Code | | | | | | \$500.00 | |
| L | McKinney, TX 75070 | | | | \perp | | | |
| | | Principal Occupation | | Contributor's Job Title | | | | |
| | Contributor's e | employer/law firm | | Law firm of contributor's sp | ous | se (if any) | | |
| | If contributor is | s a child, law firm of parent(s) (if a | iny) | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ | | П | Amount of Contrib | oution (\$) | |
| | 08/30/2023 Goranson Bain Ausley Contributor address; City; State; Zip Code Dallas, TX 75206 | | | | | | \$1,500.00 | |
| | Contributor's F | I Principal Occupation | | Contributor's Job Title | <u>. </u> | | | |
| | Contributor's 6 | employer/law firm | | Law firm of contributor's sp | ous | se (if any) | | |
| | If contributor is | is a child, law firm of parent(s) (if a | iny) | | | | | |
| | | | | | | | | |

| | MONET | ARY POLITICAL CO | NTRIBUTIC | ONS | | SCHEDULE A | A(J)1 |
|----|--|---|-------------------------------------|------------------------------|----------------------|------------------------------------|------------|
| | The Instru | ction Guide explains how to | complete this fo | orm. | 1 | ges Schedule A(J)1 14 Rpt: 9/25 | : |
| 2 | FILER NAME Wynne, Lind | sey M. B. (The Honorable) | | | 3 Filer ID 000841 | (Ethics Commission 06 | on Filers) |
| 4 | Date 08/30/2023 | Grinke Stewart 6 Contributor address; City; State; 2 | out-of-state PAC (ID#:_ Zip Code | | 7 Amount | of Contribution (\$) | \$2,500.00 |
| 8 | Contributor's I | Principal Occupation | | 9 Contributor's Job Title | | | |
| 10 | O Contributor's employer/law firm 11 Law firm of contributor's sp | | oouse (if any) | | | | |
| 12 | If contributor is | s a child, law firm of parent(s) (if any) | | | | | |
| | Date O8/30/2023 Full name of contributor out-of-state PAC (ID#: Julian Law Firm Contributor address; City; State; Zip Code | | | Amount | of Contribution (\$) | \$500.00 | |
| | Contributor's I | Flower Mound, TX 75028 Principal Occupation | | Contributor's Job Title | | | |
| | Contributor's 6 | employer/law firm | | Law firm of contributor's sp | oouse (if any) | | |
| | If contributor is | s a child, law firm of parent(s) (if any) | | | | | |
| | Date 08/30/2023 | Full name of contributor Katie Lewis Family Law Contributor address; City; State; 2 | out-of-state PAC (ID#:_ Zip Code |) | Amount | of Contribution (\$) | \$1,000.00 |
| | Contributor's I | I Principal Occupation | | Contributor's Job Title | | | |
| | Contributor's e | employer/law firm | | Law firm of contributor's sp | oouse (if any) | | |
| | If contributor is | s a child, law firm of parent(s) (if any) | | | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CO | NTRIBUTIC | ONS | SCHEDULE A(J)1 |
|----|---|---|-------------------------------------|------------------------------|---|
| | The Instru | ction Guide explains how to | complete this f | orm. | 1 Total pages Schedule A(J)1: Sch: 7/14 Rpt: 10/25 |
| 2 | FILER NAME Wynne, Lind | sey M. B. (The Honorable) | | | 3 Filer ID (Ethics Commission Filers) 00084106 |
| 4 | Date 08/30/2023 | Keeping the Peace 6 Contributor address; City; State; | out-of-state PAC (ID#:_ Zip Code | | 7 Amount of Contribution (\$) \$500.00 |
| Q | Contributor's I | McKinney, TX 75071 Principal Occupation | | 9 Contributor's Job Title | |
| Ü | Contributor 3 i | тпораг Оссираноп | | Continuator 3 300 Title | |
| 10 | O Contributor's employer/law firm 11 Law firm | | 11 Law firm of contributor's sp | pouse (if any) | |
| 12 | If contributor is | s a child, law firm of parent(s) (if any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| | 08/30/2023 | Koons Fuller, PC Contributor address; City; State; Dallas, TX 75202 | Zip Code | | \$2,500.00 |
| | Contributorio | | | Contributorio Joh Titlo | |
| | Contributors | Principal Occupation | | Contributor's Job Title | |
| | Contributor's 6 | employer/law firm | | Law firm of contributor's sp | pouse (if any) |
| | If contributor is | s a child, law firm of parent(s) (if any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| | 08/30/2023 | Law Office of Natalie Gregg F Contributor address; City; State; | | | \$2,500.00 |
| | | Allen, TX 75013 | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | |
| | Contributor's e | employer/law firm | | Law firm of contributor's sp | pouse (if any) |
| | If contributor is | s a child, law firm of parent(s) (if any) | | | |
| | | | | | |

