CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

1 Filer ID (Eth	ics Commission Filers) 2	Total pages filed:	
00051862		14	OFFICE USE ONLY
3 COMMITTEE NAME	Friends of Larry Taylor		Date Received ELECTRONICALLY FILED 01/09/2024
4 TREASURER NAME	Taylor, Larry		Pate Lland delivered or Date Destroylard
5 ORIGINAL		Runoff	Date Hand-delivered or Date Postmarked
REPORT TYPE	X January 15 July 15 30th day before election	10th day after campaign treasurer resignation	Receipt # Amount
	8th day before election	Other (specify)	Date Processed
6 ORIGINAL PERIOD COVERED	Month Day Year 07/01/2023	Month Day Year THROUGH <u>12/31/2023</u>	Date Imaged
7 EXPLANATION OF		12/01/2020	
8 AFFIDAVIT			
		I swear, or affirm, under penalty of perjur and correct.	y, that this corrected report is true
		Check the box next to any and all applica	ble statements:
		X Semiannual reports: I swear or was made in good faith and without misrepresent the information contai	an intent to mislead or to
		Other reports: I swear, or affirm. report not later than the 14th busine that the report as originally filed is in swear, or affirm, that any error or or filed was made in good faith.	ess day after the date I learned naccurate or incomplete. I
		Larry Ta	vlor
		Signature of Campa	
AFFIX NOTARY S	TAMP / SEAL ABOVE		
		, this t	he day
of	, 20, to certify	v which, witness my hand and seal of office.	
Signature of offic	cer administering oath	Printed name of officer administering oath	Title of officer administering oath
	Need	ch Any Part Of The Campaign Finance Rep ed To Report And Explain Corrections	port Form

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00051862	2 Total pages filed:14
3 COMMITTEE NAME		OFFICE USE ONLY
Friends of Larry Taylor		
		Date Received ELECTRONICALLY FILED 01/09/2024
4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; C	ITY; STATE; ZIP CODE	
ADDRESS 1222 W. Winding Way		Date Hand-delivered or Date Postmarked
		Bate Hand delivered of Bate Fostmarked
Change of Address Friendswood, TX 77546		Receipt # Amount
		Date Processed
		Date Imaged
5 CAMPAIGN MS / MRS / MR FIRST		MI
TREASURER Larry		
NAME		
NICKNAME LAST		SUFFIX
Taylor		
i ayıdı		
6 CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE) TREASURER 1222 W. Winding Mou	; APT / SUITE #; CITY	; STATE; ZIP CODE
STREET 1222 W. Winding Way		
ADDRESS		
(Residence or Business) Friendswood, TX 77546		
7 CAMPAIGN STREET OR PO BOX;	APT / SUITE #; CITY	; STATE; ZIP CODE
TREASURER MAILING 1222 West Winding Way		
ADDRESS		
Friendswood, TX 77546		
Change of Address		
8 CAMPAIGN AREA CODE PHONE NUMBER TREASURER (740) 000 0100	EXTENSION	
PHONE (713) 202-9109		
9 REPORT TYPE X January 15 34	th day before election	Exceeded modified reporting limit
	n day before election	Dissolution (Attach PAC-DR)
July 15		
	unoff	10th day after campaign treasurer termination
10 PERIOD Month Day Year	Month Da	ay Year
	THROUGH 12/31	-
11 ELECTION ELECTION DATE	ELECTION TYPE	
Month Day Year P	imary Runoff X	Other
	eneral Special	no election
GO	TO PAGE 2	
Forms provided by Texas Ethics Commission www.	ethics.state.tx.us	Version V3.5.1.0bfcfb67

