

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM **JC/OH**
COVER SHEET PG 1

| | | | | |
|---|---|---|--|--|
| The JC/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00069799 | 2 Total pages filed: 46 | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR The Honorable | FIRST Austin Reeve | MI | OFFICE USE ONLY |
| | NICKNAME | LAST Jackson | SUFFIX | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE | | | Date Hand-delivered or Date Postmarked |
| | REDACTED PER 254.0313, GOV'T CODE | | | Receipt # _____ Amount _____ |
| | | | | Date Processed _____ |
| | | | | Date Imaged _____ |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR Mr. | FIRST Shawn | MI | |
| | NICKNAME | LAST Dunn | SUFFIX | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE | | | |
| | REDACTED PER 254.0313, GOV'T CODE | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION | |
| | (405) | 830-4099 | | |
| 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 | | ELECTION TYPE | |
| | Month Day Year | | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other | |
| | 03/05/2024 | <input type="checkbox"/> General | <input type="checkbox"/> Special | |
| 11 OFFICE | OFFICE HELD (if any) District Judge District 114 Smith | | 12 OFFICE SOUGHT (if known) District Judge District 114 | |

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 46

13 C / OH NAME Jackson, Austin Reeve (The Honorable) **14 Filer ID** (Ethics Commission Filers)
00069799

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

Additional Pages

| | |
|--|---|
| COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | 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) | \$ | 28,116.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 19,835.08 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 31,044.13 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 11,500.00 |

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.

