FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00060026 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Brian T. NAME Date Received **ELECTRONICALLY FILED** 01/08/2024 NICKNAME LAST **SUFFIX** Hoyle CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Bernard J. NAME NICKNAME LAST **SUFFIX** Krupa **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (903) 601-3352 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff lx l appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2023 12/31/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Court Of Appeals, Justice Place 2 District 12

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 9

13 C / OH NAME	Hoyle, Brian T. (The Honorable) 14 Filer ID 00060026		`	(Ethics Commissi	ion Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to d officeholders are required to report this information	the candidate's or office	eholder's knowled	ige or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS		IIZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$	0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$	1,288.49
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L	AST DAY OF THE	\$	3,887.37
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS ITING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT					
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.			
		The Hon	orable Brian T. Hoyle	9	
		Signature of	Candidate or Officehole	der	
AFFIX NOT	ΓARY STAMP / SEAL AB	OVE			
Sworn to and subscribed before me, by the said, this theday					
of	, 20, to c	ertify which, witness my hand and seal of office.			
Signature of offic	eer administering oath	Printed name of officer administering oath	Title of officer	r administering oa	ath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

3 of 9						
18 FILER NAME19 Filer ID(Ethics Commission Filers)Hoyle, Brian T. (The Honorable)00060026						
20 SCHEDUL NAME OF	SUBTOTAL AMOUNT					
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$			
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$			
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$			
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 1,288.49			
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.	9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$			
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$			
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$			
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$			

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 1/6 Rpt: 4/9	Hoyle, Brian T. (The Honorable) 00060026				
4	Date	5 Payee name				
	10/03/2023	David Stein Campaign				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$50.00	P.O. Box 7575				
		Tyler, TX 75711				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Officeholder's ticket to political event held by Smith				
		County Republican Party Chair				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	1				
	Date	Payee name				
	10/03/2023	East Texans for Liberty				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$25.00	P.O. Box 195				
		Gilmer, TX 75644				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense Officeholder's ticket to annual dinner held by East				
		Texans for Liberty				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OH					
	Date	Payee name				
	08/28/2023	Nacogdoches County Republican Party				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$75.00	P.O. Box 630866				
		Nacogdoches, TX 75963				
	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.				
	ZA ZHOHORZ	Check if Austin, TX, officeholder living expense				
		Officeholder's ticket to annual Citizen-Statesman Dinner				
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	Complete ONLY if direct expenditure to benefit C/O					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 2/6 Rpt: 5/9	Hoyle, Brian T. (The Honorable) 00060026				
4	Date	5 Payee name				
	07/12/2023	Rick's on the Square				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$145.18	104 W. Erwin St.				
		Tyler, TX 75702				
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 Officeholder's portion of lunch with Texarkana				
		Justices Justices				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					
	Date	Payee name				
	07/28/2023	Smith County Bar Association				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$25.09	100 North Broadway				
		Suite 21B				
		Tyler, TX 75702				
_	PURPOSE	·				
	OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		Officeholder's lunch at monthly Smith County Bar's				
		luncheon				
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OH					
	Date	Payee name				
	10/16/2023	Smith County Bar Association				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$100.00	100 North Broadway				
		Suite 21B				
		Tyler, TX 75702				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Event Expense				
	LXI LINDITORL	Check if Austin, TX, officeholder living expense				
		Officeholder's sponsorship of Bar Association's annual Christmas Party.				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					

Advertising Expense Accounting/Banking

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Transportation Equipment & Related Expense Travel in District Travel Out of District

