FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00069799 46 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Austin Reeve NAME Date Received **ELECTRONICALLY FILED** 01/08/2024 NICKNAME LAST **SUFFIX** Jackson CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Shawn NAME NICKNAME LAST **SUFFIX** Dunn **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (405) 830-4099 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff lx| appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2023 12/31/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/05/2024 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 114 Smith District Judge District 114

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Jackson, Austin Ree	ve (The Honorable)	14 Filer ID 00069799	(Ethics Comn	nission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder. These expenditures may have been made without the candidate's or office consent. Candidates and officeholders are required to report this information only if they receive r				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
ш	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NA	AME		
		COMMITTEE CAMPAIGN TREASURER AD	DDRESS		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER ES OF LOANS, OR CONTRIBUTIONS MADI		\$	0.00
		ICAL CONTRIBUTIONS		\$	28,116.00
EXPENDITURE	· ·	PLEDGES, LOANS, OR GUARANTEES OF IZED POLITICAL EXPENDITURES	LOANS)	 	
TOTALS 10. TOTAL SINTENNIZED TOETHOAL EXITENSITORIES			\$	0.00	
	4. TOTAL POLITICAL EXPENDITURES				19,835.08
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF RIOD	THE LAST DAY OF THE	\$	31,044.13
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOAN TING PERIOD	NS AS OF THE LAST DAY	\$	11,500.00
17 AFFIDAVIT			penalty of perjury, that the acudes all information required Code.		
		The Ho	onorable Austin Reeve Ja	ckson	
		Signa	ture of Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
Sworn to and subso	cribed before me, by the s	aid	, this the		_ day
of	, 20, to c	ertify which, witness my hand and seal of offic	ce.		
Signature of office	er administering oath	Printed name of officer administering of	ath Title of office	er administerin	g oath
	-	-			

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

	CC	3 of 46
18 FILER NAME Jackson, Austin Reeve (The Honorable)	19 Filer ID 00069799	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$ 28,116.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4. SCHEDULE E(J): LOANS (JUDICIAL)		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 15,427.72
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 4,407.36
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12. X SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$ 100.00

	MONET	ARY POLITICAL (CONTRIBUTIO	DNS	SCH	EDULE A	(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Sch Sch: 1/22 Rpt:		
2	FILER NAME Jackson, Au	stin Reeve (The Honorable)			3 Filer ID (Ethics 00069799	Commission	Filers)
4	Date 08/17/2023			7 Amount of Contr	ibution (\$)	\$100.00	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
	Atorrney			Attorney			
10	Contributor's of Christus Hea	employer/law firm ath		11 Law firm of contributor's sp	oouse (if any)		
12	If contributor i	s a child, law firm of parent(s) (if a	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contr	ibution (\$)	
08/08/2023 Allen, Adam Contributor address; City; State; Zip Code Tyler, TX 75703				,,	\$250.00		
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u>l</u>		
	Attorney	Timopai Coodpailon		Attorney			
		employer/law firm		Law firm of contributor's sp	oouse (if any)		
	Allen Thauw			Martin Walker	,		
	If contributor i	s a child, law firm of parent(s) (if a	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contr	ibution (\$)	
	08/30/2023	Andrews, Duane Contributor address; City; St Tyler, TX 75701	tate; Zip Code				\$250.00
	Contributor's I	Principal Occupation		Contributor's Job Title	•		
	Surgeon			Surgeon			
	Contributor's CHRISTUS	employer/law firm		Law firm of contributor's sp	oouse (if any)		
	If contributor i	s a child, law firm of parent(s) (if a	any)				

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 2/22 Rpt: 5/46
2	FILER NAME Jackson, Au	stin Reeve (The Honorable)			3 Filer ID (Ethics Commission Filers) 00069799
4	Date 09/19/2023				7 Amount of Contribution (\$) \$250.00
8	Contributor's F	Principal Occupation		9 Contributor's Job Title	
	Attorney			Attorney	
10		employer/law firm aker Law Firm		11 Law firm of contributor's sp	ouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if a	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/03/2023 Bass, Craig Contributor address; City; State; Zip Code Longview, TX 75608			\$1,000.00		
	Contributor's F	Principal Occupation		Contributor's Job Title	
	Attorney	· · · · · · · · · · · · · · · · · · ·		Attorney	
		employer/law firm		Law firm of contributor's sp	nouse (if any)
	If contributor is	s a child, law firm of parent(s) (if a	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_		Amount of Contribution (\$)
	09/21/2023 Boren, Kelcy Contributor address; City; State; Zip Code Tyler, TX 75703		\$1,000.00		
	Contributor's F	Principal Occupation		Contributor's Job Title	
	President			President	
		employer/law firm		Law firm of contributor's sp	oouse (if any)
		y Services LLC		Mishae Boren	
	If contributor is	s a child, law firm of parent(s) (if a	ny)		

	MONET	ARY POLITICAL CONTR	IBUTIONS	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	ME		3 Filer ID (Ethics Commission Filers)
	Jackson, Au	stin Reeve (The Honorable)		00069799
4	4 Date 5 Full name of contributor out-of-state PAC (ID#:) 09/06/2023 Bosworth, Michael		7 Amount of Contribution (\$) \$500.00	
		6 Contributor address; City; State; Zip Cod	le	
		Tyler, TX 75711		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Insurance A	gent	Insurance Agent	
10	Contributor's	employer/law firm	11 Law firm of contributor's	spouse (if any)
	Bosworth ar	d Associates		
12	2 If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-sta	ate PAC (ID#:)	Amount of Contribution (\$)
	07/25/2023	Boyd, Paul		\$100.00
		Contributor address; City; State; Zip Cod	e	
		Tyler, TX 75703		
	Contributor's	Principal Occupation	Contributor's Job Title	1
	Attorney		Attorney	
	Contributor's	employer/law firm	Law firm of contributor's	spouse (if any)
	Boyd Boyd 8	& Giddens	Boyd Boyd & Giddens	
	If contributor i	s a child, law firm of parent(s) (if any)	·	
H	Date	Full name of contributor out-of-sta	ate PAC (ID#:)	Amount of Contribution (\$)
	10/01/2023	Bradley, Lindsey		\$100.00
		Contributor address; City; State; Zip Cod	e	···
		Dallas, TX 75252		
	Contributor's	Principal Occupation	Contributor's Job Title	1
	Retired		Retired	
	Contributor's	employer/law firm	Law firm of contributor's	spouse (if any)
	Retired			
	If contributor i	s a child, law firm of parent(s) (if any)		
ı				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		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	stin Reeve (The Honorable)			1	Filer ID (Ethics Commission Filers) 00069799
4	Date 09/07/2023	5 Full name of contributor Brown, Alan	ull name of contributor		_	Amount of Contribution (\$) \$100.00
		Tyler, TX 75703				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's e	employer/law firm ock, PC		11 Law firm of contributor's sp	oous	e (if any)
12		s a child, law firm of parent(s) (i	f any)	<u>I</u>		
		T			_	
	Date Full name of contributor out-of-state PAC (ID#:) Brown, Tom Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$50.00		
	Contributor's I	Tyler, TX 75701 Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Tom J. Brow	n Law PLLC				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	09/07/2023	Buchanan, Todd		,		\$250.00
		Contributor address; City;	State; Zip Code			
	0	Flint, TX 75762		Contaile de de Tale Tide		
	President	Principal Occupation		Contributor's Job Title President		
_		employer/law firm		Law firm of contributor's sp	าดแร	e (if any)
		as Capital Corp		Law min or contributor 5 of	3000	o (ii airy)
		s a child, law firm of parent(s) (i	f any)	<u>I</u>		

MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
The Instru	ction Guide explains ho	w to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 5/22 Rpt: 8/46
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Jackson, Au	stin Reeve (The Honorable)			00069799
4 Date 11/16/2023)	7 Amount of Contribution (\$) \$100.00	
	Hideaway, TX 75771		,	
	Principal Occupation		9 Contributor's Job Title	
Retired			Retired	
10 Contributor's e	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12 If contributor is	s a child, law firm of parent(s) (i	f any)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/12/2023	Burt, Allen			\$100.00
	Contributor address; City;	State; Zip Code		
	Tyler, TX 75703			
Contributor's I	Principal Occupation		Contributor's Job Title	
Retired			Retired	
Contributor's e	employer/law firm		Law firm of contributor's s	pouse (if any)
If contributor is	s a child, law firm of parent(s) (i	f any)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/21/2023	Carroll, Otis	``		\$250.00
Contributor address; City; State; Zip Code		State; Zip Code		
	Tyler, TX 75703			
Contributor's I	Principal Occupation		Contributor's Job Title	
Attorney			Attorney	
Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
Carroll Malo	ney Henry & Nelson PLLC			
If contributor is	s a child, law firm of parent(s) (i	f any)		

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 6/22 Rpt: 9/46
2	FILER NAME Jackson, Au	stin Reeve (The Honorable)			3 Filer ID (Ethics Commission Filers) 00069799
4			7 Amount of Contribution (\$) \$1,000.00		
8	Contributor's F	Principal Occupation		9 Contributor's Job Title	
	Attorney			Attorney	
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	pouse (if any)
		onski Anderson		Clark von Plonski Ande	
12	If contributor is	s a child, law firm of parent(s) (if a	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	09/21/2023	Cozby, Raymond Contributor address; City; S Tyler, TX 75703	tate; Zip Code		\$500.00
	Contributor's F	I Principal Occupation		Contributor's Job Title	
	Attorney			Attorney	
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
	Raymond W	. Cozby III PLLC			
	If contributor is	s a child, law firm of parent(s) (if a	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	09/21/2023	Dyer, Louise Contributor address; City; S Tyler, TX 75707	tate; Zip Code		\$400.00
	Contributor's I	Principal Occupation		Contributor's Job Title	
Head of School Head of School					
Contributor's employer/law firm Law firm of contributor's sp			oouse (if any)		
	Oak Forest I	Montessori School			
	If contributor is	s a child, law firm of parent(s) (if a	any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		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, Au	stin Reeve (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069799
4	Date 09/05/2023	5 Full name of contributorEmbry, Jeff6 Contributor address; City;	butor out-of-state PAC (ID#:) 7		Amount of Contribution (\$) \$500.00	
		Tyler, TX 75702				
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney			Attorney		
10	Embry Law I	employer/law firm PC		11 Law firm of contributor's sp	ous	se (II any)
12	-	s a child, law firm of parent(s) (i	f any)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/07/2023	Faulkner, Bruce Contributor address; City; Tyler, TX 75702	State; Zip Code			\$250.00
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	10/11/2023	Flowers, Celia Contributor address; City; Tyler, TX 75701	State; Zip Code			\$250.00
-	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Flowers Dav	ris PLLC				
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS	SCHEDULE A	J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 8/22 Rpt: 11/46	
2	FILER NAME Jackson, Au	stin Reeve (The Honorable)			3 Filer ID (Ethics Commission F 00069799	-ilers)
4	Date 09/22/2023			7 Amount of Contribution (\$)	\$100.00	
8	Contributor's F	Principal Occupation		9 Contributor's Job Title	<u> </u>	
	Retired			Retired		
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	pouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if a	nny)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/31/2023 Gauna, Alejandro Contributor address; City; State; Zip Code Tyler, TX 75701				\$15.00		
	Contributor's F	Principal Occupation		Contributor's Job Title		
Polysomnographer Polysomnographer						
		employer/law firm		Law firm of contributor's sp	pouse (if any)	
	UT Health E	ast Texas				
	If contributor is	s a child, law firm of parent(s) (if a	any)	ı		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
	10/23/2023 Glenney, Chris Contributor address; City; State; Zip Code Tyler, TX 75707			\$250.00		
	Contributor's F	Principal Occupation		Contributor's Job Title	-	
Administration Administration						
Contributor's employer/law firm Law firm of contributor's sp CHRISTUS			pouse (if any)			
	If contributor is	s a child, law firm of parent(s) (if a	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 9/22 Rpt: 12/46
2	FILER NAME	ME .		3 Filer ID (Ethics Commission Filers)	
	Jackson, Au	stin Reeve (The Honorable)		00069799
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	08/23/2023	Grant and Flanery PC			\$1,000.00
		6 Contributor address; City;	State; Zip Code		
		Tyler, TX 75702			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
10	Ontributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12	2 If contributor	s a child, law firm of parent(s) (if any)	1	
H	Date	Full name of contributor	out-of-state PAC (ID#:	,	Amount of Contribution (\$)
	09/21/2023	Harrison, Brett	Uni-oi-state PAC (ID#.	J	\$500.00
	03/21/2020		Contributor address; City; State; Zip Code		
		Tyler, TX 75703			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney			Attorney	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Bain Files				
	If contributor	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/16/2023	Hays, Thomas			\$100.00
		Contributor address; City;	State; Zip Code		
		Tyler, TX 75701			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Retired			Retired	
		employer/law firm		Law firm of contributor's s	pouse (if any)
	Retired				
	If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 10/22 Rpt: 13/46
	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Jackson, Au	stin Reeve (The Honorable)			00069799
	4 Date 07/16/2023 5 Full name of contributor out-of-state PAC (ID#:) Hene, Stuart 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$250.00		
		Tyler, TX 75702			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	•
	Attorney			Attorney	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
	Tarry & Hen				
		s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/27/2023	Iglesias, David	<u>—</u>		\$500.00
		Contributor address; City; Tyler, TX 75701	State; Zip Code		
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney	т ппограг Оссирацоп		Attorney	
		employer/law firm		Law firm of contributor's s	nouse (if any)
	Iglesias Law			Iglesias Law Firm	souse (ii arry)
		s a child, law firm of parent(s) (if any)	igicsias Eaw i iiii	
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/08/2023	Jackson, Russell	<u> </u>		\$500.00
		Contributor address; City; Tyler, TX 75703	State; Zip Code		·!
	Cantuibustania			Contributorio Joh Title	<u> </u>
	Geologist	Principal Occupation		Contributor's Job Title Geologist	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Tyler Oil & C	Sas			
	If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 11/22 Rpt: 14/46
2	FILER NAME Jackson, Au	stin Reeve (The Honorable)			3 Filer ID (Ethics Commission Filers) 00069799
4	Date 08/07/2023	5 Full name of contributor James, Clint6 Contributor address; City; STyler, TX 75703	out-of-state PAC (ID#:_		7 Amount of Contribution (\$) \$500.00
8	Contributor's F	IPrincipal Occupation		9 Contributor's Job Title	<u> </u>
	Attorney			Attorney	
10		employer/law firm		11 Law firm of contributor's sp	pouse (if any)
	Clint James			Clint James PC	, ,,
12		s a child, law firm of parent(s) (if	any)	L	
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	07/06/2023	Jensen, Madeline Contributor address; City; S Tyler, TX 75703	tate; Zip Code		\$100.00
	Contributor's F	Principal Occupation		Contributor's Job Title	
	Office Mana			Office Manager	
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
	Law Offices	of Eric D. Jensen			
	If contributor is	s a child, law firm of parent(s) (if a	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	07/31/2023	Jones, Camden Contributor address; City; S Tyler, TX 75703	tate; Zip Code		. \$1,000.00
	Contributor's F	Principal Occupation		Contributor's Job Title	
	Owner			Owner	
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
	Velocity Maz	zda		Clark von Plonski Ande	rson
	If contributor is	s a child, law firm of parent(s) (if a	any)		

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 12/22 Rpt: 15/46
2	FILER NAME Jackson, Au	stin Reeve (The Honorable)			3 Filer ID (Ethics Commission Filers) 00069799
4	Date 07/31/2023	5 Full name of contributor Jones, Linda6 Contributor address; City; STyler, TX 75703	out-of-state PAC (ID#:_		7 Amount of Contribution (\$) \$1,000.00
8	Contributor's F	Principal Occupation		9 Contributor's Job Title	1
	Attorney			Attorney	
10		employer/law firm onski Anderson		11 Law firm of contributor's sp	pouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if a	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	08/31/2023	Kevin Eltife Campaign Contributor address; City; S Tyler, TX 75702			\$1,000.00
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Continuator 5 i	-ппстрат Оссирацоп		Continuator's 300 Title	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if a	any)	<u> </u>	
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	08/22/2023	Lavender, Micheal Contributor address; City; S Tyler, TX 75703	tate; Zip Code		\$500.00
	Contributor's I	Principal Occupation		Contributor's Job Title	•
	Owner			Owner	
		employer/law firm		Law firm of contributor's sp	pouse (if any)
	Micheal Lav				
	If contributor is	s a child, law firm of parent(s) (if a	any)		

MONE	TARY POLITICAL CONTRIBUT	TIONS	SCHEDULE A(J)1
The Inst	ruction Guide explains how to complete th	is form.	1 Total pages Schedule A(J)1: Sch: 13/22 Rpt: 16/46
2 FILER NAI	ME Austin Reeve (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069799
4 Date 08/22/202	5 Full name of contributor out-of-state PAC (I	D#:)	7 Amount of Contribution (\$) \$250.00
	Tyler, TX 75703		
8 Contributo	's Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
	's employer/law firm aloney Henry & Nelson PLLC	11 Law firm of contributor's s	pouse (if any)
	or is a child, law firm of parent(s) (if any)		
Date 09/21/202	Full name of contributor out-of-state PAC (I Marshall, Matthew	D#:)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Tyler, TX 75703		
Contributo	's Principal Occupation	Contributor's Job Title	_ L
Owner		Owner	
	's employer/law firm	Law firm of contributor's s	pouse (if any)
	al Estate & Investments		
If contribut	or is a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of Contribution (\$)
07/13/202	McCain, Elizabeth		\$1,000.00
	Contributor address; City; State; Zip Code		
	Troup, TX 75789		
Contributo	's Principal Occupation	Contributor's Job Title	
Real Esta	te Agent	Real Estate Agent	
Contributo Self	's employer/law firm	Law firm of contributor's s	pouse (if any)
If contribut	or is a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1	Total pages Schedule A(J)1: Sch: 14/22 Rpt: 17/46
2	FILER NAME Jackson, Au	stin Reeve (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069799
4	Date 09/21/2023	5 Full name of contributor McGuire Firm6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,000.00
		Tyler, TX 75702		1		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor i	s a child, law firm of parent(s) (i	f any)			
	Date 09/19/2023	Full name of contributor McSwane, Doug Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$250.00
		Tyler, TX 75701				
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's of Potter Minto	employer/law firm		Law firm of contributor's sp	oous	se (if any)
H		s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	09/12/2023	Melontree, Beverly	_			\$1,000.00
		Contributor address; City;	State; Zip Code		•	
	0	Tyler, TX 75702		I a		
	Attorney	Principal Occupation		Contributor's Job Title Attorney		
		employer/law firm		Law firm of contributor's sp	2011	se (if any)
	Self	Simployer/idw iiimi		Law IIIII of Continuator 3 3	Jou	se (ii aiiy)
	If contributor i	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL CO	NTRIBUTIC	ONS		SCHEDULE A	\(J)1
	The Instru	ction Guide explains how to	complete this f	orm.	1	es Schedule A(J)1: 22 Rpt: 18/46	
2	FILER NAME Jackson, Au	stin Reeve (The Honorable)			3 Filer ID 0006979	(Ethics Commission	n Filers)
4	Date 09/21/2023	5 Full name of contributor Milam, Matthew6 Contributor address; City; State;Tyler, TX 75701	out-of-state PAC (ID#:_		7 Amount o	of Contribution (\$)	\$100.00
8	Contributor's F	Principal Occupation		9 Contributor's Job Title	<u> </u>		
Ŭ	Attorney	Timolpai Occupation		Attorney			
10		employer/law firm		11 Law firm of contributor's sp	nouse (if any)		
	Roberts & R			Ramey and Flock	, ou o o (
12		s a child, law firm of parent(s) (if any)		,			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount o	f Contribution (\$)	
	09/21/2023	Millslagle, Matthew Contributor address; City; State; Tyler, TX 75701	Zip Code				\$500.00
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>		
	Attorney			Attorney			
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any)		
	Files Harriso	on PC					
	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount o	of Contribution (\$)	
	09/07/2023	Moore, John Contributor address; City; State; Whitehouse, TX 75791	Zip Code				\$100.00
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Commission	er		Commissioner			
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any)		
	Smith Count	у					
	If contributor is	s a child, law firm of parent(s) (if any)					

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 16/22 Rpt: 19/46
2	FILER NAME Jackson, Au	stin Reeve (The Honorable)			3 Filer ID (Ethics Commission Filers) 00069799
4	Date 09/21/2023	5 Full name of contributor [Nelson, Kyle6 Contributor address; City; StaTyler, TX 75703	out-of-state PAC (ID#:_ te; Zip Code		7 Amount of Contribution (\$) \$250.00
8	Contributor's F	IPrincipal Occupation		9 Contributor's Job Title	I
	Attorney			Attorney	
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	pouse (if any)
		ney Henry & Nelson PLLC		Carroll Maloney Henry a	and Nelson PLLC
12	If contributor is	s a child, law firm of parent(s) (if ar	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	12/06/2023	Nix, John Contributor address; City; Sta Tyler, TX 75703	te; Zip Code		\$1,000.00
	Contributor's F	Principal Occupation		Contributor's Job Title	I
	President			President	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	Nix Construc	ction Inc.			
	If contributor is	s a child, law firm of parent(s) (if ar	ly)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	09/07/2023	Patteson, Richard Contributor address; City; Sta Tyler, TX 75702	ite; Zip Code		\$500.00
	Contributor's F	Principal Occupation		Contributor's Job Title	1
	Attorney			Attorney	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	Patteson Lav				
	If contributor is	s a child, law firm of parent(s) (if ar	ny)		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 17/22 Rpt: 20/46
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Jackson, Au	stin Reeve (The Honorable)			00069799
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	09/05/2023	Perkins, James			\$1,000.00
		6 Contributor address; City; S Tyler, TX 75711	State; Zip Code		
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
o	Bank Presid			Bank President	
10					nouse (if any)
10	Citizens 1st	employer/law firm		11 Law firm of contributor's s	pouse (ii any)
12		s a child, law firm of parent(s) (if	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	12/29/2023	Pesina, Nicanor	_		\$750.00
		Contributor address; City;	State; Zip Code		"]
		Tyler, TX 75702			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney			Attorney	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Pesina Law	Firm PLLC			
	If contributor i	s a child, law firm of parent(s) (if	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:		Amount of Contribution (\$)
	07/06/2023	Podany, Elizabeth			\$1.00
		Contributor address; City; \$	State; Zip Code		
		Tyler, TX 75702			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Operations (Coordinator		Operations Coordinato	r
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	CWJ Strate	gies			
	If contributor i	s a child, law firm of parent(s) (if	any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains h	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 18/22 Rpt: 21/46
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
		istin Reeve (The Honorable			00069799
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	08/23/2023	Ramey and Flock PC			\$500.00
		6 Contributor address; City: Tyler, TX 75702	; State; Zip Code		
8	Contributor's	Principal Occupation		9 Contributor's Job Title	1
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12	If contributor i	is a child, law firm of parent(s) ((if any)		
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/01/2023	Rogers, Robyn	` `		\$1,000.00
		Contributor address; City:	: State: Zip Code		·· ·
		Tyler, TX 75701			
	Contributor's	Principal Occupation		Contributor's Job Title	
	President			President	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Robert Roge	ers Foundation			
	If contributor i	is a child, law firm of parent(s) ((if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/21/2023	Root, Brad			\$250.00
		Contributor address; City	State; Zip Code		
		Tyler, TX 75706			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Owner			Owner	
		employer/law firm		Law firm of contributor's s	pouse (if any)
	Root Constr				
	If contributor i	s a child, law firm of parent(s) ((if any)		

	MONET	ARY POLITICAL CONTR	IBUTIC	ONS		SCHEDULE /	A(J)1
	The Instru	ction Guide explains how to compl	lete this f	orm.		pages Schedule A(J)1 19/22 Rpt: 22/46	
2	FILER NAME Jackson, Au	stin Reeve (The Honorable)				D (Ethics Commission 19799	n Filers)
4	Date 08/15/2023	 5 Full name of contributor out-of-stall out-of-s	ute PAC (ID#:_ e		7 Amou	unt of Contribution (\$)	\$500.00
8	Contributor's F	I Principal Occupation		9 Contributor's Job Title			
	Attorney			Attorney			
10		employer/law firm nbrun & Comte PLLC		11 Law firm of contributor's sp	ouse (if a	ny)	
12	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-sta	ite PAC (ID#:_)	Amou	unt of Contribution (\$)	
	10/04/2023	Shelton, William Contributor address; City; State; Zip Code				(,	\$500.00
	Contributorio	Tyler, TX 75703 Principal Occupation		Contributor's Job Title			
	Attorney	-ппсіраї Оссираціон		Attorney			
		employer/law firm		Law firm of contributor's sp	ouse (if a	nv)	
	Shelton Fam	, ,				,,	
	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-sta	ite PAC (ID#:_)	Amou	unt of Contribution (\$)	
	10/18/2023	Shull, AE Contributor address; City; State; Zip Code Tyler, TX 75703	e				\$200.00
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Owner			Owner			
		employer/law firm		Law firm of contributor's sp	ouse (if a	ny)	
	A.E. Shull &						
	If contributor is	s a child, law firm of parent(s) (if any)					

	MONET	ARY POLITICAL CONTRI	IBUTIC	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to compl	ete this fo	orm.	1 Total pages Schedule A(J)1: Sch: 20/22 Rpt: 23/46
	FILER NAME	stin Reeve (The Honorable)			3 Filer ID (Ethics Commission Filers) 00069799
	Date		te PAC (ID#:		7 Amount of Contribution (\$)
	11/07/2023	Simpson, Tim 6 Contributor address; City; State; Zip Code			\$50.00
		Tyler, TX 75703			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Attorney			Attorney	
	Contributor's Potter Minto	employer/law firm n PC		11 Law firm of contributor's sp	pouse (if any)
		s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor out-of-stat	to DAC (ID#:	,	Amount of Contribution (\$)
	Date Full name of contributor out-of-state PAC (ID#:) 09/06/2023 Sorey, Daniel			\$500.00	
		Contributor address; City; State; Zip Code	e		
		Longview, TX 75601			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney			Attorney	
		employer/law firm		Law firm of contributor's s	pouse (if any)
	Sorey & Hoo	over LLC			
	If contributor i	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor out-of-stat	te PAC (ID#:_)	Amount of Contribution (\$)
	09/21/2023	Stewart, Mack			\$100.00
		Contributor address; City; State; Zip Code			
		Tyler, TX 75703			
	Contributor's MD	Principal Occupation		Contributor's Job Title MD	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	Pure Radiar	nce Med Spa			
	If contributor i	s a child, law firm of parent(s) (if any)			

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1	
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 21/22 Rpt: 24/46	
2	FILER NAME Jackson, Au	stin Reeve (The Honorable)			3 Filer ID (Ethics Commission Filers) 00069799	
4	Date 09/21/2023	5 Full name of contributor [Tindel, Andy6 Contributor address; City; StaTyler, TX 75702	out-of-state PAC (ID#:_ te; Zip Code)	7 Amount of Contribution (\$) \$1,000.0	10
8	Contributor's I	I Principal Occupation		9 Contributor's Job Title		_
	Attorney			Attorney		
10	Contributor's of	employer/law firm roup		11 Law firm of contributor's sp	pouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if an	у)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	_
	10/08/2023	Villanueva, Conrado Contributor address; City; Sta Cibolo, TX 78108			\$150.C	0
	Contributor's F	<u>I</u> Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if an	у)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	=
	08/21/2023	Willis, Patrick Contributor address; City; Sta Tyler, TX 75711	te; Zip Code		\$250.C	0
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Owner			Owner		
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	Signature Co	onsulting				
	If contributor is	s a child, law firm of parent(s) (if an	y)			

	MONET	'ARY POLITICAL CONTRIBU'	TIO	NS		SCHEDULE /	A(J)1
	The Instru	ction Guide explains how to complete th	his fo	orm.	1	Fotal pages Schedule A(J)1: Sch: 22/22 Rpt: 25/46	
2	FILER NAME Jackson, Au	stin Reeve (The Honorable)			1	Filer ID (Ethics Commission)	n Filers)
	Date 08/13/2023	 Full name of contributor	(ID#:		7 /	Amount of Contribution (\$)	\$100.00
g.	Contributor's F	Principal Occupation		9 Contributor's Job Title			
	Attorney	Thicipal Occupation		Attorney			
		employer/law firm		11 Law firm of contributor's sp	ouse	(if any)	
	Yarbrough V	• •		Yarbrough Wilcox PLLC			
12	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-state PAC	(ID#:_)	<i>P</i>	Amount of Contribution (\$)	
	09/08/2023	Young, Michael					\$200.00
		Contributor address; City; State; Zip Code Tyler, TX 75701					
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Investor			Investor			
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ouse	(if any)	
	If contributor is	s a child, law firm of parent(s) (if any)	•				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Com

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								
Ļ		1							
1	, ,								
	Sch: 1/10 Rpt: 26/46	Jackson, Austin Reeve (The Honorable) 00069799							
4	Date	5 Payee name							
L	07/06/2023	CAPITAL ONE							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$612.50	PO Box 60599							
		Industry, CA 91716							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF	Credit Card Payment Credit Card Payment Credit Card Payment Credit Card Payment							
	EXPENDITURE	Check if Austin, TX, officeholder living expense							
		Credit Card Payment							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI	1							
	Date	Payee name							
	09/08/2023	CAPITAL ONE							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$25.00	PO Box 60599							
		Industry, CA 91716							
\vdash	PURPOSE								
	OF	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Credit Card Payment Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		Credit Card Payment							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O								
	Date	Payee name							
	09/28/2023	CAPITAL ONE							
\vdash									
	Amount (\$)								
	\$1,394.12	PO Box 60599							
		Industry, CA 91716							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.							
		Check if Austin, TX, officeholder living expense Credit Card Payment							
		Credit Calu Fayinent							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/10 Rpt: 27/46	Jackson, Austin Reeve (The Honorable) 00069799
4	Date	5 Payee name
	11/07/2023	CAPITAL ONE
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$857.50	PO Box 60599
		Industry, CA 91716
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Payment
		Great Card Fayment
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_	Data	
	Date	Payee name
	12/06/2023	CAPITAL ONE
	Amount (\$) \$725.12	Payee address; City; State; Zip Code
	PO Box 60599	
		Industry, CA 91716
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Payment
		Cledit Cald Fayment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Data	Daniel and a second a second and a second an
	Date 07/10/2023	Payee name Cardwell & Wansley
		-
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	314 S Broadway Ave
		Tyler, TX 75702
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Consulting/marketing
		Consularymarketing
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/10 Rpt: 28/46	Jackson, Austin Reeve (The Honorable) 00069799
4	Date	5 Payee name
	08/09/2023	Cardwell & Wansley
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	314 S Broadway Ave
		Tyler, TX 75702
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Consulting/marketing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/11/2023	Cardwell & Wansley
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	314 S Broadway Ave
		Tyler, TX 75702
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Consulting/marketing
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/27/2023	Cardwell & Wansley
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,764.33	314 S Broadway Ave
		
		Tyler, TX 75702
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Consulting/marketing
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Total marca Cabadula E1.	2 Files ID (Files Commission Files)
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	5 Payee name
	11/02/2023	Cardwell & Wansley
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 314 S Broadway Ave Tyler, TX 75702
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ľ	OF	
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting/marketing
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/03/2023	Judge Austin Reeve, Jackson
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	PO Box 8355
		Tyler, TX 75711
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Loan Repayment/Reimbursement
		Check if Austin, TX, officeholder living expense
		Loan Repayment
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/06/2023	Judge Austin Reeve, Jackson
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	PO Box 8355
	Ψ2,000.00	1 0 20% 0000
		Tyler, TX 75711
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Loan Repayment
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/10 Rpt: 30/46	Jackson, Austin Reeve (The Honorable) 00069799
4	Date	5 Payee name
	07/17/2023	Paypal
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$8.24	2211 N 1st St
		San Jose, CA 95131
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Service Fee
		3366 1 33
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	07/25/2023	Paypal
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.38	2211 N 1st St
		San Jose, CA 95131
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Service Fee
		GGIVIOG I CC
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	08/23/2023	Paypal
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.70	2211 N 1st St
		San Jose, CA 95131
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Service Fee
		GSI-VIGO 1 GG
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

l	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	-
	Sch: 6/10 Rpt: 31/46	Jackson, Austin Reeve (The Honorable) 00069799	
4	Date	5 Payee name	_
	09/06/2023	Paypal	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$45.25	2211 N 1st St	
		San Jose, CA 95131	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Service Fee	
		COLVINC 1 CC	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
ľ	expenditure to benefit C/OI		
H	Date	Payee name	=
	09/07/2023	Paypal	
⊢	Amount (\$)	Payee address; City; State; Zip Code	_
	\$14.48	2211 N 1st St	
	41.10		
		San Jose, CA 95131	
┝	PURPOSE	<u> </u>	_
	OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Service Fee	
L			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
L	experience to benefit of or		_
	Date	Payee name	
	09/11/2023	Paypal	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$29.88	2211 N 1st St	
		San Jose, CA 95131	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
l		Service Fee	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
	expenditure to benefit C/O		
H			_

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Commi

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/10 Rpt: 32/46	Jackson, Austin Reeve (The Honorable) 00069799
4	Date	5 Payee name
	09/13/2023	Paypal
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3.38	2211 N 1st St
		San Jose, CA 95131
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Service Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/18/2023	Paypal
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.38	2211 N 1st St
		San Jose, CA 95131
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Service Fee
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
_	Date	Davisa nama
	09/20/2023	Payee name Paypal
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.44	2211 N 1st St
	Ψ10.44	
		San Jose, CA 95131
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Service Fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/10 Rpt: 33/46	Jackson, Austin Reeve (The Honorable) 00069799
4	Date	5 Payee name
	09/27/2023	Paypal
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$75.20	2211 N 1st St
		San Jose, CA 95131
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Service Fee
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialture to belieff C/Or	
	Date	Payee name
	11/01/2023	Paypal
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.94	2211 N 1st St
	¥=	
		Com 1000 CA 05101
		San Jose, CA 95131
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Service Fee
		3311136 1 35
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
<u> </u>		
	Date	Payee name
L	11/08/2023	Paypal
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.94	2211 N 1st St
		San Jose, CA 95131
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	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
L	experioliture to beriefit C/Of	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Printing Expense

	Candidate/Officeholder/Politica dit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Tota	l pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch	n: 9/10 Rpt: 34/46	Jackson, Austin Reeve (The Honorable) 00069799
4 Date	9	5 Payee name
11/2	22/2023	Paypal
6 Amo	ount (\$)	7 Payee address; City; State; Zip Code
	\$3.38	2211 N 1st St
		San Jose, CA 95131
8 F	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
EX	OF PENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Service Fee
		Scrvice i ee
0 0	poloto ONI V if direct	Candidate/Officeholder name Office acusht
	nplete <u>ONLY</u> if direct enditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	9	Payee name
12/0	07/2023	Paypal
Amo	ount (\$)	Payee address; City; State; Zip Code
	\$29.39	2211 N 1st St
		San Jose, CA 95131
F	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EX	PENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Service Fee
		Scrive ree
Com	plete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
	enditure to benefit C/OI	
Date		Payee name
	30/2023	Paypal
Amo	ount (\$)	Payee address; City; State; Zip Code
	\$22.17	2211 N 1st St
		San Jose, CA 95131
F	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
EX	OF PENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Service Fee
	nplete <u>ONLY</u> if direct enditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Слре	Shaltare to belieff 6/01	•

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment									Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID		(Ethics Commission	Filers)
	Sch: 10/10 Rpt: 35/46	_	Jackson, Au		Reeve (The	: Honorab	ıle)				00069799	9	()	,
4	Date	5	Payee name											
	11/13/2023		Smith Count	ty Rep	publican Pa	arty								
6	Amount (\$)	7	Payee addres	ss;	City;	State	e; Zip Co	de						
	\$1,500.00		3923 S Broa	adway	/ Ave.									
			Tyler, TX 75	701										
8	PURPOSE	(a)	Category (Se	e Categ	ories listed at th	e top of this so	chedule)	(b)	Description					
	OF EXPENDITURE		Fees						=				ete Schedule T.	
									Check if Austin	ı, TX,	officeholder liv	ing e	expense	
									Filing Fee					
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	cehold	er name		Office sou	ght			Office	hel	d	
	Date		Payee name											
	11/14/2023		Smith Count	ty Rep	publican W	omen/								
	Amount (\$)	H	Payee addres	ss;	City;	State	e; Zip Co	de						
	\$55.00		PO Box 817		- 31		-, [
	400.00		. 0 20% 02.	•										
			T. da TV 75	711										
			Tyler, TX 75	711										
	PURPOSE OF	(a)	Category (Se	e Categ	ories listed at th	e top of this so	chedule)	(b)	Description					
	EXPENDITURE		Office Overh	nead/I	Rental Exp	ense			=				ete Schedule T.	
								Check if Austin, TX, officeholder living expense Member dues						
			Weii						Welliber due.	3				
	0 1: 0 1: 0	L	0 11 1 10 11		1		0	<u>. </u>			0,11			
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	cenoia	er name		Office sou	gnt			Office	nei	a	
	Date		Payee name											
	10/18/2023		Tyler Area C	Chaml	ber of Com	ımerce								
	Amount (\$)		Payee addres	ss;	City;	State	e; Zip Co	de						
	\$175.00		315 N Broad	dway .	Ave.									
			Suite 100	•										
			Tyler, TX 75	702										
		L.	-											
	PURPOSE OF	(a)	Category (Se				chedule)	(b)	Description	otoi	do of Toyon C		ata Cabadula T	
	EXPENDITURE		Office Overh	nead/l	Rental Exp	ense			Check if travel				ete Schedule T.	
									Member due:		Onicendider iiv	mg c	эхрепас	
										-				
	Complete ONL V if direct	Ц,	Candidate/Offic	cahald	er name		Office corr	ah+			Office	hol	d	
	Complete ONLY if direct expenditure to benefit C/OI		Cariuluale/Offic	zenoia	ei iiaille		Office sou	yııı			Onice	nel	u	

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

The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Etl	hics Commiss	sion Filers)		
Sch: 1/9 Rpt: 36/46	Jackson, Austin Re	eve (The Honorable)	00069799					
4 CREDIT CARD ISSUER	Name of fina	ncial institution	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issue	r Paid			
	\$186.55	07/10/2023						
7 PAYEE	(a) Payee name		(b) Payee ac	ldress;	City,	State,	Zip Code	
	A 4 - Table		675 Ponce	de Leon Ave N	ΙE			
	Mailchimp		Suite 5000					
			Atlanta, GA	30308				
8 PURPOSE OF	(a) Category		(b) Description	on				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Advertising					
X Political	Advertising Expense							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living o	vnonco		
9 Complete ONLY if direct	Candidate/Officeholder	·	e sought	Check ii Austin, 17,	Office held	Apense		
expenditure to benefit C/OH			o ooug.n		000 1.0.0			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issue	r Paid			
	\$317.00	07/13/2023	(3) =(3) =					
PAYEE	(a) Payee name		(b) Payee ac	ldress;	City,	State,	Zip Code	
	Grassroots America	Grassroots America We the						
			Tyler, TX 7	5713				
PURPOSE OF	(a) Category		(b) Description	on				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Sponsorsh	ip				
X Political	Event Expense							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	·	Check if Austin, TX,	officeholder living ex	xpense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	<u>-</u>	Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C					
	\$6.50	07/29/2023						
PAYEE	(a) Payee name	l	(b) Payee ac	Idress;	City,	State,	Zip Code	
			225 Varick	Street			·	
	Squarespace		12th Floor					
			New York,	NY 10014				
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top		Website Ho					
X Political	Office Overhead/Ren	tal Expense		g				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living e	xpense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held			
i ——								

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

Printing Expense
Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete thi	is form.	(.,	,		
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	ics Commis	sion Filers)			
Sch: 2/9 Rpt: 37/46	Jackson, Austin Re	eve (The Honorable)	00069799						
4 CREDIT CARD ISSUER	Name of final	ncial institution	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid				
	\$341.39								
7 PAYEE	(a) Payee name		(b) Payee ac		City,	State,	Zip Code		
	Xpresso Print Cafe			o.t., p.					
			Tyler, TX 7	5702					
8 PURPOSE OF	(a) Category		(b) Description	on					
EXPENDITURE	(See Categories listed at the top Printing Expense	of this schedule)	Direct Mail						
X Political	Filling Expense								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	· [Check if Austin, TX,	officeholder living ex	oense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OH		-	_						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid				
	\$186.55	08/10/2023							
PAYEE	(a) Payee name		(b) Payee ac	ldress;	City,	State,	Zip Code		
	Mailalaiman	675 Ponce de Leon Ave NE							
	Mailchimp	Suite 5000							
			Atlanta, GA 30308						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
l <u> </u>	Advertising Expense	Advertising	I						
X Political									
Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OH	(a) Amount Charged	(h) Data of Charge	(a) Data(a) C	Stadit Card Issue	r Doid				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid						
	\$388.88	08/24/2023							
PAYEE	(a) Payee name	I	(b) Payee ac	ldress;	City,	State,	Zip Code		
			400 Holida	y Lane					
	Gotta Graze								
			Tyler, TX 7	5703					
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description						
EXPENDITURE	Event Expense	or and sorreduce)	Food Expe	nse					
X Political									
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	oense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OH									
1									

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

	The Inst	ruction Guide explains how	to complete th	is form.		.,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	sion Filers)
Sch: 3/9 Rpt: 38/46	Jackson, Austin Re	eve (The Honorable)			00069799		
4 CREDIT CARD ISSUER	Name of final	ncial institution	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid		
	\$50.00	08/25/2023					
7 PAYEE	(a) Payee name Lindale Area Cham	ber of	(b) Payee ac 205 S Mair		City,	State,	Zip Code
			Lindale, T				
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodula)	(b) Descripti				
EXPENDITURE	Fees	of this scriedule)	Member du	ues			
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid		
	\$66.00	08/28/2023					
PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code
	USPS		2627 S Bro	oadway Ave			
			Tyler, TX 7	75701			
PURPOSE OF	(a) Category		(b) Descripti				
EXPENDITURE	(See Categories listed at the top		Postage				
X Political	Office Overhead/Ren	iai Expense					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	, L	Check if Austin, TX,	officeholder living ex	pense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid		
	\$6.50	08/29/2023					
PAYEE	(a) Payee name	I	(b) Payee ac	ddress;	City,	State,	Zip Code
			225 Varick	Street			
	Squarespace		12th Floor				
			New York,	NY 10014			
PURPOSE OF	(a) Category		(b) Descripti				
EXPENDITURE	(See Categories listed at the top Office Overhead/Ren		Website H	osting			
X Political	onice Overneau/Rein	iai Expense					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	Check if Austin, TX,	officeholder living ex	pense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
—	1						

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

	The Insti	ruction Guide explains how	to complete this for	m.		.,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 4/9 Rpt: 39/46		eve (The Honorable)			00069799		
4 CREDIT CARD ISSUER	Name of final	ncial institution	5 TOTAL OF UI EXPENDITUE CHARGED TO CARD	RES	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credi	t Card Issuer	Paid		
	\$25.00	09/05/2023					
7 PAYEE	(a) Payee name CAPITAL ONE		(b) Payee address PO Box 60599		City,	State,	Zip Code
			Industry, CA 9	1716			
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodula)	(b) Description				
EXPENDITURE	Fees	of this scriedule)	Service Fee				
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Che	eck if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credi	t Card Issuer	Paid		
	\$69.25	09/08/2023					
PAYEE	(a) Payee name		(b) Payee addres	SS;	City,	State,	Zip Code
	Walmart		450 SSE Loop	323			
			Tyler, TX 7570	2			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Supplies				
X Political	Office Overhead/Rent	iai Expense					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Che	eck if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credi	t Card Issuer	Paid		
	\$12.74	09/09/2023					
PAYEE	(a) Payee name	<u> </u>	(b) Payee addres	SS;	City,	State,	Zip Code
			PO Box 60599	,	<i>3.</i>	,	•
	CAPITAL ONE						
			Industry, CA 9:	1716			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Interest				
X Political	Fees						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Che	eck if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought		Office held		
expenditure to benefit C/OH							

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

	The Inst	ruction Guide explains how	to complete this form.		
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Comm	ission Filers)
Sch: 5/9 Rpt: 40/46	Jackson, Austin Re	eve (The Honorable)		00069799	
4 CREDIT CARD ISSUER	Name of final	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid	
	\$186.55	09/11/2023			
7 PAYEE	(a) Payee name		(b) Payee address;	City, State	, Zip Code
	Mailchimp		675 Ponce de Leon Ave N Suite 5000	IE	
a purpose of	(a) Catagony		Atlanta, GA 30308		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Advertising		
X Political	Advertising Expense		Advertising		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chook if Austin TV	officeholder living expense	
9 Complete ONLY if direct	Candidate/Officeholder	•	e sought	Office held	
expenditure to benefit C/OH			o oodg.it		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid	
	\$268.63	09/11/2023			
PAYEE	(a) Payee name		(b) Payee address;	City, State	, Zip Code
	_		225 Varick Street		
	Squarespace		12th Floor		
			New York, NY 10014		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description		
X Political	Office Overhead/Rent		Website Hosting		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held	
expenditure to benefit C/OH					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid	
	\$200.00	09/23/2023			
PAYEE	(a) Payee name		(b) Payee address;	City, State	, Zip Code
	Cauca Croativa Cro	aun.	100 Independence PI #20	2	
	Cause Creative Gro	oup			
	() 5 :		Tyler, TX 75703		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description		
l <u> </u>	Event Expense	· · · · · · · · · · · · · · · · · · ·	Photography Services		
X Political	<u> </u>		<u> </u>		
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder	riame Office	e sought	Office held	
expenditure to benefit C/OH					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Mange/Control Labor

Candidate/Officenoider/Politica	-	ruction Guide explains how		THER (enter a category n	ot listed ab	ove)
1 Total pages Schedule F4:	2 FILER NAME	·	-	3 Filer ID (Ethics	Commiss	ion Filers)
Sch: 6/9 Rpt: 41/46		eve (The Honorable)		00069799		,
4 CREDIT CARD ISSUER	Name of final	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid		
	\$6.50	09/29/2023				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Squarespace		225 Varick Street			
	Squarespace		12th Floor			
			New York, NY 10014			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description			
<u></u>	Office Overhead/Rent		Website Hosting			
X Political						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	se .	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$186.55	10/10/2023				
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code
			675 Ponce de Leon Ave N	NE		
	Mailchimp		Suite 5000			
			Atlanta, GA 30308			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Advertising			
X Political	Advertising Expense					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	se	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$9.27	10/11/2023				
PAYEE	(a) Payee name	I.	(b) Payee address;	City,	State,	Zip Code
			PO Box 60599			
	CAPITAL ONE					
			Industry, CA 91716			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top	of this schedule)	Interest			
X Political	Fees					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin. TX.	officeholder living expens	se	
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	Office held		
expenditure to benefit C/OH			-			

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

	The Inst	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Sch: 7/9 Rpt: 42/46	Jackson, Austin Re	eve (The Honorable)		00069799		
4 CREDIT CARD ISSUER	Name of final	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid		
	\$532.07	10/12/2023				
7 PAYEE	(a) Payee name Texas Minority Coa	ulition	(b) Payee address; PO Box 130063	City,	State,	Zip Code
	() -		Tyler, TX 75713			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
l <u> </u>	Event Expense	or and concadio,	Event Tickets			
X Political						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			officeholder living expens	е		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH	(-) A Ol	(h) Data at Obarra	(-) D-+-(-) On-dit Od	. D. I.I		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid		
	\$6.50	10/30/2023				
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code
	0		225 Varick Street			
	Squarespace		12th Floor			
			New York, NY 10014			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
X Political	Office Overhead/Ren		Website Hosting			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	е	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid		
	\$186.55	11/10/2023				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			675 Ponce de Leon Ave N	ΙE		
	Mailchimp		Suite 5000			
			Atlanta, GA 30308			
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description			
EXPENDITURE	Advertising Expense	of this scriedule)	Advertising			
X Political						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		officeholder living expens	e	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH						

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

	The Inst	ruction Guide explains how	to complete t	his form.	(,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	sion Filers)
Sch: 8/9 Rpt: 43/46	Jackson, Austin Re	eve (The Honorable)			00069799		
4 CREDIT CARD ISSUER	Name of final	ncial institution	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$6.50	11/29/2023					
7 PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code
	Carranaanaa		225 Varic	k Street			
	Squarespace		12th Floor	r			
			New York	, NY 10014			
8 PURPOSE OF	(a) Category		(b) Descrip	tion			
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Website F	losting			
X Political	Office Overfleau/Rein	iai Experise					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	· [Check if Austin, TX,	officeholder living ex	pense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$263.50	12/01/2023					
PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code
	Grassroots America	a We the	PO Box 1	30012			
			Tyler, TX	75713			
PURPOSE OF	(a) Category		(b) Descrip	tion			
EXPENDITURE	(See Categories listed at the top	of this schedule)	Event Ticl	kets			
X Political	Event Expense						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	· [Check if Austin, TX,	officeholder living ex	pense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	<u> </u>	Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$191.88	12/11/2023					
PAYEE	(a) Payee name	l	(b) Payee a	address;	City,	State,	Zip Code
			675 Ponc	e de Leon Ave N			·
	Mailchimp		Suite 500		-		
			Atlanta, G				
PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Advertisin	g			
X Political	Advertising Expense						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
· -							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Mange/Control Labor

Candidate/Officeholder/Politica	-	rices Sa ruction Guide explains how		OTHER (enter a catego	ry not listed at	bove)
1 Total pages Schedule F4:		ruction Guide explains non	to complete this form.	3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 9/9 Rpt: 44/46		eve (The Honorable)		00069799	00 0011111100	5,011 1 11010)
4 CREDIT CARD ISSUER		ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
	\$700.00	12/22/2023				
7 PAYEE	(a) Payee name Smith County Repu	ıblican Women	(b) Payee address; PO Box 8175 Tyler, TX 75711	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatic		(b) Description Event Donation			
Non-Political		of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living exp	nense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	· · · · · · · · · · · · · · · · · · ·	e sought	Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
	\$6.50	12/29/2023				
PAYEE	(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code
	Squarespace		225 Varick Street 12th Floor New York, NY 10014			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Ren		(b) Description Website Hosting			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	., officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought	Office held		

	EST, CREDITS, GAINS, REFUNDS, A RIBUTIONS RETURNED TO FILER	AND	SCHEDULE K
The Instru	ction Guide explains how to complete this form.		tal pages Schedule K: ch: 1/1 Rpt: 45/46
FILER NAME Jackson, Au	stin Reeve (The Honorable)	3 File	er ID (Ethics Commission Filers) 1069799
Date 09/21/2023	Name of person from whom amount is received Milam, Matthew Address of person from whom amount is received; City; State	e; Zip Code	8 Amount (\$) \$100.0
	Tyler, TX 75701 7 Purpose for which amount is received Political Contribution	X Check if political (contribution returned to filer

OUTSTAN	NDING LOANS	SCHEDULE L
The Instruction	on Guide explains how to complete this form.	1 Total pages Schedule L: Sch: 1/1 Rpt: 46/46
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)	1
	5 Lender address; City; State; Zip Code	
	Tyler, TX 75711	
GUARANTOR INFORMATION	6 Name of guarantor	
X not applicable	7 Guarantor address; City; State; Zip Code	