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Friends of Larry Taylor			00051862	
14 COMMITTEE PURPOSE		CANDIDATE / OFFICEHOLDER NAME		
(Attach lists on plain paper to complete this	Candidate			
report if necessary.)	Officeholder	OFFICE SOUGHT (candidate) / OFFICE HELI	D (officeholder)	
(Candidate or Measure)		BALLOT IDENTIFICATION / #	ELECTI	ON DATE
OPPOSE (Candidate or Measure)			Month	Day Year
ASSIST	Measure	DESCRIPTION		
(Officeholder)				
15 CONTRIBUTION TOTALS		RIBUTIONS OF \$50 OR LESS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE LESS ITEMIZED	I PLEDGES,	\$ \$0.00
	2. TOTAL POLITICAL CO			\$ \$0.00
	(OTHER THAN PLEDGES	S, LOANS, OR GUARANTEES OF LOANS)		\$ \$0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED PO	LITICAL EXPENDITURES		\$ \$0.00
	4. TOTAL POLITICAL EX	(PENDITURES		\$ \$0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONT REPORTING PERIOD	RIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE	\$ \$597,576.57
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMO DAY OF THE REPORTIN	UNT OF ALL OUTSTANDING LOANS AS OF 1 G PERIOD	THE LAST	\$ \$0.00
16 AFFIDAVIT	1			1
10 APPIDAVII		I swear, or affirm, under penalty of perji and correct and includes all information Title 15, Election Code.		
		l arrv	Taylor	
	STAMP / SEAL ABOVE	Signature of Car		er
		, tł	nis the	day
of	, 20, to certify which	, witness my hand and seal of office.		
Signature of officer ad	ministering oath Print	ed name of officer administering oath	Title of office	er administering oath

SUBTOTALS - SPAC		FORM SPAC
	C	OVER SHEET PG 3 4 of 14
17 COMMITTEE NAME Friends of Larry Taylor	18 Filer ID 00051862	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO)R	\$
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	\$
6. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
7. SCHEDULE E: LOANS		\$
8. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$
9. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
10. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
11. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
12. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
13. X SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$ 178,024.40
14. X SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$ 10.93

	2 FILER NAME 3 Filer ID (Ethics Commission Filers 00051862 Friends of Larry Taylor 00051862 (Ethics Commission Filers 00051862
	5 Payee name AMOCO FCU
Amount (\$) 21.40	7 Payee Address; City; State; Zip PO Box889 Texas City, TX 77592
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required. Accounting/Banking Charge to print checks
12/25/2023	Payee name Alzheimer's Association
Amount (\$) 2,500.00	Payee Address; City; State; Zip PO Box 96011
	Washington, DC 20090
PURPOSE OF EXPENDITURE	 (a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description (See instructions regarding type of information required. donation
Date	Payee name
07/21/2023	Anchor Point
Amount (\$) 3,000.00	Payee Address; City; State; Zip 103 Davis Rd. Suite B League City, TX 77573
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required. Contributions/Donations Made By Donation Candidate/Officeholder/Political Committee Donation
	Payee name Anson Jones Masonic Lodge
Amount (\$) 1,000.00	Payee Address; City; State; Zip PO Box 491 Friendswood, TX 77549
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required. Contributions/Donations Made By Donation Candidate/Officeholder/Political Committee Donation
	PURPOSE OF EXPENDITURE

Total pages Schedule I: Sch: 2/9 Rpt: 6/14	2 FILER NAME 3 Filer ID (Ethics Commission Filer Friends of Larry Taylor 00051862
Date 09/05/2023	5 Payee name Bay Area Alliance for Youth and Families
Amount (\$) 2,000.00	7 Payee Address; City; State; Zip 2903 Falcon Pass
	Houston, TX 77062
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee
Date 11/27/2023	Payee name Boys and Girls Club of Brazoria County
Amount (\$) 5,000.00	Payee Address; City; State; Zip 4005 Technology Dr. Suite 2130 Auch trae TX 77515 Suite 2145
	Angleton, TX 77515
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee
Date 09/23/2023	Payee name Cole Gordon Helping Hands Foundation
Amount (\$)	Payee Address; City; State; Zip
10,000.00	PO Box 620
	Friendswood, TX 77549
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee
Date	Payee name
12/25/2023	Communities in Schools - Bay Area
Amount (\$)	Payee Address; City; State; Zip
10,000.00	PO Box 580096
	Houston, TX 77258
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required donation Contributions/Donations Made By Candidate/Officeholder/Political Committee donation

Total pages Schedule I: Sch: 3/9 Rpt: 7/14	2 FILER NAME 3 Filer ID (Ethics Commission Filer ID) Friends of Larry Taylor 00051862
Date 10/20/2023	5 Payee name Galveston College Foundation
Amount (\$) 500.00	7 Payee Address; City; State; Zip 4015 Ave Q
	Galveston, TX 77550
PURPOSE OF EXPENDITURE	 (a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description (See instructions regarding type of information required on the second secon
Date 10/29/2023	Payee name Galveston County Food Bank
Amount (\$)	Payee Address; City; State; Zip
2,500.00	213 6th St
	Texas City, TX 77590
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required information req
Date	Payee name
11/12/2023	Go Tell Ministries
Amount (\$) 10,000.00	Payee Address; City; State; Zip PO Box 2138
	Duluth, GA 30096
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required information req
Date	Payee name
12/10/2023	GoFundMe - Help for Kinsey
Amount (\$)	Payee Address; City; State; Zip
5,100.00	PO Box 121270
	San Diego, CA 92101
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information requ
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee

Amount (\$)7Payee Ad PO Box5,000.00WashingPURPOSE OF EXPENDITURE(a) Category Contribu CandidationDate 08/10/2023Payee nat 08/10/2023Date 2,500.00Payee Ad 15403 H2,500.00FriendsvPURPOSE OF EXPENDITURE(a) Category Contribu CandidationDate 10/22/2023Payee Ad 15403 HDate 10/22/2023Payee Ad 15403 HDate 1,500.00Payee Ad 15403 HDate 1,500.00Payee Ad Contribu CandidationDate 1,500.00Payee Ad Contribu CandidationDate 1,500.00Payee Ad Payee Ad 15403 HDate 1,500.00Payee Ad Payee Ad 15403 HDate 1,500.00Payee nat Payee Ad 15403 HDate 1,500.00Payee nat Payee Ad 15403 HDate 1,500.00Payee nat Payee Ad Ad Ad CandidationDate 12/25/2023Payee nat Payee Ad CandidationDate 10,000.00Payee nat Payee Ad CandidationDate 10,000.00Payee nat Payee Ad Candidation	s of Larry Taylor		00051862	i Filers)
5,000.00PO BoxS,000.00WashingPURPOSE OF EXPENDITURE(a) Category Contribu CandidaDate 08/10/2023Payee na Hope ViAmount (\$)Payee Ad 15403 H2,500.00FriendswPURPOSE OF EXPENDITURE(a) Category Contribu CandidaDate 10/22/2023Payee na Hope ViDate 1,500.00Payee na Hope ViDate 1,2/25/2023Payee na Hope ViAmount (\$) 10,000.00Payee na Hope Vi	name ale College			
PURPOSE OF EXPENDITURE(a) Category Contribu 	Address; City; State; Zip ox 97337 ngton, DC 20077			
08/10/2023Hope VilAmount (\$)Payee Ad2,500.0015403 H2,500.00FriendswPURPOSE OF EXPENDITURE(a) Category Contribu CandidaDatePayee na10/22/2023Hope VilAmount (\$)Payee Ad1,500.00FriendswPURPOSE OF EXPENDITURE(a) Category 	-	(b) Description donation	(See instructions regarding type of information re	equired.)
2,500.0015403 HPURPOSE OF EXPENDITURE(a) Category Contribu 	Village Foundation			
PURPOSE OF EXPENDITURE(a) Category Contribu CandidaDatePayee na10/22/2023Hope ViAmount (\$)Payee Ad1,500.00FriendswPURPOSE OF EXPENDITURE(a) Category Contribu CandidaDatePayee na12/25/2023Inspira FAmount (\$)Payee na12/25/2023Sat7-B E	Hope Village Road			
OF EXPENDITUREContribu CandidaDatePayee na10/22/2023Hope ViAmount (\$)Payee Ad1,500.0015403 HFriendswFriendswOF EXPENDITURE(a) Category Contribu CandidaDatePayee na12/25/2023Inspira FAmount (\$)Payee Ad10,000.00347-B E	swood, TX 77546			
10/22/2023 Hope Vi Amount (\$) Payee Addition 1,500.00 Friendswich PURPOSE (a) Category OF Contribut Date Payee Addition 12/25/2023 Inspira F Amount (\$) Payee Addition 12/25/2023 Inspira F Amount (\$) Payee Addition 10,000.00 347-B E	ory (See instructions for examples of acceptable categories) butions/Donations Made By date/Officeholder/Political Committee	(b) Description Donation	(See instructions regarding type of information re	equired.)
Amount (\$)Payee Addition1,500.0015403 H1,500.00FriendswPURPOSE OF EXPENDITURE(a) Category Contribut CandidationDate 12/25/2023Payee na Inspira FAmount (\$)Payee Addition Payee Addition10,000.00347-B E	name			
1,500.0015403 HFriendswFriendswPURPOSE OF EXPENDITURE(a) Category Contribu CandidaDate 12/25/2023Payee na Inspira FAmount (\$)Payee Ad 347-B E	Village Foundation			
PURPOSE OF EXPENDITURE(a) Category Contribu CandidaDatePayee na 12/25/2023Amount (\$)Payee Ad 347-B E	Hope Village Road			
OF EXPENDITUREContribu CandidaDatePayee na12/25/2023Inspira FAmount (\$)Payee Ac10,000.00347-B E	swood, TX 77546			
12/25/2023 Inspira F Amount (\$) Payee Ac 10,000.00 347-B E	ry (See instructions for examples of acceptable categories) butions/Donations Made By date/Officeholder/Political Committee	(b) Description donation	(See instructions regarding type of information re	equired.)
Amount (\$) Payee Ac 10,000.00 347-B E	name			
10,000.00 347-B E	a Resource Center			
10,000.00	Address; City; State; Zip			
	E Parkwood Ave			
	swood, TX 77546	(b) p	(Cas instructions reserving time of information re	a wired)
OF Contribu	butions/Donations Made By date/Officeholder/Political Committee	(b) Description donation	(See instructions regarding type of information re	equireu.)

