# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to complete	this form.	Filer ID (Ethics Commiss 00069334	ion Filers)	2 Total pages file	
3 CANDIDATE /	MS / MRS / MR FII	RST		MI	OFFICE U	ISE ONLY
OFFICEHOLDER NAME	The Honorable Er	ric			Date Received  ELECTRONICA	LLY FILED
	NICKNAME LA	 \ST		SUFFIX	01/15/2024	
		arless				
4 CANDIDATE /	ADDRESS / PO BOX; APT / SU	JITE#; CITY;	1	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING	15814 Champion Forest Dr.					_
ADDRESS	PMB #312				Receipt #	Amount
Change of Address	Spring, TX 77379					
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR FIF	RST		MI	-	
TREASURER NAME	Mrs. Pa	ıtricia				
	NICKNAME			CUEFIX		
	NICKNAME LA	sı ırless		SUFFIX		
	Па	mess				
6 CAMPAIGN	STREET ADDRESS (NO PO BO	X PLEASE);	APT	/ SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	15814 Champion Forest Dr.					
	PMB #312					
(Residence or Business)	Spring, TX 77379					
7 CAMPAIGN	AREA CODE PHONE N	IUMBER EX	TENSION			
TREASURER	(281) 655-0254					
PHONE	(===) === :					
8 REPORT TYPE			🗖 .		7 .=	
''''-	X January 15	30th day before e	lection	Runoff	15th day after cam appointment (office	npaign treasurer eholder only)
	July 15	8th day before ele		Exceeded modified	Final Report (Attac	ch C/OH-FR)
				eporting limit	<b>-</b>	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2023	THR	ROUGH	12/31/202	3	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	X Prin	nary	Runoff	Other	
	03/05/2024		neral	Special	<u>—</u>	
			iciai	Ороски		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
	State Representative District	126 Harris		State Represent	ative District 126	
		GO TO	PAGE 2			

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 27

13 C / OH NAME	Harless, Eric (The Ho	onorable)	<b>14</b> Filer ID 00069334	(Ethics Commission Filers)
This box is for notice of political contributions accepted or political expenditures made and candidate / officeholder. These expenditures may have been made without the candidate consent. Candidates and officeholders are required to report this information only if the consent. Candidates and officeholders are required to report this information only if the consent.				eholder's knowledge or
X Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Texas Alliance for Life PAC		
		COMMITTEE ADDRESS		
	SPECIFIC	8000 Centre Park Drive Suite 380		
		Austin, TX 78754		
		COMMITTEE CAMPAIGN TREASURER NAI	ME	
		Shaw, James		
		COMMITTEE CAMPAIGN TREASURER ADI	DRESS	
		4505 Corazon Cv		
		Round Rock, TX 78681		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER ES OF LOANS, OR CONTRIBUTIONS MADE		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LO	DANS)	\$ 24,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 35,287.22
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF T RIOD	HE LAST DAY OF THE	\$ 287,395.65
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOAN: TING PERIOD	S AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT	·			•
		I swear, or affirm, under po true and correct and includ under Title 15, Election Co	enalty of perjury, that the ac des all information required to de.	companying report is to be reported by me
		The	e Honorable Eric Harless	3
			ire of Candidate or Officeho	·
		- <b>3</b>		
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
		aid		day
of	, 20, to ce	ertify which, witness my hand and seal of office	2.	
Signature of office	cer administering	Printed name of officer administering	Title of office	r administering oath

## CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

### FORM C/OH ADDENDUM

Page 3 of 27

				Fage 3 01 21
C / OH NAME	Harless, Eric (The Ho	onorable)	Filer ID 00069334	(Ethics Commission Filers)
7 NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have I	of political expenditures by political committees to speen made without the candidate's or officeholder's do report this information only if they receive notice.	s knowledge or co	onsent. Candidates and
( )	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Texans for Opportunity & Prosperity PAC		
		COMMITTEE ADDRESS		
	SPECIFIC	138 Conant St, Ste 401		
		Beverly, MA 01915		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Gantt, Charles		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
		1108 Lacava Ste 110-265		
		Austin, TX 78701		