Solicitation/Fundraising Expense

Consulting Expense Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/6 Rpt: 6/9 Hoyle, Brian T. (The Honorable) 00060026 4 Date Payee name 07/28/2023 Smith County Bar Foundation 6 Amount (\$) Payee address; City; State; Zip Code \$150.00 P.O. Box 7248 Tyler, TX 75711 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Officeholder's sponsorship of annual Constitution Day event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/01/2023 Smith County Republican Party Amount (\$) Payee address; City; State; Zip Code \$100.00 3923 S. Broadway Ave. Tyler, TX 75701 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Officeholder's sponsorship of Young Republicans Convention Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/06/2023 Smith County Republican Women Amount (\$) Payee address: City: State; Zip Code \$55.00 P.O. Box 8175 Tyler, TX 75711 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Officeholder's annual dues and fee to attend the membership luncheon Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	ense Prii Sal	-	se s/Contract Labor	Trav	el in District el Out of Dis ER (enter a	strict category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	1E				3 File	r ID	(Ethics Commission Filers)
	Sch: 4/6 Rpt: 7/9	Hoyle, Bria	an T. (The Honorable))			000	060026	
4	Date	5 Payee name	e				•		
	12/21/2023	Smith Cou	ınty Republican Wom	nen					
6	Amount (\$)	7 Payee addr	ress; City;	State; Zi	ip Code				
	\$200.00	P.O. Box 8	3175						
		Tyler, TX 7	75711						
8	PURPOSE	-			. (b)	Description			
ľ	OF	Event Exp	See Categories listed at the top	p of this schedule			outside of	Texas. Com	plete Schedule T.
	EXPENDITURE		000			Check if Austin			
									of annual Cookie Auction bublican Women
						HOSIEU DY SII	00		
9	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Offic	e sought			Office he	eld
	Date	Payee nam	e						
	08/11/2023	The Grove	9						
	Amount (\$)	Payee addr	ress; City;	State; Zi	ip Code				
	\$30.22	3500 Old 3	Jacksonville Hwy.						
		Tyler, TX 7	75701						
	PURPOSE	(a) Category (See Categories listed at the top	p of this schedule	e) (b)	Description			
	OF EXPENDITURE	Event Exp							plete Schedule T.
	- -					Check if Austin			:h County Republican
						Club's month			ar Journy Republican
	Complete ONLY if direct	<u> </u> Candidate/Ωt	fficeholder name	Office	e sought			Office he	eld
	expenditure to benefit C/O			2.770	- coagn			350 110	
\vdash	Date	Dayoo nam	0						
	07/20/2023	Payee name	e ourri House						
	Amount (\$)	Payee addr		State; Zi	in Code				
	\$14.00	1 1	ess; City; p Highway	Sidie, Zi	ih coae				
	Ψ14.00	Suite 300	Pingnivay						
			75701						
	DUDD 0.0-	Tyler, TX			۱				
	PURPOSE OF	l	See Categories listed at the top	p of this schedule	e) (b)	Description Check if travel	outside of	Texas Com	plete Schedule T.
	EXPENDITURE	Event Exp	ELISE			Check if Austin			•
						Officeholder's	s lunch	at mont	hly Smith County
						Republican V	Vomen'	s lunche	eon
	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Offic	e sought			Office he	eld

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
_	Sch: 5/6 Rpt: 8/9	Hoyle, Brian T. (The Honorable)	00060026
4	Date	5 Payee name	
	08/17/2023	The Potpourri House	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$15.00	3320 Troup Highway	
		Suite 300	
		Tyler, TX 75701	
_	DUDDOCE	·	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if trave	l outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense	n, TX, officeholder living expense
		I 	's lunch at the monthly Smith County
			Women's club's luncheon
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/21/2023	The Potpourri House	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$14.50	3320 Troup Highway	
		Suite 300	
		Tyler, TX 75701	
	PURPOSE	·	
	OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if trave	l outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense	n, TX, officeholder living expense
		Officeholder	's lunch at monthly Smith County
		Republican	Women's Club's luncheon
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	12/21/2023	The Potpourri House	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$14.50	3320 Troup Highway	
		Suite 300	
		Tyler, TX 75701	
	DUDDOCE	· · · · · · · · · · · · · · · · · · ·	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if trave	l outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense	n, TX, officeholder living expense
			's lunch at annual Christmas Cookie
		Auction host	ed by Smith County Republican Women
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a extraory not listed above)