| | MONET | ARY POLITICAL C | ONTRIBUTIO | ONS | | SCHEDULE A | A(J)1 |
|----|--|--|---|------------------------------|----------------------|-------------------------------------|------------|
| | The Instru | ction Guide explains how | to complete this f | orm. | 1 | ges Schedule A(J)1 14 Rpt: 11/25 | : |
| 2 | FILER NAME Wynne, Lind | sey M. B. (The Honorable) | | | 3 Filer ID 000841 | (Ethics Commission | on Filers) |
| 4 | Date 08/30/2023 | 5 Full name of contributor [Lewis Passons and Darnel6 Contributor address; City; Sta | |) | 7 Amount | of Contribution (\$) | \$1,000.00 |
| 8 | Contributor's F | Denton, TX 76201 Principal Occupation | | 9 Contributor's Job Title | | | |
| 10 | Contributor's employer/law firm 11 Law firm of contributor's sp | | oouse (if any) |) | | | |
| 12 | ! If contributor is | s a child, law firm of parent(s) (if an | у) | | | | |
| | Date 08/30/2023 | D8/30/2023 Li Family Law Contributor address; City; State; Zip Code | | Amount | of Contribution (\$) | \$1,000.00 | |
| | Contributor's I | Plano, TX 75024 Principal Occupation | | Contributor's Job Title | | | |
| | Contributor's e | employer/law firm | | Law firm of contributor's sp | oouse (if any) |) | |
| | If contributor is | s a child, law firm of parent(s) (if an | y) | | | | |
| | Date 08/30/2023 | Full name of contributor Lisa Garza Family Law Contributor address; City; Sta Dallas, TX 75254 | out-of-state PAC (ID#:_ te; Zip Code |) | Amount | of Contribution (\$) | \$1,000.00 |
| | Contributor's I | I Principal Occupation | | Contributor's Job Title | | | |
| | Contributor's e | employer/law firm | | Law firm of contributor's sp | oouse (if any) |) | |
| | If contributor is | s a child, law firm of parent(s) (if an | y) | | | | |
| | | | | | | | |

| | MONET | TARY POLITICAL CONTRIBUTI | ONS | SCHEDULE A(J)1 |
|----|---|---|------------------------------|---|
| | The Instru | ction Guide explains how to complete this | s form. | 1 Total pages Schedule A(J)1: Sch: 9/14 Rpt: 12/25 |
| 2 | FILER NAME Wynne, Lind | dsey M. B. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084106 |
| 4 | Date 08/30/2023 | Full name of contributor out-of-state PAC (ID McClure Law Group PC Contributor address; City; State; Zip Code | #:) | 7 Amount of Contribution (\$) \$2,500.00 |
| 0 | Contributor's | Dallas, TX 75225 | 2 Contributorio Joh Titlo | |
| ō | CONTINUION 5 F | Principal Occupation | 9 Contributor's Job Title | |
| 10 | O Contributor's employer/law firm 11 Law firm of contributor's sp | | | pouse (if any) |
| 12 | If contributor is | is a child, law firm of parent(s) (if any) | | |
| | Date | Full name of contributor out-of-state PAC (ID | #:) | Amount of Contribution (\$) |
| | 08/30/2023 Michael C. Wynne LLC Contributor address; City; State; Zip Code | | \$2,000.00 | |
| | | Sherman, TX 75092 | | |
| | Contributor's F | Principal Occupation | Contributor's Job Title | • |
| | Contributor's 6 | employer/law firm | Law firm of contributor's sp | pouse (if any) |
| | If contributor is | is a child, law firm of parent(s) (if any) | | |
| | Date | Full name of contributor uut-of-state PAC (ID | | Amount of Contribution (\$) |
| | 08/30/2023 | Orsinger Nelson Downing & Anderson, LLP | | \$2,500.00 |
| | | Contributor address; City; State; Zip Code Dallas, TX 75225 | | |
| | Contributor's F | Principal Occupation | Contributor's Job Title | 1 |
| | Contributor's 6 | employer/law firm | Law firm of contributor's sp | pouse (if any) |
| | If contributor is | is a child, law firm of parent(s) (if any) | | |
| | | | | |