### **SUBTOTALS - C/OH**

### FORM COH **COVER SHEET PG 3**

				4 of 27		
18 FILER NAME Harless, Eric (The Honorable)  19 Filer ID (Ethics Commission Filers) 00069334						
20 SCHEDULE NAME OF S			SUBTOTA	L AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	21,000.00		
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	3,000.00		
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$			
4.	SCHEDULE E: LOANS		\$			
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	34,233.54		
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$			
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$			
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	1,053.68		
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$			
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$			
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	4,679.37		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDUI	E A1
	The Instru	ction Guide explains how to comp	1	Total pages Schedule A1: Sch: 1/4 Rpt: 5/27		
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Harless, Eric	(The Honorable)		$\perp$	00069334	
4	Date 12/22/2023	<ul> <li>5 Full name of contributor</li></ul>	tate PAC (ID#: <u>C00040279</u> )		Amount of Contribution (\$)	\$500.00
		Abbott Park, IL 60064	ue			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	<b>I</b> ns)		
		,	h 191 (111 111 111 111 111 111 111 111 11	-,		
_	Date	Full name of contributor  out-of-st	tate PAC (ID#:)	$\overline{T}$	Amount of Contribution (\$)	
	12/22/2023	BNSF RAILPAC	tale FAC (ID#)		Amount of Contribution (4)	\$2,500.00
	12,22,2020	Contributor address; City; State; Zip Coo	de			Ψ2,000.00
		Contributor address, Only, State, 21p Co.				
	Fort Worth, TX 76161					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ns)		
	Date	Full name of contributor out-of-st	tate PAC (ID#:)	Τ	Amount of Contribution (\$)	
	12/22/2023	Ben E Keith Company Texas PAC				\$1,500.00
		Contributor address; City; State; Zip Coo	de			
		Fort Worth TV 76102				
	Dringinal occu	Fort Worth, TX 76102 pation / Job title (See Instructions)	Employer (See Instruction	 ne)		
	i illicipai occu	pation / Job title (See Instructions)	Employer (See instituction	113)		
	Date	Full name of contributor X out-of-st	tate PAC (ID#: C00384818 )	T	Amount of Contribution (\$)	
	12/22/2023	CVS Health PAC				\$2,000.00
		Contributor address; City; State; Zip Coo	de			
		Washington, DC 20004				
			Employer (See Instruction	ns)		
	Date	<b>—</b>	tate PAC (ID#: <u>C00782292</u> )		Amount of Contribution (\$)	Ф1 000 00
	11/06/2023	Dentaquest PAC	-1-			\$1,000.00
		Contributor address; City; State; Zip Coo	de			
		Boston, MA 02129				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ns)		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	ction Guide explains how t	o complete this fo	rm.	1	Total pages Schedule A1: Sch: 2/4 Rpt: 6/27	
2	FILER NAME Harless, Eric	: (The Honorable)			3	Filer ID (Ethics Commission 00069334	on Filers)
4	Date 11/06/2023	<ul> <li>5 Full name of contributor   Eli Lilly and Company PAC</li> <li>6 Contributor address; City; State</li> </ul>	out-of-state PAC (ID#: <u>C</u>	00082792 )	7	Amount of Contribution (\$)	\$2,000.00
_		Indianpolis, IN 46285					
8	Principal occu	pation / Job title (See Instructions)	!	9 Employer (See Instructions	5)		
	Date 12/22/2023	Full name of contributor  Houston Police Officers' Uni  Contributor address; City; State				Amount of Contribution (\$)	\$1,500.00
	Houston, TX 77007  Principal occupation / Job title (See Instructions)  Employer (See Instructions)			<u> </u>			
					_		
	Date 12/22/2023	Full name of contributor  Locke Lord LLP  Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$500.00
		Dallas, TX 75201					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/22/2023	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00	
	Dallas, TX 75205  Principal occupation / Job title (See Instructions)  President  Employer (See Instruction Andrews Distributing			Employer (See Instructions Andrews Distributing	<u>(</u>		
	Date 11/06/2023	Full name of contributor x out-of-state PAC (ID#: C00097485  Merck Employees PAC  Contributor address; City; State; Zip Code  Washington, DC 20004			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	ction Guide explains how to complet	te this for	n.	1	Total pages Schedule A1: Sch: 3/4 Rpt: 7/27	
2	FILER NAME Harless, Eric	(The Honorable)			3	Filer ID (Ethics Commission 00069334	on Filers)
4	Date 11/06/2023	<ul> <li>Full name of contributor</li></ul>	PAC (ID#: <u>C00</u>	)780171 )	7	Amount of Contribution (\$)	\$500.00
_		Washington, DC 20001	1-				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	)		
	Date 11/06/2023	Full name of contributor out-of-state  PharmPac  Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$1,500.00
	Dringing aggr	Austin, TX 78757		Employer (Coo Instructions			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 12/22/2023	Full name of contributor out-of-state Southwest Airlines Co. Freedom Fund Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75235-1611					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 12/22/2023					Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 11/06/2023	Full name of contributor			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
			1				