PUF EXPER 11/01/ Amoun EXPER 12/24/ Amoun	nt (\$) 10,000.00 IRPOSE OF ENDITURE	5 Payee name KSBJ Radio 7 Payee Address; 1722 Treble Dr. Humble, TX 77338 (a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description donation (See instructions regarding type of information required donation Payee name Lighthouse Charity Team Payee name City; State; Zip PO Box 3528 (b) Description Galveston, TX 77552 (See instructions regarding type of information required donation (a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description donation (See instructions regarding type of information required donation
PUF EXPEI 11/01/ Amoun EXPEI 12/24/ Amoun	10,000.00 PRPOSE OF ENDITURE 1/2023 nt (\$) 5,000.00 PRPOSE OF	1722 Treble Dr. Humble, TX 77338 (a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description donation (See instructions regarding type of information required donation Payee name Lighthouse Charity Team Payee Address; City; State; Zip PO Box 3528 City; State; Zip Galveston, TX 77552 (a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By (b) Description donation (See instructions regarding type of information required donation
EXPER Date 11/01/ Amoun EXPER Date 12/24/ Amoun	OF ENDITURE ./2023 nt (\$) 5,000.00 PRPOSE OF	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description donation (See instructions regarding type of information required donation Payee name Lighthouse Charity Team Payee Address; City; State; Zip PO Box 3528 City; State; Zip Galveston, TX 77552 (b) Description donation (See instructions regarding type of information required donation (a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By (b) Description donation (See instructions regarding type of information required donation
11/01/ Amoun PUF EXPEI Date 12/24/ Amoun	nt (\$) 5,000.00 IRPOSE OF	Lighthouse Charity Team Payee Address; City; State; Zip PO Box 3528 Galveston, TX 77552 (a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By (b) Description donation
PUF EXPEI Date 12/24/ Amoun	5,000.00 RPOSE OF	PO Box 3528 Galveston, TX 77552 (a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By (b) Description donation
Date 12/24/ Amoun	OF	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required donation Contributions/Donations Made By donation
Date 12/24/ Amoun	OF	Contributions/Donations Made By donation
12/24/ Amoun		
Amoun		Payee name
	1/2023	MD Anderson Cancer Center
	nt (\$) 10,000.00	Payee Address; City; State; Zip PO Box 4464
		Houston, TX 77210
_	RPOSE OF ENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required donation candidate/Officeholder/Political Committee
Date		Payee name
09/22/	2/2023	PCS Ministries
Amoun	nt (\$)	Payee Address; City; State; Zip
	10,000.00	1805 Parkview Dr
		Friendswood, TX 77546
	RPOSE OF ENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required donation candidate/Officeholder/Political Committee

SCHEDULE |

Total pages Schedule I: Sch: 6/9 Rpt:	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Friends of Larry Taylor 00051862
Date 07/03/2023	5 Payee name PUBLIC STORAGE
Amount (\$) 108.00	7 Payee Address; City; State; Zip 20602 Gulf Freeway
	Webster, TX 77598
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required storage Office Overhead/Rental Expense storage
Date 08/03/2023	Payee name PUBLIC STORAGE
Amount (\$) 108.00	Payee Address; City; State; Zip 20602 Gulf Freeway
	Webster, TX 77598
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required storage Office Overhead/Rental Expense storage
Date 09/03/2023	Payee name PUBLIC STORAGE
Amount (\$) 108.00	Payee Address; City; State; Zip 20602 Gulf Freeway
	Webster, TX 77598
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required storage Office Overhead/Rental Expense storage
Date	Payee name
10/03/2023	PUBLIC STORAGE
Amount (\$) 108.00	Payee Address; City; State; Zip 20602 Gulf Freeway
	Webster, TX 77598
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required storage Office Overhead/Rental Expense storage