| | MONET | ARY POLITICAL CON | NTRIBUTIC | ONS | | SCHEDULE A | A(J)1 |
|----|---|---|-----------------------------------|------------------------------|-----------------------|---|------------|
| | The Instru | ction Guide explains how to c | omplete this f | orm. | | ages Schedule A(J)1 .0/14 Rpt: 13/25 | : |
| 2 | FILER NAME Wynne, Lind | sey M. B. (The Honorable) | | | 3 Filer ID 00084 | (Ethics Commission 106 | on Filers) |
| 4 | Date 08/30/2023 | 5 Full name of contributor | ut-of-state PAC (ID#:_ ip Code |) | 7 Amour | t of Contribution (\$) | \$2,500.00 |
| 8 | Contributor's I | Principal Occupation | | 9 Contributor's Job Title | | | |
| 10 | O Contributor's employer/law firm 11 Law firm of cont | | 11 Law firm of contributor's sp | ouse (if any | /) | | |
| 12 | If contributor is | s a child, law firm of parent(s) (if any) | | | | | |
| | Date O8/30/2023 Full name of contributor out-of-state PAC (ID#: | | | | Amour | nt of Contribution (\$) | \$1,000.00 |
| | Contributor's I | Plano, TX 75024 Principal Occupation | | Contributor's Job Title | | | |
| | Finance | - ппораг Оссирацоп | | Manager | | | |
| | Contributor's 6 | employer/law firm s a child, law firm of parent(s) (if any) | | Law firm of contributor's sp | oouse (if an <u>y</u> | /) | |
| | Date | Full name of contributor 0 | ut-of-state PAC (ID#:_ | | Amour | t of Contribution (\$) | |
| | 08/30/2023 | Philips and Epperson Contributor address; City; State; Z McKinney, TX 75071 | | | Amour | it of Contribution (\$) | \$2,500.00 |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | | |
| | Contributor's e | employer/law firm | | Law firm of contributor's sp | ouse (if any | /) | |
| | If contributor is | s a child, law firm of parent(s) (if any) | | | | | |
| | | | | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A(J)1 | | |
|------------------------------------|---|---|-------------------------|---------------------------------|-------------------|---------------------------------------|-----------|--|
| | The Instru | ction Guide explains how | v to complete this f | orm. | 1 | ges Schedule A(J)1: /14 Rpt: 14/25 | | |
| 2 | FILER NAME Wynne, Lind | sey M. B. (The Honorable) | | | 3 Filer ID 000841 | (Ethics Commissio | n Filers) | |
| 4 | Date 08/30/2023 | 6 Contributor address; City; State; Zip Code Allen, TX 75013 | | | 7 Amount | of Contribution (\$) | \$500.00 | |
| 8 | Contributor's I | Principal Occupation | | 9 Contributor's Job Title | | | | |
| 10 | O Contributor's employer/law firm 11 Law firm of contributor's | | | 11 Law firm of contributor's sp | oouse (if any) | | | |
| 12 | ! If contributor is | s a child, law firm of parent(s) (if a | any) | <u> </u> | | | | |
| | Date 08/30/2023 | Full name of contributor Richardson Brown Contributor address; City; S | out-of-state PAC (ID#:_ | | Amount | of Contribution (\$) | \$500.00 | |
| | Contributor's I | Allen, TX 75013 Principal Occupation | | Contributor's Job Title | | | | |
| | Contributor's 6 | employer/law firm | | Law firm of contributor's sp | oouse (if any) | | | |
| | If contributor is | s a child, law firm of parent(s) (if a | any) | | | | | |
| | Date 08/30/2023 | Full name of contributor Ryan, Steve (Mr.) Contributor address; City; S Coppell, TX 75019 | out-of-state PAC (ID#:_ |) | Amount | of Contribution (\$) | \$300.00 | |
| Contributor's Principal Occupation | | Contributor's Job Title | 1 | | | | | |
| | Retired | employer/law firm s a child, law firm of parent(s) (if a | any) | Law firm of contributor's sp | oouse (if any) | | | |
| | | | | | | | | |