Credit Card Payment		•	` , , ,
Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 6/6 Rpt: 9/9	Hoyle, Brian T. (The Honorable)	00060026	
Date	5 Payee name		
07/07/2023	Tyler Area Chamber of Commerce		
Amount (\$)	7 Payee address; City; State; Zip Code	е	
\$175.00	315 N. Broadway Ave.		
1	Suite 100		
!	Tyler, TX 75702		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) De	escription
-	Fees		Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		L	Check if Austin, TX, officeholder living expense Control of the c
!		U	iliceriolder's arriual dues
Complete ONLV if direct	Candidate/Officeholder name Office sound	nt	Office held
		ıı	Office field
Date	Dove name		
	,		
` ´		е	
Φ 50.00			
!			
	, , ,	b) De	escription
EXPENDITURE	Event Expense	⊢	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
!		<u>Г</u>	fficeholder's ticket to annual Tyler Area Chamber of
l			ommerce dinner
Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
expenditure to benefit C/Oł	-1		
Date	Payee name		
11/30/2023	Tyler Area Chamber of Commerce		
Amount (\$)	Payee address; City; State; Zip Code	e	
\$50.00			
!			
DLIDDOSE		h) Do	pegription
OF	5 (J) DE	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Event Expense	Ė	Check if Austin, TX, officeholder living expense
!			fficeholder's ticket to annual Dr. Perryman
!		luı	ncheon
Complete ONLY if direct		nt	Office held
expenditure to benefit C/OF	1		
	Total pages Schedule F1: Sch: 6/6 Rpt: 9/9 Date 07/07/2023 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 07/17/2023 Amount (\$) \$50.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 11/30/2023 Amount (\$) \$50.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 11/30/2023 Amount (\$) \$50.00	The Instruction Guide explains how to com Total pages Schedule F1: Sch: 6/6 Rpt: 9/9 Date 07/07/2023 Amount (\$) \$175.00 \$175.00 \$175.00 Tyler, TX 75702 PURPOSE OF EXPENDITURE Payee name Tyler Area Chamber of Commerce Complete ONLY if direct expenditure to benefit C/OH Date 07/07/2023 Amount (\$) Payee name Tyler Area Chamber of Commerce Candidate/Officeholder name Tyler Area Chamber of Commerce Complete ONLY if direct expenditure to benefit C/OH Spayee name Tyler Area Chamber of Commerce Tyler Area Chamber of Commerce Payee address; City; State; Zip Code 315 N. Broadway Ave. Suite 100 Tyler, TX 75702 PURPOSE OF EXPENDITURE Candidate/Officeholder name Office soughter to the schedule of this sc	The Instruction Guide explains how to complete Total pages Schedule F1: Sch: 6/6 Rpt: 9/9 Date O7/07/2023 F2 Payee name Tyler Area Chamber of Commerce Amount (\$) S175.00 F2 Payee address; City; State; Zip Code S15 N. Broadway Ave. Suite 100 Tyler, TX 75702 F2 Payee name F2 Payee name F3 Payee name F4 Payee name F5 Payee name Tyler Area Chamber of Commerce Complete QNLY if direct expenditure to benefit C/OH Date O7/17/2023 F2 Payee name Tyler Area Chamber of Commerce Amount (\$) S50.00 F3 Payee name Tyler Area Chamber of Commerce Amount (\$) S50.00 F3 Payee name Tyler Area Chamber of Commerce Amount (\$) S50.00 F2 PURPOSE OF EXPENDITURE F3 Payee address; City; State; Zip Code S50.00 S50.00 Tyler, TX 75702 F3 Payee address; City; State; Zip Code S50.00 Tyler, TX 75702 F3 Payee name Tyler Area Chamber of Commerce Complete QNLY if direct expenditure to benefit C/OH Date Tyler Area Chamber of Commerce F3 Payee name Tyler Area Chamber of Commerce F4 Payee name Tyler Area Chamber of Commerce Tyler Area Chamber of Commerce Amount (\$) S50.00 F4 Payee name Tyler Area Chamber of Commerce Tyler Area Chamber of Commerce Amount (\$) S50.00 F5 Payee name Tyler Area Chamber of Commerce Tyler Area Chamber of Commerce Amount (\$) S50.00 Tyler, TX 75702 F4 Payee name Tyler Area Chamber of Commerce Amount (\$) S50.00 Tyler, TX 75702 F4 Payee name Tyler Area Chamber of Commerce Amount (\$) S50.00 Tyler, TX 75702 F4 Payee name Tyler Area Chamber of Commerce Amount (\$) S50.00 Tyler, TX 75702 F4 Payee name Tyler Area Chamber of Commerce Amount (\$) S50.00 Tyler, TX 75702 F4 Payee name Tyler Area Chamber of Commerce Amount (\$) S50.00 Tyler, TX 75702 F4 Payee name Tyler Area Chamber of Commerce Amount (\$) S50.00 Tyler, TX 75702 Tyler Area Chamber of Commerce Amount (\$) S50.00 Tyler, TX 75702 F5 Payee name Tyler Area Chamber of Commerce Amount (\$) S50.00 Tyler Area Chamber of Commerce Amount (\$) S50.00 Tyler Area Chamber of Commerce Amount (\$) S50.00 Tyler Area Chamber of Commerce Am