	MONET	ARY POLITICAL CONTRIBUTION	NC	IS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 4/4 Rpt: 8/27		
2	FILER NAME Harless, Eric	c (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069334
4	Date 11/06/2023	Full name of contributor			7	Amount of Contribution (\$) \$1,500.00
8	Principal occu	Houston, TX 77027 pation / Job title (See Instructions)	9	Employer (See Instructions Weekley Homes	<u> </u> s)	

#### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 9/27 3 Filer ID (Ethics Commission Filers) FILER NAME Harless, Eric (The Honorable) 00069334 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution Date out-of-state PAC (ID#: Amount of contribution (\$) description 09/12/2023 Associated Republicans of Texas Campaign Fund \$2,000.00 | Campaign digital 7 Contributor address; City; State; Zip Code advertising Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) description 10/03/2023 Associated Republicans of Texas Campaign Fund \$1,000.00 | Campaign Digital Contributor address; City; State; Zip Code Advertising Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

#### 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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
	Great Cara r ayment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 1/12 Rpt: 10/27	Harless, Eric (The Honorable)	00069334
4	Date	5 Payee name	
	07/01/2023	Ashton Austin	
_			
6	Amount (\$)	•	
	\$3,678.94	101 Colorado	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		utside of Texas. Complete Schedule T.
	LXI LINDITORL		TX, officeholder living expense
		Austin Apt	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experialture to benefit C/Oi	1	
	Date	Payee name	
	08/01/2023	Ashton Austin	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,321.95	101 Colorado	
	7 1,5==155		
		Austin TV 70701	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overficad/Nertial Experise	utside of Texas. Complete Schedule T. TX, officeholder living expense
		X   Check if Austin,   Austin Apt	17, Unicertainer living expense
		/ tostii / tpt	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	Office field
	Date	Payee name	
	09/01/2023	Ashton Austin	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,313.71	101 Colorado	
		Austin, TX 78701	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  ☐ Check if travel o	utside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overficad/Nertial Experise	TX, officeholder living expense
		Austin Apt	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

#### SCHEDULE F1

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
	Credit Card F dyment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 2/12 Rpt: 11/27	Harless, Eric (The Honorable)	00069334
4	Date	5 Payee name	
	10/01/2023	Ashton Austin	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$4,314.44	101 Colorado	
	, ,-		
		Austin, TX 78701	
_	DUDD005		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	uutoida af Tayaa, Camplata Sahadula T
	EXPENDITURE	Office Overficad/Northal Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense
		Austin apt ren	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	11/01/2023	Ashton Austin	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,303.60	101 Colorado	
	Ψ4,303.00	101 60101440	
		A ( ) . TV 70704	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overficad/Nertial Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense
		Austin Apt Re	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	<u> </u>	
	Date	Payee name	
	09/19/2023	Cherry Tree Republican	
	Amount (\$) \$21.00		
	\$21.00	10202 Rippling Fields Dr	
		Houston, TX 77064	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	orbida d'Taura Carrelli C. I. I. T
	EXPENDITURE	LVCIII Experise	outside of Texas. Complete Schedule T.  TX, officeholder living expense
			scuss campaign/officeholder issues
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Optionations Made 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

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: 3/12 Rpt: 12/27 Harless, Eric (The Honorable) 00069334 4 Date Payee name 09/13/2023 **Constant Contact** 6 Amount (\$) Payee address; City; State; Zip Code \$373.54 1601 Trapelo Rd Waltham, MA 02451 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. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Email newsletter service Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/08/2023 Cook, James Amount (\$) Payee address; City; State; Zip Code \$250.00 1827 Enchanted Rock Dr Cedar Park, TX 78613 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff bonus expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/15/2023 **Domain Networks** Amount (\$) Payee address: City; State; Zip Code \$288.00 P.O. Box 1280 Hendersonville, NC 28793 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Advertising Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Website hosting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE F1