| MONET | ARY POLITICAL (| CONTRIBUTIO | ONS | SCHEDULE A(J)1 |
|---------------------|--|-------------------------|---------------------------------|--|
| The Instru | ction Guide explains how | v to complete this f | orm. | 1 Total pages Schedule A(J)1: Sch: 12/14 Rpt: 15/25 |
| 2 FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) 00084106 |
| | Isey M. B. (The Honorable) | | | |
| 4 Date | 5 Full name of contributor | out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) |
| 08/30/2023 | Scheef and Stone | | | \$1,500.00 |
| | 6 Contributor address; City; S | tate; Zip Code | | |
| | Frisco, TX 75034 | | | |
| 8 Contributor's | Principal Occupation | | 9 Contributor's Job Title | |
| 10 Contributor's | employer/law firm | | 11 Law firm of contributor's sp | pouse (if any) |
| 12 If contributor i | s a child, law firm of parent(s) (if a | any) | | |
| | | | | |
| Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 08/30/2023 | 08/30/2023 Schmitz Loyd and Paul | | | \$1,000.00 |
| | Contributor address; City; S | tate; Zip Code | | |
| | McKinney, TX 75070 | | T = | |
| Contributor's | Principal Occupation | | Contributor's Job Title | |
| Contributor's | employer/law firm | | Law firm of contributor's sp | oouse (if any) |
| If contributor i | s a child, law firm of parent(s) (if a | any) | | |
| Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 08/30/2023 | Stoolfire, Bobbye (Mrs.) | | | \$500.00 |
| | Contributor address; City; S | tate; Zip Code | | |
| | Sherman, TX 75092 | | | |
| Contributor's | Principal Occupation | | Contributor's Job Title | |
| Retired | | | Retired | |
| Contributor's | employer/law firm | | Law firm of contributor's sp | oouse (if any) |
| N/A | | | | |
| If contributor i | s a child, law firm of parent(s) (if a | any) | | |
| | | | | |