The Honorable Austin Reeve Jackson

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

SUBTOTALS - JC/OH

| | | | |
|---|--|--------------------------------|----------------------------|
| 18 FILER NAME Jackson, Austin Reeve (The Honorable) | | 19 Filer ID 00069799 | (Ethics Commission Filers) |
| 20 SCHEDULE SUBTOTALS | | | SUBTOTAL AMOUNT |
| NAME OF SCHEDULE | | | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) | \$ | 28,116.00 |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | |
| 3. | <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) | \$ | |
| 4. | <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) | \$ | |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | 15,427.72 |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ | |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ | |
| 8. | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ | 4,407.36 |
| 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 | \$ | 100.00 |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 1/22 Rpt: 4/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 08/17/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Kyna | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Tyler, TX 75701 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Christus Heath | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 08/08/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Adam | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75703 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Allen Thauwald | | Law firm of contributor's spouse (if any) Martin Walker |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 08/30/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Duane | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75701 | |
| Contributor's Principal Occupation Surgeon | | Contributor's Job Title Surgeon |
| Contributor's employer/law firm CHRISTUS | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 2/22 Rpt: 5/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 09/19/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Joel | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code Tyler, TX 75702 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Murphy & Baker Law Firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Craig | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Longview, TX 75608 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boren, Kelcy | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75703 | |
| Contributor's Principal Occupation President | | Contributor's Job Title President |
| Contributor's employer/law firm Boren Energy Services LLC | | Law firm of contributor's spouse (if any) Mishae Boren |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 3/22 Rpt: 6/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 09/06/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bosworth, Michael | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code Tyler, TX 75711 | |
| 8 Contributor's Principal Occupation Insurance Agent | | 9 Contributor's Job Title Insurance Agent |
| 10 Contributor's employer/law firm Bosworth and Associates | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 07/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyd, Paul | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75703 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Boyd Boyd & Giddens | | Law firm of contributor's spouse (if any) Boyd Boyd & Giddens |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/01/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Lindsey | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75252 | |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 4/22 Rpt: 7/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 09/07/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Alan | 7 Amount of Contribution (\$) \$100.00 |
| 6 Contributor address; City; State; Zip Code Tyler, TX 75703 | | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Ramey & Flock, PC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/15/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Tom | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code Tyler, TX 75701 | | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Tom J. Brown Law PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/07/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Todd | Amount of Contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code Flint, TX 75762 | | |
| Contributor's Principal Occupation President | | Contributor's Job Title President |
| Contributor's employer/law firm Greater Texas Capital Corp | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 5/22 Rpt: 8/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 11/16/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burleson, Judy <hr/> 6 Contributor address; City; State; Zip Code Hideaway, TX 75771 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's Principal Occupation Retired | | 9 Contributor's Job Title Retired |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/12/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burt, Allen <hr/> Contributor address; City; State; Zip Code Tyler, TX 75703 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Otis <hr/> Contributor address; City; State; Zip Code Tyler, TX 75703 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Carroll Maloney Henry & Nelson PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 6/22 Rpt: 9/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 07/13/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Collen | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code Troup, TX 75789 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Clark von Plonski Anderson | | 11 Law firm of contributor's spouse (if any) Clark von Plonski Anderson |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cozby, Raymond | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75703 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Raymond W. Cozby III PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Louise | Amount of Contribution (\$) \$400.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75707 | |
| Contributor's Principal Occupation Head of School | | Contributor's Job Title Head of School |
| Contributor's employer/law firm Oak Forest Montessori School | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 7/22 Rpt: 10/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 09/05/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Embry, Jeff | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code Tyler, TX 75702 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Embry Law PC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/07/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faulkner, Bruce | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75702 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/11/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flowers, Celia | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75701 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Flowers Davis PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 8/22 Rpt: 11/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 09/22/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forester, Samuel | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Longview, TX 75604 | |
| 8 Contributor's Principal Occupation Retired | | 9 Contributor's Job Title Retired |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 08/31/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gauna, Alejandro | Amount of Contribution (\$) \$15.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75701 | |
| Contributor's Principal Occupation Polysomnographer | | Contributor's Job Title Polysomnographer |
| Contributor's employer/law firm UT Health East Texas | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/23/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glenney, Chris | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75707 | |
| Contributor's Principal Occupation Administration | | Contributor's Job Title Administration |
| Contributor's employer/law firm CHRISTUS | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 9/22 Rpt: 12/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 08/23/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grant and Flanery PC 6 Contributor address; City; State; Zip Code Tyler, TX 75702 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Brett Contributor address; City; State; Zip Code Tyler, TX 75703 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Bain Files | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/16/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hays, Thomas Contributor address; City; State; Zip Code Tyler, TX 75701 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 10/22 Rpt: 13/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 07/16/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hene, Stuart | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code Tyler, TX 75702 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Tarry & Hene PLLC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/27/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Iglesias, David | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75701 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Iglesias Law Firm | | Law firm of contributor's spouse (if any) Iglesias Law Firm |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/08/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Russell | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75703 | |
| Contributor's Principal Occupation Geologist | | Contributor's Job Title Geologist |
| Contributor's employer/law firm Tyler Oil & Gas | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 11/22 Rpt: 14/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 08/07/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Clint | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code Tyler, TX 75703 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Clint James PC | | 11 Law firm of contributor's spouse (if any) Clint James PC |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 07/06/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Madeline | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75703 | |
| Contributor's Principal Occupation Office Manager | | Contributor's Job Title Office Manager |