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	T	<u> </u>	
1	Total pages Schedule F1: Sch: 4/12 Rpt: 13/27	2 FILER NAME Harless, Eric (The Honorable) 3 Filer ID (Ethics Commission Filers 00069334	)
4	Date	5 Payee name	
	07/10/2023	Facebook	
6	Amount (\$) \$117.57	7 Payee address; City; State; Zip Code 1601 S. California Ave Palo Alto, CA 94304	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Facebook Ads	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	08/01/2023	Facebook	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$7.36	1601 S. California Ave	
		Palo Alto, CA 94304	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Facebook ads	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	10/15/2023	Facebook	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.00	1601 S. California Ave	
		Palo Alto, CA 94304	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense	
		Facebook ads	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
L	expenditure to benefit C/OI	H 	

### 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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/12 Rpt: 14/27	Harless, Eric (The Honorable) 00069334
4	Date	5 Payee name
	12/08/2023	Gregory, Greer
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	2205 Coleto St
		Austin, TX 78722
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Staff bonus expense
		Ciail Bollad Capolida
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
5	expenditure to benefit C/O	
_	Data	David warms
	Date 11/08/2023	Payee name HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$228.46	12860 Research Blvd
	!	
	!	Austin, TX 78750
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Supplies for Capitol office
		Supplies for Capitol Office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/16/2023	Harris County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	8588 Katy Fwy #445
		Houston, TX 77024
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Filing fee for office
	0 1: 0:11:4"	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H

### SCHEDULE F1

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

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/12 Rpt: 15/27	Harless, Eric (The Honorable) 00069334
4 Date	5 Payee name
08/21/2023	Judge Lincoln Goodwin Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	8765 Spring Cypress Suite L #172
	Spring, TX 77379
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder iving expense
	Donation to Salute to Service Breakfast
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
08/08/2023	Kroger
Amount (\$)	Payee address; City; State; Zip Code
\$9.98	15802 Champion Forest Dr
Ψ0.00	10002 Ghampion 1 Groot Br
	Spring, TX 77379
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Juice for constituent breakfast meeting
	duled for constituent breaking
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
11/14/2023	Kroger
Amount (\$)	Payee address; City; State; Zip Code
\$12.98	15802 Champion Forest Dr
Φ12.90	13002 Champion Forest Di
	Spring, TX 77379
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Juice for constituent meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/O	п 

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gitt/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

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/12 Rpt: 16/27	Harless, Eric (The Honorable) 00069334
4	Date	5 Payee name
	12/22/2023	Lone Star Quick Prints
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$374.13	6271 Cypress Creek Pkwy
		Houston, TX 77069
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign thank you notes
		Campaigh thank you notes
_	Compulate ONLY if direct	Condidate/Office holds
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/27/2023	Northwest Assistance Ministries
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	15555 Kuykendahl
		Houston, TX 77090
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXI ENDITORE	Candidate/Officeholder/Political Committee
		Donation to Charity in District
	Compulate ONLY if direct	Condidate/Office holds
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	•	
	Date	Payee name
	08/02/2023	Northwest Forest Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,350.00	15455 Canterbury Forest Apt 314
		Tomball, TX 77377
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By   Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Candidate/Officeholder/Political Committee
		Dinner sponsorship
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experience to beliefit 6/01	

### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/12 Rpt: 17/27	Harless, Eric (The Honorable) 00069334
4	Date	5 Payee name
	10/09/2023	Northwest Forest Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$75.00	15455 Canterbury Forest Apt 314
		Tomball, TX 77377
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 meeting to discuss campaign officeholder issues
		meeting to discuss ouripaign officeriolider issues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$	Data	
	Date	Payee name
	12/11/2023	Northwest Forest Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	15455 Canterbury Forest Apt 314
		Tomball, TX 77377
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense
		Check if Austin, TX, officeholder living expense
		Meeting to discuss campaign officeholder issues.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	08/08/2023	Party City
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.32	6452 Cypress Creek Parkway
		Houston, TX 77069
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Papergoods for office for constituent meetings
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/12 Rpt: 18/27	Harless, Eric (The Honorable) 00069334
4	Date	5 Payee name
	11/14/2023	Party City
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$26.30	6452 Cypress Creek Parkway
		Houston, TX 77069
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Paper goods for constituent meetings
		,
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	12/04/2023	Postnet121
H	Amount (\$)	Payee address; City; State; Zip Code
	\$240.00	15814 Champion forest
	Ψ2 10.00	2002 i Ghampion lorost
		Spring, TX 77379
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		PMB rental
		T III TOTAL
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experientare to benefit G/O	<u>'</u>
	Date	Payee name
	08/11/2023	Spectrum Cable
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.87	1000 E. 41st Str
		Austin, TX 78751
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		X Check if Austin, TX, officeholder living expense
		Internet & Cable Austin Apt
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$	•	
L		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/12 Rpt: 19/27	Harless, Eric (The Honorable) 00069334
4	Date	5 Payee name
	09/11/2023	Spectrum Cable
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$150.87	1000 E. 41st Str
		Austin, TX 78751
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		<ul><li>X Check if Austin, TX, officeholder living expense</li><li>Cable &amp; Internet apt</li></ul>
		Cable & Internet apt
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	11/27/2023	Texas Alliance for Life PAC
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,200.00	8000 Centre Park Dr. Ste 380
		Austin, TX 78754
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Contribution Candidate/Officeholder living expense
		Gont Badon
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	08/01/2023	Texas Young GOP
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	2633 McKinney Ave Suite 130-532
		Dallas, TX 75204
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services  The Instruction Gu			/ages	/Contract Labor		OTHER (enter a	strict category not listed	above)
Ļ		-			ilue explains no	W to col	iiipie	te tilis ioiili.	_			
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commi	ssion Filers)
	Sch: 11/12 Rpt: 20/27		Harless, Eric	c (The Honoral	ole)					00069334		
4	Date	<b>5</b> Payee nam										
	11/10/2023		The UPS St	ore								
6	Amount (\$)	7	Payee addres	ss; City;	State;	7in Co	do					
ľ	` '	ľ	•		State,	Zip Cu	ue					
	\$77.20		7312 Louett	а коао								
			Spring, TX 7	77379								
8	PURPOSE	(a)	Category (sc	ee Categories listed at t	no ton of this school	ulo)	(b)	Description				
	OF	l`´		nead/Rental Exp		uie)	` '	_ `	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Onice Oven	read/remail Exp	Jense			Check if Austin,	, TX,	officeholder living	g expense	
								Overnight fee	to	send Distric	ct Christmas	Ornament to
								capitol				
9	Complete ONLY if direct			ceholder name	Off	ice sou	aht			Office h	eld	
ľ	expenditure to benefit C/OI		Janaidate/Onic	cerioidei riame	Oil	100 300	giit			Omee n	Ciu	
		_										
	Date		Payee name									
	10/05/2023		Tom Ramse	ey Campaign								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$1,000.00		P.O. Box 55	385								
	, ,											
			Haveton T	/ 77055								
		L	Houston, TX	( 77255								
	PURPOSE OF	(a)	Category (Se	ee Categories listed at t	ne top of this sched	ule)	(b)	Description				
	EXPENDITURE			s/Donations Ma	,			_			plete Schedule T.	
			Candidate/C	Officeholder/Poli	tical Committ	tee		ш	, IX,	officeholder living	g expense	
								Contribution				
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	ceholder name	Off	ice sou	ght			Office h	eld	
	experialiture to benefit C/Or	П										
	Date		Payee name									
	08/08/2023		Whataburge	er								
	Amount (\$)		Payee addres		State;	Zin Co	do					
	( )		•	-	State,	Zip Cu	ue					
	\$252.66		7430 Louett	a Ru								
			Spring, TX 7	77379								
	PURPOSE	(a)	Category (Se	ee Categories listed at t	ne top of this sched	ule)	(b)	Description				
	OF			age Expense	•	<i>,</i>		Check if travel	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE			0 1				Check if Austin,	, TX,	officeholder living	g expense	
								Breakfast foo	d fo	or HC Safet	y Committee	meeting
	Complete ONLY if direct		Candidate/Offic	ceholder name	Off	ice sou	ght			Office h	eld	
	expenditure to benefit C/O	Н										
-												

