

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b> (Ethics Commission Filers) 00088078	<b>2 Total pages filed:</b> 37				
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR Mr.	FIRST Jason Mitchell	MI	<b>OFFICE USE ONLY</b>			
	NICKNAME	LAST Little	SUFFIX		Date Received <b>ELECTRONICALLY FILED</b> 01/16/2024		
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 2841 Seven Shields Lane  Lewisville, TX 75056			Date Hand-delivered or Date Postmarked			
				Receipt #      Amount			
				Date Processed			
				Date Imaged			
<b>5 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR Mrs.	FIRST Caitlyn B.	MI				
	NICKNAME	LAST Tortorici	SUFFIX				
<b>6 CAMPAIGN TREASURER ADDRESS</b>  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 421 Office Park Drive  Mountain Brook, AL 35223						
<b>7 CAMPAIGN TREASURER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION				
	(205)	440-2873					
<b>8 REPORT TYPE</b>	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)						
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)						
<b>9 PERIOD COVERED</b>	Month	Day	Year	THROUGH	Month	Day	Year
		10/17/	2023			12/31/	2023
<b>10 ELECTION</b>	ELECTION DATE Month    Day    Year 03/05/2024			ELECTION TYPE			
				<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	
			<input type="checkbox"/> General	<input type="checkbox"/> Special			
<b>11 OFFICE</b>	OFFICE HELD (if any)			<b>12 OFFICE SOUGHT (if known)</b> State Representative District 65			

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

2 of 37

<b>13 C / OH NAME</b> Little, Jason Mitchell (Mr.)	<b>14 Filer ID</b> (Ethics Commission Filers) 00088078
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	<b>COMMITTEE TYPE</b>  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>  <hr/> <b>COMMITTEE ADDRESS</b>  <hr/> <b>COMMITTEE CAMPAIGN TREASURER NAME</b>  <hr/> <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>  <hr/>

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 170,030.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 95,893.29
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 149,136.71
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 75,000.00

**17 AFFIDAVIT**

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

\_\_\_\_\_  
 Mr. Jason Mitchell Little  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

3 of 37

<b>18 FILER NAME</b> Little, Jason Mitchell (Mr.)		<b>19 Filer ID</b> (Ethics Commission Filers) 00088078
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 170,030.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 75,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 95,893.29
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/21 Rpt: 4/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ADAMS, CAROL <hr/> <b>6</b> Contributor address; City; State; Zip Code  DALLAS, TX 75225	<b>7</b> Amount of Contribution (\$)  \$10,000.00
<b>8</b> Principal occupation / Job title (See Instructions) OIL AND GAS		<b>9</b> Employer (See Instructions) SELF EMPLOYED
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BAKER, JOSEPH <hr/> Contributor address; City; State; Zip Code  FRISCO, TX 75034	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SCHEEF & STONE, LLP
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BAKER, NICK <hr/> Contributor address; City; State; Zip Code  HOUSTON, TX 77009	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) ADVISOR		Employer (See Instructions) IMG
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BARNES, MICHAEL <hr/> Contributor address; City; State; Zip Code  FRISCO, TX 75034	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) BARNES CAPITAL MANAGEMENT
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BEEBE, MATTHEW <hr/> Contributor address; City; State; Zip Code  ALAMO HEIGHTS, TX 78209	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) HEI

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/21 Rpt: 5/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BELVILLE, LLOYD <hr/> <b>6</b> Contributor address; City; State; Zip Code  CARROLLTON, TX 75007	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) RETIRED		<b>9</b> Employer (See Instructions) RETIRED
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BISHOP, JAN <hr/> Contributor address; City; State; Zip Code  RUSK, TX 75785	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BOOS, JONATHAN <hr/> Contributor address; City; State; Zip Code  GARLAND, TX 75044	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) J2B HOLDINGS, LLC
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BOX, THOMAS A <hr/> Contributor address; City; State; Zip Code  IRVING, TX 75038	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) THOMAS BOX, P.C.
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BRIGHT, HARVEY <hr/> Contributor address; City; State; Zip Code  LEWISVILLE, TX 75056	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) INDEPENDENTLY WEALTHY		Employer (See Instructions) SELF EMPLOYED