| Contributor's employer/law firm Law Offices of Eric D. Jensen | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 07/31/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Camden | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75703 | |
| Contributor's Principal Occupation Owner | | Contributor's Job Title Owner |
| Contributor's employer/law firm Velocity Mazda | | Law firm of contributor's spouse (if any) Clark von Plonski Anderson |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 12/22 Rpt: 15/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 07/31/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Linda | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code Tyler, TX 75703 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Clark von Plonski Anderson | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 08/31/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin Eltife Campaign | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75702 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 08/22/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lavender, Micheal | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75703 | |
| Contributor's Principal Occupation Owner | | Contributor's Job Title Owner |
| Contributor's employer/law firm Micheal Lavender & Co. | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 13/22 Rpt: 16/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 08/22/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Collin | 7 Amount of Contribution (\$) \$250.00 |
| 6 Contributor address; City; State; Zip Code Tyler, TX 75703 | | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Carroll Maloney Henry & Nelson PLLC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Matthew | Amount of Contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code Tyler, TX 75703 | | |
| Contributor's Principal Occupation Owner | | Contributor's Job Title Owner |
| Contributor's employer/law firm Drake Real Estate & Investments | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 07/13/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCain, Elizabeth | Amount of Contribution (\$) \$1,000.00 |
| Contributor address; City; State; Zip Code Troup, TX 75789 | | |
| Contributor's Principal Occupation Real Estate Agent | | Contributor's Job Title Real Estate Agent |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 14/22 Rpt: 17/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 09/21/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuire Firm <hr/> 6 Contributor address; City; State; Zip Code Tyler, TX 75702 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/19/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McSwane, Doug <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Potter Minton | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/12/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melontree, Beverly <hr/> Contributor address; City; State; Zip Code Tyler, TX 75702 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 15/22 Rpt: 18/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 09/21/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milam, Matthew | 7 Amount of Contribution (\$) \$100.00 |
| 6 Contributor address; City; State; Zip Code Tyler, TX 75701 | | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Roberts & Roberts | | 11 Law firm of contributor's spouse (if any) Ramey and Flock |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millsagle, Matthew | Amount of Contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code Tyler, TX 75701 | | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Files Harrison PC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/07/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, John | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Whitehouse, TX 75791 | | |
| Contributor's Principal Occupation Commissioner | | Contributor's Job Title Commissioner |
| Contributor's employer/law firm Smith County | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 16/22 Rpt: 19/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 09/21/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Kyle | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code Tyler, TX 75703 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Carroll Maloney Henry & Nelson PLLC | | 11 Law firm of contributor's spouse (if any) Carroll Maloney Henry and Nelson PLLC |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 12/06/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nix, John | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75703 | |
| Contributor's Principal Occupation President | | Contributor's Job Title President |
| Contributor's employer/law firm Nix Construction Inc. | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/07/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patteson, Richard | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75702 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Patteson Law | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 17/22 Rpt: 20/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 09/05/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, James | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code Tyler, TX 75711 | |
| 8 Contributor's Principal Occupation Bank President | | 9 Contributor's Job Title Bank President |
| 10 Contributor's employer/law firm Citizens 1st Bank | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 12/29/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pesina, Nicanor | Amount of Contribution (\$) \$750.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75702 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Pesina Law Firm PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 07/06/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Podany, Elizabeth | Amount of Contribution (\$) \$1.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75702 | |
| Contributor's Principal Occupation Operations Coordinator | | Contributor's Job Title Operations Coordinator |
| Contributor's employer/law firm CWJ Strategies | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 18/22 Rpt: 21/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 08/23/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramey and Flock PC | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code Tyler, TX 75702 | |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/01/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Robyn | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75701 | |
| Contributor's Principal Occupation President | | Contributor's Job Title President |
| Contributor's employer/law firm Robert Rogers Foundation | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Root, Brad | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75706 | |
| Contributor's Principal Occupation Owner | | Contributor's Job Title Owner |
| Contributor's employer/law firm Root Construction | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 19/22 Rpt: 22/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 08/15/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoenbrun, Ron | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code Tyler, TX 75702 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Starr Schoenbrun & Comte PLLC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/04/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelton, William | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75703 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Shelton Family Law | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/18/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shull, AE | Amount of Contribution (\$) \$200.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75703 | |
| Contributor's Principal Occupation Owner | | Contributor's Job Title Owner |
| Contributor's employer/law firm A.E. Shull & Co. | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 20/22 Rpt: 23/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 11/07/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Tim <hr/> 6 Contributor address; City; State; Zip Code Tyler, TX 75703 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Potter Minton PC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/06/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorey, Daniel <hr/> Contributor address; City; State; Zip Code Longview, TX 75601 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Sorey & Hoover LLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Mack <hr/> Contributor address; City; State; Zip Code Tyler, TX 75703 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation MD | | Contributor's Job Title MD |
| Contributor's employer/law firm Pure Radiance Med Spa | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 21/22 Rpt: 24/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 09/21/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tindel, Andy | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code Tyler, TX 75702 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm MT 2 Law Group | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/08/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villanueva, Conrado | Amount of Contribution (\$) \$150.00 |
| | Contributor address; City; State; Zip Code Cibolo, TX 78108 | |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 08/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willis, Patrick | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75711 | |
| Contributor's Principal Occupation Owner | | Contributor's Job Title Owner |
| Contributor's employer/law firm Signature Consulting | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 22/22 Rpt: 25/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 08/13/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yarbrough, Paula <hr/> 6 Contributor address; City; State; Zip Code Tyler, TX 75701 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Yarbrough Wilcox PLLC | | 11 Law firm of contributor's spouse (if any) Yarbrough Wilcox PLLC |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/08/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Michael <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701 | Amount of Contribution (\$) \$200.00 |
| Contributor's Principal Occupation Investor | | Contributor's Job Title Investor |
| Contributor's employer/law firm Self | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