### SCHEDULE F1

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

Advertising Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	y - al Committee	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhe Polling Expen Printing Expe	ead/Rental Expense se nse es/Contract Labor	Transportation Travel in Distric Travel Out of D	
	Credit Card Payment		The Instruction Guide expla				
1	Total pages Schedule F1:	2 FILER NAME				3 Filer ID	(Ethics Commission Filers)
	Sch: 12/12 Rpt: 21/27	Harless, Er	ic (The Honorable)			00069334	
4	Date	5 Payee name				•	
	11/14/2023	Whataburg	er				
6	Amount (\$) \$252.66	7 Payee addre	ta Rd	ate; Zip Code			
		Spring, TX		1			
8	PURPOSE OF EXPENDITURE		ee Categories listed at the top of this age Expense	(b	Check if Austin		·
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Off H	ceholder name	Office sough	t	Office h	eld

### POLITICAL EXPENDITURES FROM PERSONAL FUNDS

### SCHEDULE G

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

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	r - (	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing Ex		Travel in D Travel Out	
	Credit Card Payment		The Instruction Guide explains h	ow to co	mplete this form.		
1	Total pages Schedule G: Sch: 1/4 Rpt: 22/27	2 FILER NAME	c (The Honorable)			3 Filer ID 000693	(Ethics Commission Filers)
_			(The Honorable)			000033	J <del>-1</del>
4	Date 07/06/2023	5 Payee name City of Austin	n				
6	Amount (\$)	<b>7</b> Payee addres	s; City; State;	Zip Co	ode		
•	\$79.90	P.O. Box 22		p 00			
	X Reimbursement from political contributions intended	Austin, TX 7	8783-2267				
8	PURPOSE	(a) Category (See	e Categories listed at the top of this sche	dule)	(b) Description	Check if travel	outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office Overh	nead/Rental Expense		Electricity Austin		n, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeh	older name		Office sought		Office held
	Date	Payee name					
	08/07/2023	City of Austi	n				
	Amount (\$)	Payee addres	s; City; State;	Zip Co	ode		
\$75.73 P.O. Box 2267							
	X Reimbursement from political contributions intended	Austin, TX 7	8783-2267				
	PURPOSE	Category (Se	e Categories listed at the top of this sche	dule)	Description	<b>≓</b>	outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office Overh	nead/Rental Expense		<u> </u>	_1	n, TX, officeholder living expense
					Electricity Austin	Apt	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeh	older name		Office sought		Office held
	Date	Payee name			<del></del> _		
	09/05/2023	City of Austi	n				
	Amount (\$)	Payee addres	s; City; State;	Zip Co	ode		
	\$75.50	P.O. Box 22	67				
	Reimbursement from political contributions intended	Austin, TX 7	8783-2267				
	PURPOSE	Category (Se	e Categories listed at the top of this sche	dule)	Description	Ⅎ	outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office Overhead/Rental Expense					
					Electricity Austin	Apt	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	l Candidate/Officeh	older name		Office sought		Office held

### POLITICAL EXPENDITURES FROM PERSONAL FUNDS

### SCHEDULE G

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

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ov Polling Ex Printing E Salaries/N	xpense Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2 FILER NA	ME			3	Filer ID (Ethics Commission Filers)
	Sch: 2/4 Rpt: 23/27	Harless,	Eric (The Honorable)				00069334
4	Date	5 Payee na	me				
	10/05/2023	City of A	ustin				
6	Amount (\$)	7 Payee ad	dress; City; State	; Zip Co	ode		
	\$71.55	P.O. Box	2267				
	Reimbursement from political contributions intended	Austin, T	X 78783-2267				
8	PURPOSE	(a) Category	(See Categories listed at the top of this sci	hedule)	(b) Description	Ch	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office O	/erhead/Rental Expense			( Cł	heck if Austin, TX, officeholder living expense
	LXI ENDITORE				Electricity Austin	Ap	t
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Off	iceholder name		Office sought		Office held
	Date	Payee na	me				
	11/05/2023	City of A	ustin				
	Amount (\$)	Payee ad	dress; City; State	e; Zip Co	ode		
	\$60.45 P.O. Box 2267						
	Reimbursement from political contributions intended	Austin, T	X 78783-2267				
	PURPOSE	Category	(See Categories listed at the top of this so	hedule)	Description	Cł	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office O	/erhead/Rental Expense		Electricity Austin	_	heck if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Off	iceholder name		Office sought		Office held
H							
	Date 12/21/2023	Payee na City of A					
H	Amount (\$)	Payee ad	dress; City; State	e; Zip Co	ode		
	\$86.46	P.O. Box		, ~			
	Reimbursement from						
	X political contributions intended	Austin, T	X 78783-2267				
	PURPOSE OF		(See Categories listed at the top of this sci	hedule)	Description	=	heck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office O	/erhead/Rental Expense		<u> </u>	_	heck if Austin, TX, officeholder living expense
					Final Electricity A	Aust	tin Apt
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Off	iceholder name		Office sought		Office held