| | MONET | ARY POLITICAL CONTRIBU | 'TIC | ONS | | SCHEDULE | A(J)1 |
|----|--------------------------------|---|----------|---------------------------------|----------|---|--------------|
| | The Instru | ction Guide explains how to complete t | his f | form. | 1 | Total pages Schedule A(J Sch: 13/14 Rpt: 16/25 |)1: |
| 2 | FILER NAME Wynne, Lind | lsey M. B. (The Honorable) | | | 3 | Filer ID (Ethics Commis 00084106 | sion Filers) |
| 4 | Date 08/30/2023 | Full name of contributor | ; (ID#:_ | | 7 | Amount of Contribution (\$ | \$500.00 |
| _ | O tuib utowlo (| Dallas, TX 75206 | | To Committee and Joh Title | | | |
| 8 | Contributor's F | Principal Occupation | | 9 Contributor's Job Title | | | |
| 10 | Contributor's 6 | employer/law firm | | 11 Law firm of contributor's sp | oous | se (if any) | |
| 12 | . If contributor is | s a child, law firm of parent(s) (if any) | | | | | |
| | Date | Full name of contributor out-of-state PAC | (ID#: |) | | Amount of Contribution (\$ | 5) |
| | 08/30/2023 | Utter, Gail (Ms.) Contributor address; City; State; Zip Code | | | | | \$1,000.00 |
| | | Sherman, TX 75092 | | | | | |
| | | Principal Occupation | | Contributor's Job Title | | | |
| | Finance | | | wealth manager | | | |
| | Contributor's e Wells Fargo | employer/law firm | | Law firm of contributor's sp | oous | se (if any) | |
| | If contributor is | s a child, law firm of parent(s) (if any) | | | | | |
| | Date | Full name of contributor uut-of-state PAC | (ID#:_ | | | Amount of Contribution (\$ |) |
| | 08/30/2023 | Verner Brumley Mueller Parker | | | | | \$2,500.00 |
| | | Contributor address; City; State; Zip Code Dallas, TX 75219 | | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | <u> </u> | | |
| | Contributor's 6 | employer/law firm | | Law firm of contributor's sp | oous | se (if any) | |
| | If contributor is | s a child, law firm of parent(s) (if any) | | | | | |
| | | | | | | | |

| МО | NET | ARY POLITICAL CONTI | RIBUTION | S | SCHEDULE A(J) | 1 | |
|-----------|------------------|--|-----------------|-----------------------------|--|-------|--|
| The I | Instru | ction Guide explains how to com | plete this forr | m. | 1 Total pages Schedule A(J)1: Sch: 14/14 Rpt: 17/25 | | |
| 2 FILER | | | | | 3 Filer ID (Ethics Commission Filer | ·s) | |
| Wynn | e, Lind | sey M. B. (The Honorable) | | | 00084106 | | |
| 4 Date | | 5 Full name of contributor out-of-s | state PAC (ID#: |) | 7 Amount of Contribution (\$) | | |
| 08/30 | /2023 | Wynne Esq., Thomas | | | \$1,00 | 00.00 | |
| | | 6 Contributor address; City; State; Zip Co Dallas, TX 75214 | ode | | | | |
| 8 Contril | butor's F | l Principal Occupation | 9 | Contributor's Job Title | _ | | |
| Attorn | | | | Attorney | | | |
| | | employer/law firm | 11 | Law firm of contributor's s | snouse (if any) | | |
| | Milner and Wynne | | | | spouse (ii dily) | | |
| | | s a child, law firm of parent(s) (if any) | 1 | | | | |
| Date | | Full name of contributor out-of-s | state PAC (ID#: | | Amount of Contribution (\$) | | |
| 08/30 | /2023 | Wynne and Smith | | | \$50 | 00.00 | |
| | | Contributor address; City; State; Zip Co | ode | | | | |
| | | Sherman, TX 75091 | | | | | |
| Contril | butor's F | Principal Occupation | | Contributor's Job Title | • | | |
| Contril | butor's e | employer/law firm | | Law firm of contributor's s | spouse (if any) | | |
| If conti | ributor is | s a child, law firm of parent(s) (if any) | | | | | |
| | | | | | | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| The Instru | iction Guide explains how to complete this f | form. | | al pages Sch : 1/1 Rpt: | |
|-------------------|---|--|------------|-------------------------------|---|
| 2 FILER NAME | | | | | s Commission Filers) |
| | Wynne, Lindsey M. B. (The Honorable) | | | | , |
| 4 TOTAL OF | TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | | | |
| 5 Date | 6 Full name of contributor out-of-state PAC (ID#: |) | | ount of ribution (\$) | 9 In-kind contribution description |
| 08/30/2023 | modalioni zaw i mii | | | \$500.00 | Providing the event venue |
| | 7 Contributor address; City; State; Zip Code | | | | space for the fundraiser kickoff |
| | | | | | KICKUII |
| | Frisco, TX 75034 | | | I Check if travel o | utside of Texas. Complete Schedule T. |
| 10 Principal occu | upation / Job title (FOR NON-JUDICIAL) (See instructions) | 11 Employer (FOR NON | I-JUDICI/ | AL) (See in | nstructions) |
| 12 Contributor's | principal occupation (FOR JUDICIAL) | 13 Contributor's job title | (FOR JU | DICIAL) | (See instructions) |
| 14 Contributor's | employer/law firm (FOR JUDICIAL) | 15 Law firm of contributo | or's spous | se (if any) (F | FOR JUDICIAL) |
| 16 If contributor | is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | l | | | |
| | | | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | | ount of | In-kind contribution |
| 08/30/2023 | McCathern Law Firm | | | contribution (\$) | |
| | Contributor address; City; State; Zip Code | | | | Food and Beverages for the Fundraiser Event |
| | | | | | |
| | Frisco, TX 75034 | | | l Dheck if travel o | utside of Texas. Complete Schedule T. |
| Principal occu | upation / Job title (FOR NON-JUDICIAL) (See instructions) | Employer (FOR NON | I-JUDICI/ | AL) (See in | nstructions) |
| Contributor's | principal occupation (FOR JUDICIAL) | Contributor's job title | (FOR JU | JDICIAL) | (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) | l | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| I | | | | | |