Total pages Schedule I: Sch: 7/9 Rpt:	2 FILER NAME Friends of Larry Taylor		3 Filer ID (Ethics Commission Filers 00051862
Date 11/03/2023	5 Payee name PUBLIC STORAGE		
Amount (\$) 108.00	7 Payee Address; City; State; Zip 20602 Gulf Freeway		
	Webster, TX 77598		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description storage	(See instructions regarding type of information required
Date 12/03/2023	Payee name PUBLIC STORAGE		
Amount (\$) 123.00	Payee Address; City; State; Zip 20602 Gulf Freeway		
	Webster, TX 77598		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description storage	(See instructions regarding type of information required
Date 10/22/2023	Payee name Pasadena Livestock Show & Rodeo		
Amount (\$) 16,000.00	Payee Address; City; State; Zip 7601 Red Bluff		
	Pasadena, TX 77507		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description donation	(See instructions regarding type of information required
Date	Payee name		
08/08/2023	PraegerU		
Amount (\$)	Payee Address; City; State; Zip		
5,000.00	15021 Ventura Blvd, #552		
	Sherman Oaks, CA 91403	<i>a</i> >	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description donation	(See instructions regarding type of information required
	1		

	Total pages Schedule I: Sch: 8/9 Rpt:	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Friends of Larry Taylor 00051862
	Date 08/08/2023	5 Payee name Salvation Army
	Amount (\$) 5,000.00	7 Payee Address; City; State; Zip PO Box 130
	PURPOSE OF EXPENDITURE	Texas City, TX 77592 (a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description donation (See instructions regarding type of information required.
	Date 11/12/2023	Payee name San Jacinto College Foundation
	Amount (\$) 10,000.00	Payee Address;City; State; Zip4624 Fairmont Pkwy, Ste 210
		Pasadena, TX 77504
	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee
	Date	Payee name
	12/25/2023	Texas Values
	Amount (\$) 5,000.00	Payee Address; City; State; Zip 900 Congress Ave. Suite L115 Austin, TX 78701 Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required. Contributions/Donations Made By donation Candidate/Officeholder/Political Committee donation
	Date 09/20/2023	Payee name The Bryan Museum
	Amount (\$) 5,000.00	Payee Address; City; State; Zip 1315 21st St.
		Galveston, TX 77550
-	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required. Contributions/Donations Made By Donation Candidate/Officeholder/Political Committee Donation

Total pages Schedule I: Sch: 9/9 Rpt:	2 FILER NAME Friends of Larry Taylor	3 Filer ID (Ethics Commission Filers 00051862
Date 12/25/2023	5 Payee name The Heritage Foundation	
Amount (\$) 5,000.00	7 Payee Address; City; State; Zip PO Box 97057	
	Washington, DC 20077	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (See instructions regarding type of information required donation
Date 10/30/2023	Payee name University of Houston-Clear Lake	
Amount (\$) 740.00	Payee Address;City; State; Zip2700 Bay Area Blvd	
	Houston, TX 77058	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (See instructions regarding type of information required donation
Date	Payee name	
09/20/2023	Young Life	
Amount (\$) 10,000.00	Payee Address; City; State; Zip PO Box 5184	
	Harlan, IA 51593	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (See instructions regarding type of information required Donation
Date	Payee name	
10/20/2023	Young Life	
Amount (\$)	Payee Address; City; State; Zip	
10,000.00	PO Box 5184	
	Harlan, IA 51593	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (See instructions regarding type of information required Donation

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

SCHEDULE K

The Instruction Guide explains how to complete this form					ages Schedule K: ./1 Rpt: 14/14		
2					(Ethics Commission F	ilers)	
	Friends of Larry Taylor 0			00051	.862		
4	Date	e 5 Name of person from whom amount is received				8 Amount (\$)	
	12/31/2023		AMOCO FCU				\$8.29
		6 Address of person from whom amount is received; City; State; Zip Code					
			Texas City, TX 77592				
		7		f politi	cal conti	ribution returned to filer	
			Account dividends				
	Date		Name of person from whom amount is received			Amount (\$)	
	12/31/2023		Wells Fargo Bank				\$2.64
			Address of person from whom amount is received; City; State; Zip Code				
			Sioux Falls, SD 57117-5190				
				f politi	cal conti	ribution returned to filer	
			interest earned				