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/21 Rpt: 6/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BRIGHT, HEIDI <hr/> <b>6</b> Contributor address; City; State; Zip Code  LEWISVILLE, TX 75056	<b>7</b> Amount of Contribution (\$)  \$10,000.00
<b>8</b> Principal occupation / Job title (See Instructions) HOMEMAKER		<b>9</b> Employer (See Instructions) HOMEMAKER
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BRIGHT, JUSTIN <hr/> Contributor address; City; State; Zip Code  LEWISVILLE, TX 75056	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) BRIGHT WEALTH MANAGEMENT
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BRIGHT, PARKER <hr/> Contributor address; City; State; Zip Code  DALLAS, TX 75214	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) BRIGHT REALTY
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) CARRINGTON, HENRY <hr/> Contributor address; City; State; Zip Code  BARTONVILLE, TX 76226	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) CARRINGTON, HENRY <hr/> Contributor address; City; State; Zip Code  BARTONVILLE, TX 76226	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/21 Rpt: 7/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) CHESHIRE, JOHN <hr/> <b>6</b> Contributor address; City; State; Zip Code  BEENBROOK, TX 76116	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) CHESHIRE INDUSTRIES
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) CLEM-BYRNES, LORI <hr/> Contributor address; City; State; Zip Code  CARROLLTON, TX 75010	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) INVESTMENT ADVISOR REP		Employer (See Instructions) BFC PLANNING
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) CORDRE, SUSAN <hr/> Contributor address; City; State; Zip Code  CARROLLTON, TX 75010	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) CRANE, RUTH <hr/> Contributor address; City; State; Zip Code  MISSOURI CITY, TX 77459	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) CREUTZMANN, FREDERICK <hr/> Contributor address; City; State; Zip Code  CARROLLTON, TX 75007	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/21 Rpt: 8/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 10/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DOLLINS, CHRISTOPHER <hr/> <b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77057	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) OWNER INVESTOR		<b>9</b> Employer (See Instructions) SELF EMPLOYED
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DOLLINS, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code  HOUSTON, TX 77057	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) OWNER INVESTOR		Employer (See Instructions) SELF EMPLOYED
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DYESS, JERRY <hr/> Contributor address; City; State; Zip Code  LEWISVILLE, TX 75056	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ECKARD, TROY <hr/> Contributor address; City; State; Zip Code  VAN ALSTYNE, TX 75495	Amount of Contribution (\$)  \$25,000.00
Principal occupation / Job title (See Instructions) OIL AND GAS		Employer (See Instructions) ECKARD GLOBAL ENERGY LLC
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ELLEN, MARY <hr/> Contributor address; City; State; Zip Code  AUSTIN, TX 78723	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) LENNOX



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/21 Rpt: 9/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 11/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ENBERG, SUSAN <hr/> <b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77070	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) AV WATER TECHNOLOGIES INC
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ESSIN, MARTHA <hr/> Contributor address; City; State; Zip Code  SHERMAN, TX 75092	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GADD, JANET <hr/> Contributor address; City; State; Zip Code  THE COLONY, TX 75056	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GADD, JANET <hr/> Contributor address; City; State; Zip Code  THE COLONY, TX 75056	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GARRETT, T CHASE <hr/> Contributor address; City; State; Zip Code  PLANO, TX 75093	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF EMPLOYED