| PLEDGE | D CONTRIBUTIONS (JUDIO | CIAL) | | SCHEDULE B(J) | |
|--|--|------------------------|---|--|--|
| The Ins | struction Guide explains how to com | plete this form. | te this form. 1 Total pages Sche Sch: 1/2 Rpt: 1 | | |
| 2 FILER NAME | | | 3 Filer ID (Eth | nics Commission Filers) | |
| Wynne, Lindse | ey M. B. (The Honorable) | | 00084106 | | |
| 4 TOTAL OF U | JNITEMIZED PLEDGES | | • | \$ 0.00 | |
| 5 Date | 6 Full name of pledgor out-of-state PAC (I | ID#:) | 8 Amount of | 9 In-kind description | |
| | Bowman, Laci | | pledge (\$) | (If applicable) | |
| 08/30/2023 | 7 Pledgor Address; City; State; 2 | | \$500.00 | i ! ! | |
| | Dallas, TX 75201 | | Check if travel out | i side of Texas. Complete Schedule T | |
| 10 Pledgor's princip | al occupation | 11 Pledgor's job title | oneak ii aaver oad | Side of Texas. Complete Concade 1 | |
| Attorney | | Shareholder | | | |
| 12 Pledgor's employer/law firm 13 Law firm of pledgo | | | s spouse (if any) | | |
| Godwin Bowm | nan | Godwin Bowman | | | |
| 14 If pledgor is a ch | nild, law firm of parent(s) (if any) | ' | | | |
| Date | Full name of pledgor out-of-state PAC (I | ID#:) | Amount of | In-kind description | |
| | Pfister Family Law | | pledge (\$) | (If applicable) | |
| | Pledgor Address; City; State; 2 | Zip Code | \$1,000.00 | Pledged \$1000 for Silver Sponsorship of | |
| 08/30/2023 | | | | Campaign Fundraiser - Funds not received by | |
| | Frisco, TX 75034 | | Check if travel out | side of Texas. Complete Schedule T | |
| Pledgor's princip | pal occupation | Pledgor's job title | | | |
| Pledgor's emplo | oyer/law firm | Law firm of pledgor's | s spouse (if any) | | |
| If pledgor is a ch | nild, law firm of parent(s) (if any) | | | | |
| Date | Full name of pledgor out-of-state PAC (I | ID#:) | Amount of | In-kind description | |
| | The Ramage Law Group | | pledge (\$) | (If applicable) | |
| | Pledgor Address; City; State; 2 | Zip Code | \$500.00 | Pledged \$500 Bronze | |
| 08/30/2023 | | | | sponsorship of campaign fundraiser - funds not received by | |
| | McKinney, TX 75070 | | Check if travel out | side of Texas. Complete Schedule T | |
| Pledgor's princip | pal occupation | Pledgor's job title | . — | | |
| Pledgor's emplo | oyer/law firm | Law firm of pledgor's | s spouse (if any) | | |
| If pledgor is a ch | nild, law firm of parent(s) (if any) | | | | |
| | | | | | |
| | | | | | |