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: 1/10 Rpt: 26/46 | 2 FILER NAME Jackson, Austin Reeve (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 07/06/2023 | 5 Payee name CAPITAL ONE | |
| 6 Amount (\$) \$612.50 | 7 Payee address; City; State; Zip Code PO Box 60599 Industry, CA 91716 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Payment |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/08/2023 | Payee name CAPITAL ONE | |
| Amount (\$) \$25.00 | Payee address; City; State; Zip Code PO Box 60599 Industry, CA 91716 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Payment |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/28/2023 | Payee name CAPITAL ONE | |
| Amount (\$) \$1,394.12 | Payee address; City; State; Zip Code PO Box 60599 Industry, CA 91716 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Payment |
| 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 - | 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: 2/10 Rpt: 27/46 | 2 FILER NAME Jackson, Austin Reeve (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 11/07/2023 | 5 Payee name CAPITAL ONE | |
| 6 Amount (\$) \$857.50 | 7 Payee address; City; State; Zip Code PO Box 60599 Industry, CA 91716 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Payment |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/06/2023 | Payee name CAPITAL ONE | |
| Amount (\$) \$725.12 | Payee address; City; State; Zip Code PO Box 60599 Industry, CA 91716 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Payment |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/10/2023 | Payee name Cardwell & Wansley | |
| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 314 S Broadway Ave Tyler, TX 75702 | |
| 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 Consulting/marketing |
| 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: 3/10 Rpt: 28/46 | 2 FILER NAME Jackson, Austin Reeve (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 08/09/2023 | 5 Payee name Cardwell & Wansley | |
| 6 Amount (\$) \$500.00 | 7 Payee address; City; State; Zip Code 314 S Broadway Ave Tyler, TX 75702 | |
| 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 Consulting/marketing |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/11/2023 | Payee name Cardwell & Wansley | |
| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 314 S Broadway Ave Tyler, TX 75702 | |
| 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 Consulting/marketing |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/27/2023 | Payee name Cardwell & Wansley | |
| Amount (\$) \$2,764.33 | Payee address; City; State; Zip Code 314 S Broadway Ave Tyler, TX 75702 | |
| 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 Consulting/marketing |
| 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: 4/10 Rpt: 29/46 | 2 | FILER NAME Jackson, Austin Reeve (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00069799 |
| 4 | Date 11/02/2023 | 5 | Payee name Cardwell & Wansley | | |
| 6 | Amount (\$) \$500.00 | 7 | Payee address; City; State; Zip Code 314 S Broadway Ave Tyler, TX 75702 | | |
| 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 Consulting/marketing | | |
| 9 | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 07/03/2023 | | Payee name Judge Austin Reeve, Jackson | | |
| | Amount (\$) \$2,500.00 | | Payee address; City; State; Zip Code PO Box 8355 Tyler, TX 75711 | | |
| | 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 Loan Repayment | | |
| | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 07/06/2023 | | Payee name Judge Austin Reeve, Jackson | | |
| | Amount (\$) \$2,500.00 | | Payee address; City; State; Zip Code PO Box 8355 Tyler, TX 75711 | | |
| | 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 Loan Repayment | | |
| | | 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: 5/10 Rpt: 30/46 | 2 FILER NAME Jackson, Austin Reeve (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 07/17/2023 | 5 Payee name Paypal | |
| 6 Amount (\$) \$8.24 | 7 Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131 | |
| 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 Service Fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/25/2023 | Payee name Paypal | |
| Amount (\$) \$3.38 | Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131 | |
| 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 Service Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/23/2023 | Payee name Paypal | |
| Amount (\$) \$48.70 | Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131 | |
| 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 Service Fee |
| 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: 6/10 Rpt: 31/46 | 2 FILER NAME Jackson, Austin Reeve (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 09/06/2023 | 5 Payee name Paypal | |
| 6 Amount (\$) \$45.25 | 7 Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131 | |
| 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 Service Fee |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/07/2023 | Payee name Paypal | |
| Amount (\$) \$14.48 | Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131 | |
| 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 Service Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/11/2023 | Payee name Paypal | |
| Amount (\$) \$29.88 | Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131 | |
| 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 Service Fee |
| 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: 7/10 Rpt: 32/46 | 2 FILER NAME Jackson, Austin Reeve (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 09/13/2023 | 5 Payee name Paypal | |
| 6 Amount (\$) \$3.38 | 7 Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131 | |
| 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 Service Fee |
| 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 Paypal | |
| Amount (\$) \$3.38 | Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131 | |
| 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 Service Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/20/2023 | Payee name Paypal | |
| Amount (\$) \$15.44 | Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131 | |
| 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 Service Fee |
| 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: 8/10 Rpt: 33/46 | 2 FILER NAME Jackson, Austin Reeve (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00069799 |
|---|--|--|

| | |
|-----------------------------|-------------------------------|
| 4 Date 09/27/2023 | 5 Payee name Paypal |
|-----------------------------|-------------------------------|

| | |
|---------------------------------|--|
| 6 Amount (\$) \$75.20 | 7 Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131 |
|---------------------------------|--|

| | | |
|---------------------------------|---|---|
| 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 Service Fee |
|---------------------------------|---|---|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|----------------------|
| Date 11/01/2023 | Payee name Paypal |
|--------------------|----------------------|

| | |
|------------------------|---|
| Amount (\$) \$14.94 | Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131 |
|------------------------|---|

| | | |
|------------------------|--|--|
| 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 Service Fee |
|------------------------|--|--|

| | | | |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

| | |
|--------------------|----------------------|
| Date 11/08/2023 | Payee name Paypal |
|--------------------|----------------------|

| | |
|-----------------------|---|
| Amount (\$) \$1.94 | Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131 |
|-----------------------|---|

| | | |
|------------------------|--|--|
| 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 Service Fee |
|------------------------|--|--|

| | | | |
|--|-----------------------------|---------------|-------------|
| 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: 9/10 Rpt: 34/46 | 2 FILER NAME Jackson, Austin Reeve (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 11/22/2023 | 5 Payee name Paypal | |
| 6 Amount (\$) \$3.38 | 7 Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131 | |
| 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 Service Fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/07/2023 | Payee name Paypal | |
| Amount (\$) \$29.39 | Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131 | |
| 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 Service Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/30/2023 | Payee name Paypal | |
| Amount (\$) \$22.17 | Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131 | |
| 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 Service Fee |
| 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: 10/10 Rpt: 35/46 | 2 FILER NAME Jackson, Austin Reeve (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 11/13/2023 | 5 Payee name Smith County Republican Party | |
| 6 Amount (\$) \$1,500.00 | 7 Payee address; City; State; Zip Code 3923 S Broadway Ave. Tyler, TX 75701 | |
| 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 Filing Fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/14/2023 | Payee name Smith County Republican Women | |
| Amount (\$) \$55.00 | Payee address; City; State; Zip Code PO Box 8175 Tyler, TX 75711 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Member dues |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/18/2023 | Payee name Tyler Area Chamber of Commerce | |
| Amount (\$) \$175.00 | Payee address; City; State; Zip Code 315 N Broadway Ave. Suite 100 Tyler, TX 75702 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Member dues |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

| | | | | | |
|----------|---|---|---|---|---|
| 1 | Total pages Schedule F4: Sch: 1/9 Rpt: 36/46 | 2 | FILER NAME Jackson, Austin Reeve (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00069799 |
| 4 | CREDIT CARD ISSUER | Name of financial institution | | 5 | TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 | PAYMENT | (a) Amount Charged \$186.55 | (b) Date of Charge 07/10/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Mailchimp | | (b) Payee address; City, State, Zip Code 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description Advertising | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| 6 | PAYMENT | (a) Amount Charged \$317.00 | (b) Date of Charge 07/13/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Grassroots America We the | | (b) Payee address; City, State, Zip Code PO Box 130012 Tyler, TX 75713 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Event Expense | | (b) Description Sponsorship | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| 6 | PAYMENT | (a) Amount Charged \$6.50 | (b) Date of Charge 07/29/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Squarespace | | (b) Payee address; City, State, Zip Code 225 Varick Street 12th Floor New York, NY 10014 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Website Hosting | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|---|---|---|--|---|
| 1 | Total pages Schedule F4: Sch: 2/9 Rpt: 37/46 | 2 | FILER NAME Jackson, Austin Reeve (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00069799 |
| 4 | CREDIT CARD ISSUER | Name of financial institution | | 5 | TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 | PAYMENT | (a) Amount Charged \$341.39 | (b) Date of Charge 08/04/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Xpresso Print Cafe | | (b) Payee address; City, State, Zip Code 113 University pl Tyler, TX 75702 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Printing Expense | | (b) Description Direct Mail | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| PAYMENT | (a) Amount Charged \$186.55 | (b) Date of Charge 08/10/2023 | (c) Date(s) Credit Card Issuer Paid | | |
| PAYEE | (a) Payee name Mailchimp | (b) Payee address; City, State, Zip Code 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308 | | | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description Advertising | | |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held | |
| PAYMENT | (a) Amount Charged \$388.88 | (b) Date of Charge 08/24/2023 | (c) Date(s) Credit Card Issuer Paid | | |
| PAYEE | (a) Payee name Gotta Graze | (b) Payee address; City, State, Zip Code 400 Holiday Lane Tyler, TX 75703 | | | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Event Expense | | (b) Description Food Expense | | |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held | |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

| | | | | | |
|----------|--|---|---|---|---|
| 1 | Total pages Schedule F4: Sch: 3/9 Rpt: 38/46 | 2 | FILER NAME Jackson, Austin Reeve (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00069799 |
| 4 | CREDIT CARD ISSUER | Name of financial institution | | 5 | TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 | PAYMENT | (a) Amount Charged \$50.00 | (b) Date of Charge 08/25/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Lindale Area Chamber of | | (b) Payee address; City, State, Zip Code 205 S Main St Lindale, TX 75771 | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (b) Description Member dues | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| 6 | PAYMENT | (a) Amount Charged \$66.00 | (b) Date of Charge 08/28/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name USPS | | (b) Payee address; City, State, Zip Code 2627 S Broadway Ave Tyler, TX 75701 | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (b) Description Postage | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| | | Candidate/Officeholder name | | Office sought | Office held |
| 6 | PAYMENT | (a) Amount Charged \$6.50 | (b) Date of Charge 08/29/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Squarespace | | (b) Payee address; City, State, Zip Code 225 Varick Street 12th Floor New York, NY 10014 | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (b) Description Website Hosting | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| | | Candidate/Officeholder name | | Office sought | Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

| | | | | | |
|----------|---|--|---|---|---|
| 1 | Total pages Schedule F4: Sch: 4/9 Rpt: 39/46 | 2 | FILER NAME Jackson, Austin Reeve (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00069799 |
| 4 | CREDIT CARD ISSUER | Name of financial institution | | 5 | TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 | PAYMENT | (a) Amount Charged \$25.00 | (b) Date of Charge 09/05/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name CAPITAL ONE | | (b) Payee address; City, State, Zip Code PO Box 60599 Industry, CA 91716 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Fees | | (b) Description Service Fee | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| 6 | PAYMENT | (a) Amount Charged \$69.25 | (b) Date of Charge 09/08/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Walmart | | (b) Payee address; City, State, Zip Code 450 SSE Loop 323 Tyler, TX 75702 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Supplies | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| 6 | PAYMENT | (a) Amount Charged \$12.74 | (b) Date of Charge 09/09/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name CAPITAL ONE | | (b) Payee address; City, State, Zip Code PO Box 60599 Industry, CA 91716 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Fees | | (b) Description Interest | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

| | | | | | |
|----------|---|---|---|---|---|
| 1 | Total pages Schedule F4: Sch: 5/9 Rpt: 40/46 | 2 | FILER NAME Jackson, Austin Reeve (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00069799 |
| 4 | CREDIT CARD ISSUER | Name of financial institution | | 5 | TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 | PAYMENT | (a) Amount Charged \$186.55 | (b) Date of Charge 09/11/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Mailchimp | | (b) Payee address; City, State, Zip Code 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description Advertising | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| 6 | PAYMENT | (a) Amount Charged \$268.63 | (b) Date of Charge 09/11/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Squarespace | | (b) Payee address; City, State, Zip Code 225 Varick Street 12th Floor New York, NY 10014 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Website Hosting | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| 6 | PAYMENT | (a) Amount Charged \$200.00 | (b) Date of Charge 09/23/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Cause Creative Group | | (b) Payee address; City, State, Zip Code 100 Independence PI #202 Tyler, TX 75703 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Event Expense | | (b) Description Photography Services | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

| | | | | | |
|----------|---|---|---|---|---|
| 1 | Total pages Schedule F4: Sch: 6/9 Rpt: 41/46 | 2 | FILER NAME Jackson, Austin Reeve (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00069799 |
| 4 | CREDIT CARD ISSUER | Name of financial institution | | 5 | TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 | PAYMENT | (a) Amount Charged \$6.50 | (b) Date of Charge 09/29/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Squarespace | | (b) Payee address; City, State, Zip Code 225 Varick Street 12th Floor New York, NY 10014 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Website Hosting | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| 6 | PAYMENT | (a) Amount Charged \$186.55 | (b) Date of Charge 10/10/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Mailchimp | | (b) Payee address; City, State, Zip Code 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description Advertising | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| 6 | PAYMENT | (a) Amount Charged \$9.27 | (b) Date of Charge 10/11/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name CAPITAL ONE | | (b) Payee address; City, State, Zip Code PO Box 60599 Industry, CA 91716 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Fees | | (b) Description Interest | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

| | | | | | |
|----------|---|---|---|---|---|
| 1 | Total pages Schedule F4: Sch: 7/9 Rpt: 42/46 | 2 | FILER NAME Jackson, Austin Reeve (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00069799 |
| 4 | CREDIT CARD ISSUER | Name of financial institution | | 5 | TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 | PAYMENT | (a) Amount Charged \$532.07 | (b) Date of Charge 10/12/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Texas Minority Coalition | | (b) Payee address; City, State, Zip Code PO Box 130063 Tyler, TX 75713 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Event Expense | | (b) Description Event Tickets | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| 6 | PAYMENT | (a) Amount Charged \$6.50 | (b) Date of Charge 10/30/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Squarespace | | (b) Payee address; City, State, Zip Code 225 Varick Street 12th Floor New York, NY 10014 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Website Hosting | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| 6 | PAYMENT | (a) Amount Charged \$186.55 | (b) Date of Charge 11/10/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Mailchimp | | (b) Payee address; City, State, Zip Code 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description Advertising | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

| | | | | | |
|----------|---|---|---|---|---|
| 1 | Total pages Schedule F4: Sch: 8/9 Rpt: 43/46 | 2 | FILER NAME Jackson, Austin Reeve (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00069799 |
| 4 | CREDIT CARD ISSUER | Name of financial institution | | 5 | TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 | PAYMENT | (a) Amount Charged \$6.50 | (b) Date of Charge 11/29/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Squarespace | | (b) Payee address; City, State, Zip Code 225 Varick Street 12th Floor New York, NY 10014 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Website Hosting | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| 6 | PAYMENT | (a) Amount Charged \$263.50 | (b) Date of Charge 12/01/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Grassroots America We the | | (b) Payee address; City, State, Zip Code PO Box 130012 Tyler, TX 75713 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Event Expense | | (b) Description Event Tickets | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| 6 | PAYMENT | (a) Amount Charged \$191.88 | (b) Date of Charge 12/11/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Mailchimp | | (b) Payee address; City, State, Zip Code 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description Advertising | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 |
| | 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 F4: Sch: 9/9 Rpt: 44/46 | 2 | FILER NAME Jackson, Austin Reeve (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00069799 |
| 4 | CREDIT CARD ISSUER | Name of financial institution | | 5 | TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 | PAYMENT | (a) Amount Charged \$700.00 | (b) Date of Charge 12/22/2023 | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name Smith County Republican Women | | (b) Payee address; City, State, Zip Code PO Box 8175 Tyler, TX 75711 | |
| 8 | PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | (b) Description Event Donation | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| PAYMENT | (a) Amount Charged \$6.50 | (b) Date of Charge 12/29/2023 | (c) Date(s) Credit Card Issuer Paid | | |
| PAYEE | (a) Payee name Squarespace | (b) Payee address; City, State, Zip Code 225 Varick Street 12th Floor New York, NY 10014 | | | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Website Hosting | | |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held | |

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: 45/46 |
| 2 FILER NAME Jackson, Austin Reeve (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00069799 |
| 4 Date 09/21/2023 | 5 Name of person from whom amount is received Milam, Matthew | 8 Amount (\$) \$100.00 |
| | 6 Address of person from whom amount is received; City; State; Zip Code Tyler, TX 75701 | |
| | 7 Purpose for which amount is received Political Contribution | <input checked="" type="checkbox"/> Check if political contribution returned to filer |

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L:
Sch: 1/1 Rpt: 46/46

2 FILER NAME

Jackson, Austin Reeve (The Honorable)

3 Filer ID (Ethics Commission Filers)
00069799

LENDER
INFORMATION

4 Name of lender
Jackson, Austin Reeve (The Honorable)

5 Lender address; City; State; Zip Code

Tyler, TX 75711

GUARANTOR
INFORMATION

6 Name of guarantor

not applicable

7 Guarantor address; City; State; Zip Code