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/21 Rpt: 10/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 11/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GOTTSCHALK, MIKE <hr/> <b>6</b> Contributor address; City; State; Zip Code  PELHAM, AL 35124	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) CLERK		<b>9</b> Employer (See Instructions) EDGER
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GOULDIN, MARTHA <hr/> Contributor address; City; State; Zip Code  HOUSTON, TX 77043	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GREER, DANIEL <hr/> Contributor address; City; State; Zip Code  WACO, TX 76710	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) FORECASTER		Employer (See Instructions) SELF EMPLOYED
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GRIFFIN, MICHAEL <hr/> Contributor address; City; State; Zip Code  LEWISVILLE, TX 75056	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) COMMERCIAL REAL ESTATE		Employer (See Instructions) TRANSWESTERN
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GRIMES, DEBORAH <hr/> Contributor address; City; State; Zip Code  HURST, TX 76054	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		Employer (See Instructions) JGG PC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/21 Rpt: 11/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GWARTNEY, CHERYL <hr/> <b>6</b> Contributor address; City; State; Zip Code  LEWISVILLE, TX 75077	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) RN		<b>9</b> Employer (See Instructions) SELF EMPLOYED
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HAGOOD, KATHERINE <hr/> Contributor address; City; State; Zip Code  FORT WORTH, TX 76109	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) INSURANCE MARKETING		Employer (See Instructions) SELF EMPLOYED
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HAYNES, BRYAN <hr/> Contributor address; City; State; Zip Code  GARLAND, TX 75044	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SCHEEF & STONE, LLP
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HELTON, ERIC <hr/> Contributor address; City; State; Zip Code  PILOT POINT, TX 76258	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) REXEL
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HENDRICKSON, JON <hr/> Contributor address; City; State; Zip Code  ARGYLE, TX 76226	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) CONSULTANT OWNERS REP		Employer (See Instructions) SELF EMPLOYED

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/21 Rpt: 12/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 11/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HERRON, LISA <hr/> <b>6</b> Contributor address; City; State; Zip Code  INDEPENDENCE, MO 64055	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) PROJECT MANAGEMENT		<b>9</b> Employer (See Instructions) BT FURNISHINGS
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HESS, MICHAEL <hr/> Contributor address; City; State; Zip Code  CARROLLTON, TX 75007	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) AKERMAN LLP
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HIGNIGHT, SHANNON <hr/> Contributor address; City; State; Zip Code  LANTANA, TX 76226	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HODGE, GLENNA <hr/> Contributor address; City; State; Zip Code  SPICEWOOD, TX 78669	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) INGE, H PEYTON <hr/> Contributor address; City; State; Zip Code  ARGYLE, TX 76226	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/21 Rpt: 13/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) JONES, RONNIE <hr/> <b>6</b> Contributor address; City; State; Zip Code  FLOWER MOUND, TX 75028	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) ENGINEER		<b>9</b> Employer (See Instructions) TELECOM
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) KATES, JUSTIN <hr/> Contributor address; City; State; Zip Code  CYPRESS, TX 77433	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) BUSINESS DEVELOPMENT		Employer (See Instructions) CORROSION RESISTANT ALLOYS
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) KINARD, GAY <hr/> Contributor address; City; State; Zip Code  BRENHAM, TX 77833	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) KOONS, THOMAS <hr/> Contributor address; City; State; Zip Code  DALLAS, TX 75205	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) INDEPENDENTLY WEALTHY		Employer (See Instructions) SELF EMPLOYED
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) KRAUS, AUTUMN <hr/> Contributor address; City; State; Zip Code  IRVING, TX 75039	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions) HOMEMAKER

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/21 Rpt: 14/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) KREY, KEVIN	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code  LEWISVILLE, TX 75056		
<b>8</b> Principal occupation / Job title (See Instructions) IT DIRECTOR		<b>9</b> Employer (See Instructions) USAA
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LASTER, EDWARD	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  IRVING, TX 75039		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LASTER, EDWARD	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  IRVING, TX 75039		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LEE, EKATERINA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  DALLAS, TX 75205		
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF EMPLOYED
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LEMMONS, ANGIE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/21 Rpt: 15/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LONG, TIFFANY	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>6</b> Contributor address; City; State; Zip Code  BURNEYVILLE, OK 73430		
<b>8</b> Principal occupation / Job title (See Instructions) BUSINESS OWNER		<b>9</b> Employer (See Instructions) 21ST CENTURY FARMHOUSE
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LOZANO, FELIX	Amount of Contribution (\$)  \$8,000.00
Contributor address; City; State; Zip Code  DALLAS, TX 75225		
Principal occupation / Job title (See Instructions) CGO		Employer (See Instructions) WHITLEY PENN
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LUNSFORD, JULIE	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code  CARROLLTON, TX 75010		
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions) HOMEMAKER
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MACIAS, LUKE	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  SAN ANTONIO, TX 78213		
Principal occupation / Job title (See Instructions) POLITICAL ADVISOR		Employer (See Instructions) WEST FORT WORTH MANAGEMENT
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MARKERT, DANIEL	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  SAN JOSE, CA 95129		
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) FORTRESSFIRE

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/21 Rpt: 16/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MASON, AJUA	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  DALLAS, TX 75237		
<b>8</b> Principal occupation / Job title (See Instructions) STYLIST		<b>9</b> Employer (See Instructions) SELF EMPLOYED
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MCCLURE, KELLY	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code  DALLAS, TX 75225		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MCCLURE LAW GROUP
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MCCOMB, MORGAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  AZLE, TX 76020		
Principal occupation / Job title (See Instructions) CONTRACTOR		Employer (See Instructions) TNM
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MCDONALD, TONY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  AUSTIN, TX 78723		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) THE LAW OFFICES OF TONY MCDONALD
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MORRIS, STACY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  HOUSTON, TX 77079		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) WEATHERFORD



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/21 Rpt: 17/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) NASH, DIANNE <hr/> <b>6</b> Contributor address; City; State; Zip Code  TEMECULA, CA 92591	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) RETIRED		<b>9</b> Employer (See Instructions) RETIRED
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OPITZ, MARY <hr/> Contributor address; City; State; Zip Code  PLANO, TX 75025	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OREILLY, REAGAN <hr/> Contributor address; City; State; Zip Code  COLLEGE STATION, TX 77845	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) PILOT		Employer (See Instructions) UNITED
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) PARRISHSMITH, SARA <hr/> Contributor address; City; State; Zip Code  CARROLLTON, TX 75010	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) TV HOST		Employer (See Instructions) SELF EMPLOYED
Date 12/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) PAXTON, ARTHUR <hr/> Contributor address; City; State; Zip Code  IRVING, TX 75061	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/21 Rpt: 18/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) PENDERY, DARLENE <hr/> <b>6</b> Contributor address; City; State; Zip Code  FLOWER MOUND, TX 75022	<b>7</b> Amount of Contribution (\$)  \$10,000.00
<b>8</b> Principal occupation / Job title (See Instructions) RETIRED		<b>9</b> Employer (See Instructions) RETIRED
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) PERKINS, EDWARD <hr/> Contributor address; City; State; Zip Code  JUSTIN, TX 76247	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) TECHNICIAN		Employer (See Instructions) PARK PLACE
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) PETERSON, JOHN <hr/> Contributor address; City; State; Zip Code  SPRING, TX 77389	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT ENGINEER		Employer (See Instructions) SELF EMPLOYED
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) PHELPS, DAVID <hr/> Contributor address; City; State; Zip Code  ROCKWALL, TX 75087	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) PRESTON, JOY <hr/> Contributor address; City; State; Zip Code  FRISCO, TX 75033	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/21 Rpt: 19/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) PRESTON, MELINDA <hr/> <b>6</b> Contributor address; City; State; Zip Code  FRISCO, TX 75033	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR OF DENTON COUNTY		<b>9</b> Employer (See Instructions) CITIZENS DEFENDING FREEDOM
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ROBISON, MADELINE <hr/> Contributor address; City; State; Zip Code  LEWISVILLE, TX 75056	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions) HOMEMAKER
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ROSARIO, JAVIER <hr/> Contributor address; City; State; Zip Code  MAGNOLIA, TX 77354	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) DOWLEY SECURITY SYSTEMS
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ROSS, CANDY PEAK <hr/> Contributor address; City; State; Zip Code  DALLAS, TX 75254	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE BROKER		Employer (See Instructions) SELF EMPLOYED
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) SANDERSON, LESLIE <hr/> Contributor address; City; State; Zip Code  CELINA, TX 75009	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SCHEEF & STONE, LLP