| PLEDGED | CONTRIBUTION | NS (JUDICIA | AL) | | SCHE | DULE B(J) | |
|--------------------------------|---|---|--------------------------|---|--|--|--|
| The Instr | ruction Guide explains | how to complet | te this form. | 1 Total pages Schedule B(J): Sch: 2/2 Rpt: 20/25 | | | |
| 2 FILER NAME Wynne, Lindsey | FILER NAME Wynne, Lindsey M. B. (The Honorable) | | | 3 Filer ID (Eth 00084106 | nics Commiss | ion Filers) | |
| 4 TOTAL OF UN | ITEMIZED PLEDGES | | | | \$ | 0.00 | |
| 5 Date 08/30/2023 | 6 Full name of pledgor Webb Family Law7 Pledgor Address; | out-of-state PAC (ID#:_ City; State; Zip (| Code | 8 Amount of pledge (\$) \$1,000.00 | l (If a I Pledg I Spons I campa | d description pplicable) ed \$1000 Silver sorship of aign fundraiser - not received by | |
| | Dallas, TX 75201 | | | Check if travel out | side of Texas | . Complete Schedule T. | |
| 10 Pledgor's principal | occupation | | 11 Pledgor's job title | | | | |
| 12 Pledgor's employe | r/law firm | | 13 Law firm of pledgor's | spouse (if any) | | | |
| 14 If pledgor is a child | l, law firm of parent(s) (if any) | | l | | | | |
| | | | | | | | |

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

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

| | Credit Card Payment | The Instruction Guide explains how to comple | ete this form. | | | |
|---|--|--|----------------|------------|--|----------------------------|
| 1 | Total pages Schedule F1: | 2 FILER NAME | | 3 | Filer ID | (Ethics Commission Filers) |
| | Sch: 1/4 Rpt: 21/25 | Wynne, Lindsey M. B. (The Honorable) | | | 00084106 | |
| 4 | Date | 5 Payee name | | | | |
| | 12/06/2023 | Collin County Republican Party | | | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | | | | |
| | \$1,500.00 | 2963 W. 15th St. Suite 2981 | | | | |
| | | Pl TV 75075 | | | | |
| _ | | Plano, TX 75075 | | | | |
| 8 | PURPOSE OF | , , , | Description | avel outsi | ide of Texas. Com | nlete Schedule T |
| | EXPENDITURE | Filing Fee for ballot | ш | | , officeholder living | |
| | | | Filing fee t | or pla | ce on ballot | for election |
| | | | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought | | | Office he | eld |
| | experientare to benefit G/O | ' | | | | |
| | Date | Payee name | | | | |
| | 11/09/2023 | Go Daddy | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | | |
| | \$70.32 | 14455 N. Hayden Rd. | | | | |
| | | Suite 219 | | | | |
| | | Scottsdale, AZ 85260 | | | | |
| | PURPOSE OF | , | Description | | | |
| | EXPENDITURE | Advertising Expense | | | ide of Texas. Com , officeholder living | |
| | | | _ | | n expenses | • |
| | | | | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought | | | Office he | eld |
| | expenditure to benefit C/Ol | 1 | | | | |
| | Date | Payee name | | | | |
| | 12/15/2023 | McCathern Law Firm | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | | |
| | \$1,217.00 | One Cowboys Way | | | | |
| | | Suite 175 | | | | |
| | | Frisco, TX 75034 | | | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) | Description | | | |
| | OF EXPENDITURE | Event Expense | | | ide of Texas. Com , officeholder living | |
| | | | | | | each of McCathern for |
| | | | | | | er that exceeded in-kind |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought | | | Office he | eld |
| | expenditure to benefit C/O | - - | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense

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

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 2/4 Rpt: 22/25 | Wynne, Lindsey M. B. (The Honorable) 00084106 |
| 4 | Date | 5 Payee name |
| | 08/30/2023 | PayPal |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$19.10 | 2211 N. 1st Street |
| | | |
| | | San Jose, CA 95131 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Credit Card fee for contribution made through PayPal |
| | | Credit Card ree for contribution made throught ayr ar |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| Г | Date | Payee name |
| | 08/20/2023 | Square |
| Г | Amount (\$) | Payee address; City; State; Zip Code |
| | \$14.80 | 1455 Market Street |
| | | |
| | | San Francisco, CA 94103 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Credit card fee through Square app |
| | | Credit card fee through Square app |
| ⊢ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| H | Date | Payee name |
| | 08/23/2023 | Square |
| H | Amount (\$) | Payee address; City; State; Zip Code |
| | \$9.00 | 1455 Market Street |
| | φ9.00 | 1455 Market Street |
| | | San Francisco, CA 94103 |
| H | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF | Fees Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | | Credit card fee through Square app |
| | | |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | experiulture to beriefft C/Of | 1 |
| | | |
| | | |
| - | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Printing Expense Salaries/Wages/Contract Labor

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

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/4 Rpt: 23/25 Wynne, Lindsey M. B. (The Honorable) 00084106 4 Date Payee name 08/24/2023 Square 6 Amount (\$) Payee address; State; Zip Code \$29.30 1455 Market Street San Francisco, CA 94103 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Credit card fee through Square app Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/27/2023 Square Amount (\$) Payee address; City; State; Zip Code \$29.30 1455 Market Street San Francisco, CA 94103 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense credit card processing fee through Square app Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/30/2023 Square Amount (\$) Payee address: City; State; Zip Code \$29.30 1455 Market Street San Francisco, CA 94103 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Theck if Austin, TX, officeholder living expense Credit card fee through Square app Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

| | Candidate/Officeholder/Politica Credit Card Payment | Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. | | | | | |
|---|--|---|--|--|--|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) | | | | | |
| | Sch: 4/4 Rpt: 24/25 | Wynne, Lindsey M. B. (The Honorable) 00084106 | | | | | |
| 4 | Date | 5 Payee name | | | | | |
| | 12/29/2023 | True Compass | | | | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | | | | | |
| | \$300.00 | 2006 Cori Pl | | | | | |
| | | | | | | | |
| | | Sachse, TX 75048 | | | | | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | |
| | OF EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. | | | | | |
| | | Check if Austin, TX, officeholder living expense Website hosting expenses | | | | | |
| | | Tresente needing expenses | | | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | | | | | |
| | expenditure to benefit C/OI | H | | | | | |
| | Date | Payee name | | | | | |
| | 11/06/2023 | USPS | | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | | | |
| | \$248.00 | 7210 Virginia Pkwy | | | | | |
| | | Suite 100 | | | | | |
| | | McKinney, TX 75701 | | | | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | |
| | OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. | | | | | |
| | | Check if Austin, TX, officeholder living expense Post office box rental | | | | | |
| | | T GGC GIIIGG BOX TOTAL | | | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | | | | | |
| | expenditure to benefit C/OI | H | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Filer ID Total pages Schedule G: FILER NAME (Ethics Commission Filers) Sch: 1/1 Rpt: 25/25 Wynne, Lindsey M. B. (The Honorable) 00084106 Date Payee name 07/19/2023 **Greetings Island** Amount (\$) Payee address; City; State; Zip Code \$6.99 66 Monroe Roof Garde Reimbursement from political contributions Х intended Memphis, TN 38103 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Solicitation/Fundraising Expense **EXPENDITURE** Invitation design cost for fundraiser Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/21/2023 RTS Connect LLC Amount (\$) Payee address; City; State; Zip Code \$50.00 1306 Cecilia st Reimbursement from political contributions Χ Taylor, TX 76574 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Portrait expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH