FORM JSPAC JUDICIAL SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The JSPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00068772 3 COMMITTEE NAME **OFFICE USE ONLY** Texans for Jeff Boyd Date Received **ELECTRONICALLY FILED** 01/11/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1108 Lavaca Street Date Hand-delivered or Date Postmarked Suite 110, Box 688 Change of Address Austin, TX 78701 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. James Bruce NAME NICKNAME LAST **SUFFIX** Bugg Jr. STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 8000 IH 10 West, Ste. 1100 STREET **ADDRESS** (Residence or Business) San Antonio, TX 78230 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** P.O. Box 90837 MAILING **ADDRESS** San Antonio, TX 78209 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 601-8444 PHONE REPORT January 15 30th day before election Exceeded modified reporting limit **TYPE** Dissolution (Attach JSPAC-DR) 8th day before election July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Day Year Month Year Day Month **COVERED THROUGH** 07/01/2023 12/31/2023 11 **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other **ELECTION** General Special **GO TO PAGE 2**

JUDICIAL SPECIFIC - PURPOSE COMMITTEE REPORT: PURPOSE & TOTALS

FORM JSPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)	,				
Texans for Jeff Boyd			00068772						
14 COMMITTEE		CANDIDATE / OFFICEHOLDER NAME	<u>.l</u>						
PURPOSE		The Honorable Jeff Boyd							
(Attach lists on plain paper to complete this									
report if necessary.)	Candidate								
SUPPORT		OFFICE SOUGHT (candidate) / OFFICE HEI	LD (officeholder)		_				
(Candidate)		Supreme Court Justice	LD (Uniceriolaer)						
OPPOSE									
(Candidate)	X Officeholder								
X ASSIST									
(Officeholder)									
15 CONTRIBUTION	1. TOTAL POLITICAL CON	TRIBUTIONS OF \$50 OR LESS (OTHER THA	N PLEDGES,	T	_				
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE		\$ \$0.0	00				
					_				
	2. TOTAL POLITICAL CO			\$ \$0.0	^				
	(OTHER THAN PLEDGE	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)							
EXPENDITURE			_						
TOTALS	\$ \$85.0	00							
	. TOTAL DOLUTION F			 					
	4. TOTAL POLITICAL EX	KPENDITURES		\$ \$19,169.1	15				
				, , , , , , , , , , , , , , , , , , , 					
CONTRIBUTION	1	TRIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE		_				
BALANCE	REPORTING PERIOD			\$ \$42,878.5	52				
OUTSTANDING	6 TOTAL PRINCIPAL AMO	OUNT OF ALL OUTSTANDING LOANS AS OF	THELAST		_				
LOAN TOTALS	DAY OF THE REPORTIN		IIIL LAST	\$ \$0.0	00				
16 AFFIDAVIT									
		lanca and the second se	oli on a de adade a a a a						
		I swear, or affirm, under penalty of per and correct and includes all information							
		Title 15, Election Code.							
		Mr. James	Bruce Bugg Jr.						
		Signature of Cr	ampaign Treasur	er					
AFFIX NOTARY	STAMP / SEAL ABOVE								
			this the	day					
of	_, 20, to certify which	n, witness my hand and seal of office.							
Signature of officer add	ministoring oath Pring	ted name of officer administering oath	Title of office	er administering oath					
Signature or omocr au	Illilistering batti i illi	eu lidine of officer authinistering oath	TIUC OI OIIIO	er aummistering oam					

SUBTOTALS - JSPAC

FORM JSPAC COVER SHEET PG 3

			3 of 18								
	17 COMMITTEE NAME18 Filer ID(Ethics Commission Filers)Texans for Jeff Boyd00068772										
	LE SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT								
1.	\$										
2.	\$										
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$								
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$								
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	IS	\$ 19,169.15								
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$								
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$								
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD										
9.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$								
10.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$								
11. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$ 7,875.54								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising Expense Event Expense Loan Repayment/Reimbu

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Leaal Services Salaries/Waacs/Contract Labor

	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: 1/12 Rpt: 4/18	Texans for Jeff Boyd 00068772
4	Date	5 Payee name
	12/27/2023	Apple
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,730.92	One Apple Park Way
		Cupertino, CA 95014
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Laptop computer Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Officeholder's MacBook Air
		Cilicerolaci 3 Macebook 7 Mi
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
F	Date	Payee name
	08/07/2023	Barbara Jordan American Inn of Court
H	Amount (\$)	Payee address; City; State; Zip Code
	\$550.00	225 Reinekers Lane
		 #770
		Alexandria, VA 22314
H	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
		Membership dues
L		
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
┕		
	Date	Payee name
L	07/27/2023	Bert's BBQ
	Amount (\$)	Payee address; City; State; Zip Code
	\$83.89	3563 Far W Blvd. #109
		Austin, TX 78731
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Staff meeting
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H		
Ī		

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	·		/ages	/Contract Labor		OTHER (ent		ategory not listed above)	
		_		The Instruction	Guide explain	s now to co	mpie	-					
1	Total pages Schedule F1:	2	FILER NAME							Filer ID		(Ethics Commission Filer	s)
	Sch: 2/12 Rpt: 5/18		Texans for	Jeff Boyd						0006877	'2		
4	Date	5	Payee name										
	08/18/2023		Bert's BBQ										
-	Amount (¢)	 		cc: City:	Ctat	o: Zin Co	do						
6	Amount (\$)	7	Payee addre		Sidi	e; Zip Co	ue						
	\$61.56		3563 Far W	/ Blvd. #109									
			Austin, TX	78731									
8	PURPOSE	(a)	Category (s	ee Categories listed	at the ten of this s	chodulo)	(b)	Description					
	OF	l`		rage Expense	at the top of this s	criedule)	` '	Check if travel o	utsi	de of Texas. (Compl	ete Schedule T.	
	EXPENDITURE		. 000,2010.	age =/tperior				Check if Austin,	TX,	officeholder I	iving e	expense	
								Staff meeting					
9	Complete ONLY if direct	(Candidate/Off	iceholder name		Office sou	aht			Office	e heli	h	
-	expenditure to benefit C/OI						9					_	
		_											
	Date		Payee name										
	09/14/2023		Bert's BBQ										
	Amount (\$)		Payee addre	ss; City;	Stat	e; Zip Co	de						
	\$70.17		3563 Far W	/ Blvd. #109									
			Austin, TX	79721									
		<u> </u>											
	PURPOSE OF	(a)	Category (S	ee Categories listed	at the top of this s	chedule)	(b)	Description					
	EXPENDITURE		Food/Bever	rage Expense				Check if travel o					
								Check if Austin, Staff meeting	۱۸,	onicendider i	iviliy e	expense	
								Stail meeting					
		_											
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	iceholder name		Office sou	ght			Office	e hel	d	
	experialitate to benefit 6/61												
	Date		Payee name										
	08/23/2023		Chateau Be	ellevue									
	Amount (\$)		Payee addre	ss; City;	Stat	e; Zip Co	de						
	\$7,323.38		•	ntonio Street	Otat	.o, <u>L</u> .p oo	uo						
	Ψ1,323.30		700 Jan Ai	itoriio Street									
			Austin, TX	78701									
	PURPOSE	(a)	Category (S	ee Categories listed	at the top of this s	chedule)	(b)	Description					
	OF EXPENDITURE		Event Expe					Check if travel o					
	EXPENDITORE							Check if Austin,					
								Court's annua	ıl fa	arewell di	nne	r for clerks	
		L											
	Complete ONLY if direct		Candidate/Off	iceholder name		Office sou	ght			Office	e hel	d	
	expenditure to benefit C/OI	Н											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		nmittee	Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2	FILER NAME	:						3	Filer ID)	(Ethics Commission File	rs)
	Sch: 3/12 Rpt: 6/18		Texans for .		t						00068	3772		
4	Date	5	Payee name											
	08/25/2023		HEB											
6	Amount (\$) \$31.44		Payee address 1000 East 4	l1st	ity;	State	; Zip Co	ode						
8	PURPOSE	(a)	Category (Se	e Categorie	s listed at the	top of this sch	nedule)	(b)	Description					
	OF EXPENDITURE		Food/Bever						Check if travel	outsi	de of Texa	as. Com	plete Schedule T.	
	LAFENDITORE								Catering for C				arewell dinner for cle	erks
L								l 						
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder	name	(Office sou	ght			Of	fice he	eld	
Г	Date	Γ	Payee name					_						
	08/25/2023		HEB											
	Amount (\$)	Г	Payee addres	ss; C	ity;	State	; Zip Co	de						
	\$60.01		1000 East 4	1st										
		├	Austin, TX 7					_						
	PURPOSE OF	(a)	Category (Se			top of this sch	nedule)	(b)	Description				aleta C. L	
	EXPENDITURE		Food/Bever	age Exp	ense				Check if travel of Check if Austin,				plete Schedule T. Lexpense	
								1	ш				arewell dinner for cle	erks
											_ 611	1		7
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder	name	(Office sou	ght			Of	fice he	eld	
	Date	Γ	Payee name									_		
	08/03/2023		Hilton Garde	en Inn										
	Amount (\$)	\vdash	Payee addres	ss; C	ity;	State	; Zip Co	de						
	\$170.20		3755 IH-10		•		,							
	, 2. 3.23		20											
			South Beau	mont, T	X 77705									
	PURPOSE OF	(a)	Category (Se		s listed at the	top of this sch	nedule)	(b)	Description				aleta C. L	
	EXPENDITURE		Travel In Di	strict					Check if travel of Check if Austin,				plete Schedule T.	
													er Firm meeting	
									C.IIOCITOIUCI I	. Jul	əy 101	311	mocung	
	Complete ONLY if direct	<u>_</u>	Candidate/Offi	ceholder	name	(Office sou	ght			Of	fice he	eld	
	expenditure to benefit C/O				, .	·		<i>y</i>			3.		-	
		_						_		_				
_		·	<u> </u>											

SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries Wagnes/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 4/12 Rpt: 7/18	Texans for Jeff Boyd 00068772
4	Date	5 Payee name
	09/11/2023	JW Marriott San Antonio
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$374.80	23808 Resort Parkway
		San Antonio, TX 78261
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Officeholder lodging for Litigation Council meeting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	07/12/2023	Millan & Company, P.C.
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.63	812 San Antonio Street
		Suite L17
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		CPA services
		617166.11666
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
_	Date	Davies same
	08/07/2023	Payee name Millan & Company, P.C.
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.63	812 San Antonio Street
		Suite L17
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense CPA services
		OI // Scivides
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services			/ages	/Contract Labor		OTHER (enter	a category not listed above))
		_		The Instruction Gu	lide explains no	ow to coi	mpie	ete tnis form.	_			
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission	Filers)
	Sch: 5/12 Rpt: 8/18		Texans for J	leff Boyd						00068772		
4	Date	5	Payee name									
	09/07/2023		Millan & Cor	mpany, P.C.								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$60.66		812 San Ant	tonio Street								
			Suite L17									
		l	Austin, TX 7	9701								
Ļ		⊢	· · · · · · · · · · · · · · · · · · ·			-						
8	PURPOSE OF			e Categories listed at t	ne top of this sched	dule)	(b)	Description				
	EXPENDITURE		Accounting/I	Banking						officeholder livin	nplete Schedule T.	
								CPA services		Officeriolaer livin	g expense	
								0.7.00.7.000				
Ļ	Commission ONII V if disposi	Щ	Canadidate/Offic		04	¥:	a la t			Office le	ماما	
9	Complete ONLY if direct expenditure to benefit C/O		Jandidate/Offic	ceholder name	Off	fice sou	gnt			Office h	eia	
	<u>'</u>											
	Date		Payee name									
	10/06/2023		Millan & Cor	mpany, P.C.								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$140.66		812 San Ant	tonio Street								
			Suite L17									
			Austin, TX 7	9701								
	D. IDD 0.05	⊢				1	<i>a</i> >					
	PURPOSE OF			e Categories listed at t	ne top of this sched	dule)	(b)	Description	outoi	de of Toyloo Cor	mulata Cabadula T	
	EXPENDITURE		Accounting/I	Banking				=		officeholder livin	nplete Schedule T. a expense	
								CPA services			gp	
_	Complete ONLY if direct	<u> </u>	Candidate/Offic	reholder name	Of	fice sou	aht			Office h	eld	
	expenditure to benefit C/O		zarialaato/ O iii	onorder name	O.	1100 000	9			01110011	olu	
		_										
	Date	ı	Payee name									
	11/02/2023		Millan & Cor	npany, P.C.								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$80.66		812 San Ant	tonio Street								
			Suite L17									
			Austin, TX 7	8701								
	PURPOSE	⊢		e Categories listed at t			(h)	Description				
	OF		Accounting/I		ne top of this sched	dule)	(2)		outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		Accounting/i	Darking				Check if Austin,	, TX,	officeholder livin	g expense	
								CPA services	6			
	Complete ONLY if direct		Candidate/Offic	ceholder name	Of	fice sou	ght			Office h	eld	
	expenditure to benefit C/O					•						
-												
1												

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Event Expense Fees

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

	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: 6/12 Rpt: 9/18	Texans for Jeff Boyd 00068772
4	Date	5 Payee name
	12/07/2023	Millan & Company, P.C.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.66	812 San Antonio Street
		Suite L17
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense CPA services
		CPA Services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
H	Date	Payee name
	09/12/2023	Perry's Steakhouse & Grille
H	Amount (\$)	Payee address; City; State; Zip Code
	\$431.66	114 W 7th Street
	Ψ-101.00	114 W Full Guide
		Austin, TX 78701
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EX. ENDITORE	Check if Austin, TX, officeholder living expense
		Courts Annual Conference + Retreat
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· ·
F	Date	Payee name
	12/22/2023	Roaring Fork
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$108.77	701 Congress Ave
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EX. ENDITORE	Check if Austin, TX, officeholder living expense
		Staff meeting
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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

	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: 7/12 Rpt: 10/18	Texans for Jeff Boyd 00068772
4	Date	5 Payee name
	09/20/2023	Scholz Beer Garten
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$341.29	1607 San Jacinto Blvd.
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense New Clerks Welcome Reception
		New Clarks Welcome Reception
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	08/23/2023	SiteGround
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$191.75	700 N Fairfax St.
	Ψ101.10	Ste. 614
L		Alexandria, VA 22314
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign website hosting
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/27/2023	Southwest Airlines
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$393.97	2702 Love Field Drive
		Dallas, TX 75235
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Officeholder airfare to attend TYLA meeting
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	y
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Cor 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		mmittee L	Sift/Awards/Memoria egal Services The Instruction (·		/ages	/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed a	above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 8/12 Rpt: 11/18		Texans for J	eff Boyd						00068772		,
4	Date	5	Payee name									
	11/08/2023		Southwest A	irlines								
6	Amount (\$)	7	Payee address	s; City;	State	; Zip Co	de					
	\$179.96		2702 Love F	eld Drive								
			Dallas, TX 7	5235								
8	PURPOSE	(a)	Category (See	Categories listed at	t the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Travel In Dis	trict				=			plete Schedule T.	
								Officeholder a		officeholder living		a oral
								arguments	ann	are to attern	a Court Hearin	y orai
9	Complete ONLY if direct	<u> </u>	Candidate/Offic	aholder namo		Office sou	abt	-		Office he	ald	
9	expenditure to benefit C/OI		Sanuidate/Offic	choluci name	(onice sou	yııl			Onice III	u	
_	Data											
	Date		Payee name									
	11/08/2023		Southwest A									
	Amount (\$)		Payee address		State	; Zip Co	de					
	\$187.96		2702 Love F	eld Drive								
			Dallas, TX 7	5235								
	PURPOSE	(a)	Category (See	Categories listed at	t the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Travel In Dis	trict				=			plete Schedule T.	
								Officeholder a		officeholder living		moeting &
								speak at the I				meeting &
	Complete ONLY if direct		Candidate/Offic	eholder name		Office sou	aht			Office he	eld	
	expenditure to benefit C/OI		ouraraato, omo		·	J	9			000		
_	Date		Payee name									
	08/25/2023		•	s, Spirits and	Finer Foods							
	Amount (\$)		Payee address			; Zip Co	do					
	\$367.71		4970 US-290	-	State	, Ζιρ Cυ	ue					
	Ψ301.11		4970 03-290	,								
			Austin, TX 78	3735								
	PURPOSE	(a)	Category (See	Categories listed at	t the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Food/Bevera	-		<i></i>		Check if travel of			plete Schedule T.	
	LAFLINDITORE							_		officeholder living		
								Catering for C	JOU	irt's annual i	rarewell dinne	r tor cierks
	Complete ONLY if direct	Ļ	Candidata/Offic	ahaldar nama		Office com	abt			Office he	ald	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	enoluel name	(Office sou	yııl			Onice no	c iu	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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: 9/12 Rpt: 12/18	Texans for Jeff Boyd 00068772
4	Date	5 Payee name
	07/06/2023	Surefire Public Affairs, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$350.00	15700 Cinca Terra Drive
		Austin, TX 78738
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Political staff expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	08/03/2023	Surefire Public Affairs, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$350.00	15700 Cinca Terra Drive
	φ330.00	13700 Cilica Tella Dilve
		Austin, TX 78738
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Political staff expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	09/07/2023	Surefire Public Affairs, LLC
_		Payee address; City; State; Zip Code
	Amount (\$) \$350.00	15700 Cinca Terra Drive
	\$350.00	15700 Cirica Terra Drive
		A . (f TV 70700
		Austin, TX 78738
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Political staff expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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 Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1: Sch: 10/12 Rpt: 13/18	FILER NAME Texans for Jeff Boyd	3 Filer ID (Ethics Commission Filers) 00068772
4	Date 10/06/2023	5 Payee name Surefire Public Affairs, LLC	00000112
6	Amount (\$) \$350.00	7 Payee address; City; State; Zip Code 15700 Cinca Terra Drive	
8	PURPOSE OF EXPENDITURE	Austin, TX 78738 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political staff expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 11/02/2023	Payee name Surefire Public Affairs, LLC	
	Amount (\$) \$350.00	Payee address; City; State; Zip Code 15700 Cinca Terra Drive Austin, TX 78738	
	PURPOSE OF EXPENDITURE		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political staff expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 12/06/2023	Payee name Surefire Public Affairs, LLC	
	Amount (\$) \$350.00	Payee address; City; State; Zip Code 15700 Cinca Terra Drive	
		Austin, TX 78738	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political staff expense
	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 -

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	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/12 Rpt: 14/18	Texans for Jeff Boyd 00068772
4	Date	5 Payee name
	10/05/2023	Texas Supreme Court Benevolence Fund
6	Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code P.O. Box 12248
		Austin, TX 78711
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Cincerolaer Contribution
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/18/2023	The American Law Institute
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.00	4025 Chestnut Street
		Philadelphia, PA 19104
	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 Membership dues
		Methbership dues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	08/25/2023	Twin Liquors
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.03	1801 E 51st St
		Suite 100
		Austin, TX 78723
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Catering for Court's annual farewell dinner for clerks
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct 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 C

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	d 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:	
	Sch: 12/12 Rpt: 15/18	Texans for Jeff Boyd 00068772
4	Date	5 Payee name
	12/04/2023	UPS Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$312.00	1108 Lavaca St.
		Ste 110
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Post office box renewal
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialiture to benefit C/Oi	
	Date	Payee name
	08/25/2023	Walmart
	Amount (\$)	Payee address; City; State; Zip Code
	\$63.78	2525 W Anderson Ln
		Austin, TX 78757
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Catering for Court's annual farewell dinner for clerks
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
l		

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

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	ı		ages Schedule K: ./2 Rpt: 16/18	
2	FILER NAME		3	Filer ID	(Ethics Commission	on Filers)
	Texans for J	eff Boyd		00068	772	
4	Date 09/21/2023	 Name of person from whom amount is received Blacklock, Jimmy (The Honorable) Address of person from whom amount is received; City; State; Zip Code 			8 Amount (\$)	\$876.26
		Austin, TX 78711				
		7 Purpose for which amount is received Check if p	olitic	al contr	ribution returned to fil	er
		Reimbursement of officeholder expenses for the Court's annual farewell din				
	Date	Name of person from whom amount is received			Amount (\$)	
	09/21/2023	Bland, Jane (The Honorable)				\$876.26
		Address of person from whom amount is received; City; State; Zip Code				
		Austin, TX 78711				
					ribution returned to fil	er
		Reimbursement of officeholder expenses for the Court's annual farewell din	ner	for cle	rks.	
	Date	Name of person from whom amount is received			Amount (\$)	
	12/26/2023	Boyd, Jeff (The Honorable)				\$865.46
		Address of person from whom amount is received; City; State; Zip Code				
		Austin, TX 78701				
		Purpose for which amount is received Check if p	olitic	al contr	ribution returned to fil	er
		Reimbursement for 1/2 cost of Apple Macbook Air				
	Date	Name of person from whom amount is received			Amount (\$)	
	09/21/2023	Busby, J. Brett (The Honorable)				\$876.26
		Address of person from whom amount is received; City; State; Zip Code			1	
		Austin, TX 78711				
			olitic	al contr	<u> </u> ribution returned to fil	er
		Reimbursement of officeholder expenses for the Court's annual farewell din				01
	Date	Name of person from whom amount is received			Amount (\$)	
	09/21/2023	Devine, John (The Honorable)				\$876.26
		Address of person from whom amount is received; City; State; Zip Code				
		Austin, TX 78711				
			olitic	al contr	 ribution returned to fil	er
		Reimbursement of officeholder expenses for the Court's annual farewell din				~·

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

SCHEDULE K

l	The Instru	cti	on Guide explains how to complete this form.	ı		ages Schedule K: 2/2 Rpt: 17/18	
2	FILER NAME			3	Filer ID) (Ethics Commission	n Filers)
	Texans for Jeff Boyd				00068	3772	
┝	Date		Name of person from whom amount is received			8 Amount (\$)	
l	09/21/2023		Hecht, Nathan (The Honorable)				\$876.26
		ا	Address of person from whom amount is received; City; State; Zip Code			•	,
		ľ	Address of person from whom amount is received, City, State, 2ip Code				
			Austin, TX 78711				
		 -	_	olitic	al cont	I ribution returned to file	or
		ľ	Reimbursement of officeholder expenses for the Court's annual farewell din				31
⊨		<u> </u>	Treimbarsement of officeriolaer expenses for the courts arintal fallower air		101 010	1110.	
l	Date		Name of person from whom amount is received			Amount (\$)	
	09/21/2023		Huddle, Rebecca (The Honorable)				\$876.26
		ļ''''	Address of person from whom amount is received; City; State; Zip Code				
			Austin, TX 78711				
			Purpose for which amount is received	olitic	al cont	ribution returned to file	er
			Reimbursement of officeholder expenses for the Court's annual farewell din	ner	for cle	erks.	
	Date	-	Name of person from whom amount is received			Amount (\$)	
	10/19/2023		Lehrmann, Debra (The Honorable)				\$876.26
		ļ	Address of person from whom amount is received; City; State; Zip Code				
			Address of person from whom amount is received, Gity, State, 21p code				
l			Austin, TX 78711				
ı							
		Г	Purpose for which amount is received	olitic	al cont	ribution returned to file	er
			Purpose for which amount is received			ribution returned to file	er
	Date		Reimbursement of officeholder expenses for the Court's annual farewell din			rks.	er
l	Date		Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received				
l	Date 09/21/2023		Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received Young, Evan (The Honorable)			rks.	\$876.26
l			Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received			rks.	
ı			Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received Young, Evan (The Honorable)			rks.	
ı			Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received Young, Evan (The Honorable) Address of person from whom amount is received; City; State; Zip Code			rks.	
l			Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received Young, Evan (The Honorable) Address of person from whom amount is received; City; State; Zip Code Austin, TX 78711	ner	for cle	Amount (\$)	\$876.26
l			Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received Young, Evan (The Honorable) Address of person from whom amount is received; City; State; Zip Code Austin, TX 78711 Purpose for which amount is received	olitic	al cont	Amount (\$) ribution returned to file	\$876.26
l			Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received Young, Evan (The Honorable) Address of person from whom amount is received; City; State; Zip Code Austin, TX 78711	olitic	al cont	Amount (\$) ribution returned to file	\$876.26
ı			Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received Young, Evan (The Honorable) Address of person from whom amount is received; City; State; Zip Code Austin, TX 78711 Purpose for which amount is received	olitic	al cont	Amount (\$) ribution returned to file	\$876.26
l			Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received Young, Evan (The Honorable) Address of person from whom amount is received; City; State; Zip Code Austin, TX 78711 Purpose for which amount is received	olitic	al cont	Amount (\$) ribution returned to file	\$876.26
l			Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received Young, Evan (The Honorable) Address of person from whom amount is received; City; State; Zip Code Austin, TX 78711 Purpose for which amount is received	olitic	al cont	Amount (\$) ribution returned to file	\$876.26
l			Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received Young, Evan (The Honorable) Address of person from whom amount is received; City; State; Zip Code Austin, TX 78711 Purpose for which amount is received	olitic	al cont	Amount (\$) ribution returned to file	\$876.26
ı			Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received Young, Evan (The Honorable) Address of person from whom amount is received; City; State; Zip Code Austin, TX 78711 Purpose for which amount is received	olitic	al cont	Amount (\$) ribution returned to file	\$876.26
ı			Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received Young, Evan (The Honorable) Address of person from whom amount is received; City; State; Zip Code Austin, TX 78711 Purpose for which amount is received	olitic	al cont	Amount (\$) ribution returned to file	\$876.26
ı			Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received Young, Evan (The Honorable) Address of person from whom amount is received; City; State; Zip Code Austin, TX 78711 Purpose for which amount is received	olitic	al cont	Amount (\$) ribution returned to file	\$876.26
ı			Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received Young, Evan (The Honorable) Address of person from whom amount is received; City; State; Zip Code Austin, TX 78711 Purpose for which amount is received	olitic	al cont	Amount (\$) ribution returned to file	\$876.26
ı			Reimbursement of officeholder expenses for the Court's annual farewell din Name of person from whom amount is received Young, Evan (The Honorable) Address of person from whom amount is received; City; State; Zip Code Austin, TX 78711 Purpose for which amount is received	olitic	al cont	Amount (\$) ribution returned to file	\$876.26

Hand As of The Last Day of The Reporting Perio	CALLINI E IVI
The Instruction Guide explains how to complete this form.	1 Total pages Schedule M: Sch: 1/1 Rpt: 18/18
2 FILER NAME Texans for Jeff Boyd	3 Filer ID (Ethics Commission Filers) 00068772
Description of Asset Laptop computer: MacBook Air	