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/21 Rpt: 20/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/24/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) SCHILD, KRISTA	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code  ROYSE CITY, TX 75189		
<b>8</b> Principal occupation / Job title (See Instructions) PAINTER / DECORATOR		<b>9</b> Employer (See Instructions) KS CASTLE DESIGNS
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) SCHILLING, ALEXANDRA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  GARWOOD, TX 77442		
Principal occupation / Job title (See Instructions) AGRICULTURE		Employer (See Instructions) SELF EMPLOYED
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) SCHOBER, JONATHAN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) PUBLIC POLICY ADVOCATE		Employer (See Instructions) CITIZENS DEFENDING FREEDOM
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) SHAW, RANDY	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  SPRING, TX 77386		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) SMITH, JARED	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code  FAIRVIEW, TX 75069		
Principal occupation / Job title (See Instructions) BUSINESS MANAGEMENT		Employer (See Instructions) S3MANAGEMENT

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/21 Rpt: 21/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) STALLINGS, KYLE <hr/> <b>6</b> Contributor address; City; State; Zip Code  MIDLAND, TX 79702	<b>7</b> Amount of Contribution (\$)  \$10,000.00
<b>8</b> Principal occupation / Job title (See Instructions) OIL		<b>9</b> Employer (See Instructions) SELF EMPLOYED
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) STODOLA, ROLAND <hr/> Contributor address; City; State; Zip Code  CARROLLTON, TX 75007	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) STONE, MITCHELL <hr/> Contributor address; City; State; Zip Code  THE COLONY, TX 75056	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) FLUOR CORP
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) STUART, LESA <hr/> Contributor address; City; State; Zip Code  LEWISVILLE, TX 75056	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) EBBY HALLIDAY
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) STUART, LESA <hr/> Contributor address; City; State; Zip Code  LEWISVILLE, TX 75056	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) EBBY HALLIDAY

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/21 Rpt: 22/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 11/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) THALE, BRENT	<b>7</b> Amount of Contribution (\$) \$50.00
<b>6</b> Contributor address; City; State; Zip Code  ANTIOCH, CA 94509		
<b>8</b> Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		<b>9</b> Employer (See Instructions) ELECTRONIC ARTS
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) THORSETH, VIENNA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  FRANKSTON, TX 75763		
Principal occupation / Job title (See Instructions) IT ANALYST		Employer (See Instructions) AHS
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) TORANO, CARLOS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  PEARLAND, TX 77584		
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) HOUSTON METHODIST
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) VASQUEZ, NICOLE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  DOUBLE OAK, TX 75077		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) CORAM MANAGEMENT
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) VINES, JEFF	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  THE COLONY, TX 75056		
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) RAILPROS

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/21 Rpt: 23/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) WAKIN, JACKIE	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code  FRISCO, TX 75036		
<b>8</b> Principal occupation / Job title (See Instructions) PROFESSIONAL ORGANIZER		<b>9</b> Employer (See Instructions) SELF EMPLOYED
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) WALLACE, BONNIE	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  LLANO, TX 78643		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) WARD, PATRICIA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  LANTANA, TX 76226		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) WHITMAN, WANDA SUE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  JUSTIN, TX 76247		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) PATRIOT MOBILE
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) WOOD, MICHAEL BRETT	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  SELMA, AL 36701		
Principal occupation / Job title (See Instructions) DOCTOR		Employer (See Instructions) TW ORTHODONTICS

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/21 Rpt: 24/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYLIE, DAVID <hr/> <b>6</b> Contributor address; City; State; Zip Code  ARGYLE, TX 76226	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) RETIRED		<b>9</b> Employer (See Instructions) RETIRED



# LOANS

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 25/37
<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b>
<b>5</b> Date of loan 11/03/2023	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) LITTLE, JASON MITCHELL (Mr.)	<b>9</b> Loan Amount (\$) \$25,000.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code  LEWISVILLE, TX 75056	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions) PARTNER		<b>13</b> Employer (See Instructions) SCHEEF & STONE, LLP
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor	
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>19</b> Amount Guaranteed (\$)		
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)
Date of loan 12/19/2023	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) LITTLE, JASON MITCHELL (Mr.)	Loan Amount (\$) \$50,000.00
Is lender a financial institution? No	Lender address; City; State; Zip Code  LEWISVILLE, TX 75056	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions) PARTNER		Employer (See Instructions) SCHEEF & STONE, LLP
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	Name of guarantor	
	Guarantor address; City; State; Zip Code	
Amount Guaranteed (\$)		
Principal occupation		Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/12 Rpt: 26/37	<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/21/2023	<b>5</b> Payee name A-LEGAL	
<b>6</b> Amount (\$) \$546.66	<b>7</b> Payee address; City; State; Zip Code 1201 ELM ST STE 2560 DALLAS, TX 75270	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/13/2023	Payee name ANTHEM MEDIA AND MESSAGE, INC	
Amount (\$) \$7,500.00	Payee address; City; State; Zip Code 6412 SOTER PARKWAY  AUSTIN, TX 78735	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MANAGEMENT CONSULTING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2023	Payee name ANTHEM MEDIA AND MESSAGE, INC	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 6412 SOTER PARKWAY  AUSTIN, TX 78735	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MANAGEMENT CONSULTING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/12 Rpt: 27/37	<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088078
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<b>4</b> Date 11/20/2023	<b>5</b> Payee name ANTHEM MEDIA AND MESSAGE, INC
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<b>6</b> Amount (\$) \$3,515.00	<b>7</b> Payee address; City; State; Zip Code 6412 SOTER PARKWAY  AUSTIN, TX 78735
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PRODUCTION
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/13/2023	Payee name ANTHEM MEDIA AND MESSAGE, INC
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Amount (\$) \$3,250.00	Payee address; City; State; Zip Code 6412 SOTER PARKWAY  AUSTIN, TX 78735
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense RESEARCH CONSULTING
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/18/2023	Payee name ANTHEM MEDIA AND MESSAGE, INC
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Amount (\$) \$391.88	Payee address; City; State; Zip Code 6412 SOTER PARKWAY  AUSTIN, TX 78735
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRAVEL
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/12 Rpt: 28/37	<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088078
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<b>4</b> Date 12/28/2023	<b>5</b> Payee name CHAIN BRIDGE BANK, N.A.
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<b>6</b> Amount (\$) \$12.00	<b>7</b> Payee address; City; State; Zip Code 1445-A LAUGHLIN AVENUE  MCLEAN, VA 22101
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BANK FEES
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/12/2023	Payee name CROSBY OTTENHOFF GROUP
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Amount (\$) \$2,996.25	Payee address; City; State; Zip Code 611 PENNSYLVANIA AVE SE #267  WASHINGTON, DC 20003
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COMPLIANCE CONSULTING
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/14/2023	Payee name CROSBY OTTENHOFF GROUP
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Amount (\$) \$1,292.50	Payee address; City; State; Zip Code 611 PENNSYLVANIA AVE SE #267  WASHINGTON, DC 20003
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COMPLIANCE CONSULTING
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/12 Rpt: 29/37	<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/15/2023	<b>5</b> Payee name GIDEONS 300 BAMN	
<b>6</b> Amount (\$) \$2,400.00	<b>7</b> Payee address; City; State; Zip Code 6101 LONG PRAIRIE RD 744-244 FLOWER MOUND, TX 75028	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DATA SUBSCRIPTION SERVICES
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 12/15/2023	Payee name GIDEONS 300 BAMN	
Amount (\$) \$746.67	Payee address; City; State; Zip Code 6101 LONG PRAIRIE RD 744-244 FLOWER MOUND, TX 75028	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FOOD / BEVERAGE
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 12/19/2023	Payee name GIDEONS 300 BAMN	
Amount (\$) \$7,626.89	Payee address; City; State; Zip Code 6101 LONG PRAIRIE RD 744-244 FLOWER MOUND, TX 75028	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FOOD / BEVERAGE
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/12 Rpt: 30/37	<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 11/13/2023	<b>5</b> Payee name GIDEONS 300 BAMN	
<b>6</b> Amount (\$) \$5,500.00	<b>7</b> Payee address; City; State; Zip Code 6101 LONG PRAIRIE RD 744-244 FLOWER MOUND, TX 75028	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MANAGEMENT CONSULTING
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name GIDEONS 300 BAMN	
Amount (\$) \$5,500.00	Payee address; City; State; Zip Code 6101 LONG PRAIRIE RD 744-244 FLOWER MOUND, TX 75028	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MANAGEMENT CONSULTING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name GIDEONS 300 BAMN	
Amount (\$) \$54.57	Payee address; City; State; Zip Code 6101 LONG PRAIRIE RD 744-244 FLOWER MOUND, TX 75028	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POSTAGE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 6/12 Rpt: 31/37	<b>2</b>	FILER NAME Little, Jason Mitchell (Mr.)	<b>3</b>	Filer ID (Ethics Commission Filers) 00088078
<b>4</b>	Date 11/20/2023	<b>5</b>	Payee name HENDRICKSON, LISA		
<b>6</b>	Amount (\$) \$2,435.63	<b>7</b>	Payee address; City; State; Zip Code 6101 LONG PRAIRIE RD 744-244 FLOWER MOUND, TX 75028		
<b>8</b>	PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT SPACE RENTAL / EVENT FOOD AND BEVERAGE		
<b>9</b>		Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/20/2023		Payee name SCHOBBER ENTERPRISES, LLC		
	Amount (\$) \$500.00		Payee address; City; State; Zip Code 304 RED TAILED HAWK DR  PFLUGERVILLE, TX 78660		
	PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEB SERVICE		
		Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/04/2023		Payee name SOLUTIONS FOR TEXAS IN FUNDRAISING LLC		
	Amount (\$) \$91.41		Payee address; City; State; Zip Code 4238 LOMO ALTO CT  DALLAS, TX 75219		
	PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DATA SUBSCRIPTION SERVICES		
		Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/12 Rpt: 32/37	<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088078
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<b>4</b> Date 11/13/2023	<b>5</b> Payee name SOLUTIONS FOR TEXAS IN FUNDRAISING LLC
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<b>6</b> Amount (\$) \$3,066.59	<b>7</b> Payee address; City; State; Zip Code 4238 LOMO ALTO CT  DALLAS, TX 75219
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FUNDRAISING CONSULTING
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2023	Payee name SOLUTIONS FOR TEXAS IN FUNDRAISING LLC
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Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 4238 LOMO ALTO CT  DALLAS, TX 75219
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FUNDRAISING CONSULTING
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2023	Payee name SOLUTIONS FOR TEXAS IN FUNDRAISING LLC
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Amount (\$) \$7.93	Payee address; City; State; Zip Code 4238 LOMO ALTO CT  DALLAS, TX 75219
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SUPPLIES
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/12 Rpt: 33/37	<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/04/2023	<b>5</b> Payee name SOLUTIONS FOR TEXAS IN FUNDRAISING LLC	
<b>6</b> Amount (\$) \$41.50	<b>7</b> Payee address; City; State; Zip Code 4238 LOMO ALTO CT  DALLAS, TX 75219	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRAVEL
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/27/2023	Payee name VISCUSI, ALEX	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1112 LOPO RD  FLOWER MOUND, TX 75028	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name VISCUSI, ALEX	
Amount (\$) \$5,953.75	Payee address; City; State; Zip Code 1112 LOPO RD  FLOWER MOUND, TX 75028	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/12 Rpt: 34/37	<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/08/2023	<b>5</b> Payee name VISCUSI, ALEX	
<b>6</b> Amount (\$) \$941.78	<b>7</b> Payee address; City; State; Zip Code 1112 LOPO RD  FLOWER MOUND, TX 75028	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/05/2023	Payee name VISCUSI, ALEX	
Amount (\$) \$1,894.38	Payee address; City; State; Zip Code 1112 LOPO RD  FLOWER MOUND, TX 75028	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SIGNS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/07/2023	Payee name VISCUSI, ALEX	
Amount (\$) \$2,165.00	Payee address; City; State; Zip Code 1112 LOPO RD  FLOWER MOUND, TX 75028	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SIGNS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/12 Rpt: 35/37	<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088078
<b>4</b> Date 12/19/2023	<b>5</b> Payee name VISCUSI, ALEX	
<b>6</b> Amount (\$) \$7,036.25	<b>7</b> Payee address; City; State; Zip Code 1112 LOPO RD  FLOWER MOUND, TX 75028	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SIGNS
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/08/2023	Payee name WINRED	
Amount (\$) \$277.76	Payee address; City; State; Zip Code 1776 WILSON BLVD STE 530 ARLINGTON, VA 22219	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD PROCESSING FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2023	Payee name WINRED	
Amount (\$) \$9.85	Payee address; City; State; Zip Code 1776 WILSON BLVD STE 530 ARLINGTON, VA 22219	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREDIT CARD PROCESSING FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/12 Rpt: 36/37	<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088078
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<b>4</b> Date 11/20/2023	<b>5</b> Payee name WINRED
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<b>6</b> Amount (\$) \$6.90	<b>7</b> Payee address; City; State; Zip Code 1776 WILSON BLVD STE 530 ARLINGTON, VA 22219
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>CREDIT CARD PROCESSING FEES</b>
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2023	Payee name WINRED
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Amount (\$) \$29.55	Payee address; City; State; Zip Code 1776 WILSON BLVD STE 530 ARLINGTON, VA 22219
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>CREDIT CARD PROCESSING FEES</b>
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/11/2023	Payee name WINRED
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Amount (\$) \$161.54	Payee address; City; State; Zip Code 1776 WILSON BLVD STE 530 ARLINGTON, VA 22219
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>CREDIT CARD PROCESSING FEES</b>
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/12 Rpt: 37/37	<b>2</b> FILER NAME Little, Jason Mitchell (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088078
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<b>4</b> Date 12/18/2023	<b>5</b> Payee name WINRED
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<b>6</b> Amount (\$) \$86.48	<b>7</b> Payee address; City; State; Zip Code 1776 WILSON BLVD STE 530 ARLINGTON, VA 22219
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Fees	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>CREDIT CARD PROCESSING FEES</b>
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/26/2023	Payee name WINRED
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Amount (\$) \$54.57	Payee address; City; State; Zip Code 1776 WILSON BLVD STE 530 ARLINGTON, VA 22219
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Fees	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>CREDIT CARD PROCESSING FEES</b>
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/20/2023	Payee name WPA INTELLIGENCE
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Amount (\$) \$19,800.00	Payee address; City; State; Zip Code 1900 E 15TH ST STE 600A EDMOND, OK 73013
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Polling Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>POLLING</b>
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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