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS

#### SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District 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 G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/4 Rpt: 24/27 Harless, Eric (The Honorable) 00069334 Date Payee name 07/11/2023 Spectrum Cable Payee address; Amount (\$) City; State; Zip Code \$152.03 1000 E. 41st Str Reimbursement from political contributions Х intended Austin, TX 78751 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF X Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** Internet & Cable Austin Apt Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/11/2023 Spectrum Cable Amount (\$) Payee address; City; State; Zip Code \$150.03 1000 E. 41st Str Reimbursement from political contributions Χ Austin, TX 78751 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF X Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** Cable & Internet Austin Apt Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/11/2023 Spectrum Cable Payee address; City; State; Zip Code Amount (\$) \$150.00 1000 E. 41st Str Reimbursement from Χ political contributions intended Austin, TX 78751 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF X Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** Internet & Cable Austin apt

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit

C/OH

Office sought

Office held

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Total pages Schedule G: Filer ID (Ethics Commission Filers) Sch: 4/4 Rpt: 25/27 Harless, Eric (The Honorable) 00069334 Date Payee name 12/11/2023 Spectrum Cable 6 Amount (\$) Payee address; City; State; Zip Code 1000 E. 41st Str \$152.03 Reimbursement from political contributions intended Х Austin, TX 78751 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** Final internet & Cable austin apt Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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

#### SCHEDULE K

	The Instru	The Instruction Guide explains how to complete this form.  1 Total page Sch: 1/2						
2	FILER NAME			3		(Ethics Commission	n Filers)	
	Harless, Eric	; (	Γhe Honorable)		00069	9334		
4	Date	5	Name of person from whom amount is received			8 Amount (\$)		
	07/31/2023		Origin Bank				\$692.97	
		6	Address of person from whom amount is received; City; State; Zip Code			]		
			D					
		Ŀ	Ruston, LA 71273					
		7	<del></del>	c if polition	cal cont	ribution returned to file	r	
			Interest on MM					
	Date		Name of person from whom amount is received			Amount (\$)		
	08/31/2023	<u> </u>	Origin Bank			]	\$695.32	
			Address of person from whom amount is received; City; State; Zip Code					
			Ducton I A 71272					
		L	Ruston, LA 71273	. 16 1141				
			Purpose for which amount is received	с іт роііці	cai cont	ribution returned to file	r	
		<u> </u>				i		
	Date		Name of person from whom amount is received			Amount (\$)	ф7.40.07	
	09/30/2023	ļ	Origin Bank				\$740.27	
			Address of person from whom amount is received; City; State; Zip Code					
			Ruston, LA 71273					
		H		c if politic	cal cont	I ribution returned to file	r	
			Interest on MM					
_	Date	<u> </u>	Name of person from whom amount is received			Amount (\$)		
	10/31/2023		Origin Bank			7 unodite (¢)	\$855.99	
		ļ	Address of person from whom amount is received; City; State; Zip Code			•	,	
			That is the state of the state					
			Ruston, LA 71273					
			Purpose for which amount is received	c if polition	cal cont	ribution returned to file	r	
			Interest on MM					
	Date		Name of person from whom amount is received			Amount (\$)		
	11/30/2023		Origin Bank				\$831.82	
		ļ	Address of person from whom amount is received; City; State; Zip Code			1		
		L	Ruston, LA 71273					
			<del>-</del>	c if polition	cal cont	ribution returned to file	r	
L			Interest on mm					

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 27/27 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Harless, Eric (The Honorable) 00069334 4 Date 5 Name of person from whom amount is received 8 Amount (\$) 12/31/2023 Origin Bank \$863.00 6 Address of person from whom amount is received; City; State; Zip Code Ruston, LA 71273 Purpose for which amount is received Check if political contribution returned to filer Interest on MM