FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 65 00056637 3 COMMITTEE NAME **OFFICE USE ONLY** Texans for Joe Straus Date Received **ELECTRONICALLY FILED** 01/16/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 90388 Date Hand-delivered or Date Postmarked Change of Address San Antonio, TX 78209 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Randy NAME NICKNAME LAST **SUFFIX** Cain STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1800 Frost Bank Tower STREET **ADDRESS** 100 West Houston Street (Residence or Business) San Antonio, TX 78205 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1800 Frost Bank Tower MAILING **ADDRESS** 100 West Houston Street San Antonio, TX 78205 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 242-7104 PHONE REPORT X January 15 30th day before election Exceeded modified reporting limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Month Year Month Day Year Day COVERED 07/01/2023 **THROUGH** 12/31/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Other Primary Runoff General Special

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texans for Joe Straus			00056637	
14 COMMITTEE PURPOSE		CANDIDATE / OFFICEHOLDER NAME		
(Attach lists on plain paper to complete this report if necessary.)	Candidate			
report if flecessary.)	Officeholder	OFFICE SOUGHT (candidate) / OFFICE HEL	D (officeholder)	
SUPPORT		BALLOT IDENTIFICATION / #	EI ECTI	ON DATE
(Candidate or Measure) OPPOSE (Candidate or Measure)		BALLOT IBENTIFICATION / #	Month	Day Year
ASSIST (Officeholder)	Measure	DESCRIPTION		
15 CONTRIBUTION TOTALS		TRIBUTIONS OF \$50 OR LESS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE LESS ITEMIZED	N PLEDGES,	\$ \$0.00
	2. TOTAL POLITICAL C (OTHER THAN PLEDGE	ONTRIBUTIONS S, LOANS, OR GUARANTEES OF LOANS)		\$ \$0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED PO	LITICAL EXPENDITURES		\$ \$811.93
	4. TOTAL POLITICAL E.	XPENDITURES		\$ \$231,771.87
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CON REPORTING PERIOD	TRIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE	\$ \$2,534,259.63
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMO DAY OF THE REPORTIN	UNT OF ALL OUTSTANDING LOANS AS OF IG PERIOD	THE LAST	\$ \$0.00
16 AFFIDAVIT		I swear, or affirm, under penalty of perj and correct and includes all information Title 15, Election Code.		
		Mr. Ra	ndy Cain	
AFFIX NOTARY	STAMP / SEAL ABOVE	Signature of Ca	mpaign Treasur	er
Sworn to and subscribed	before me, by the said	, t	his the	day
of	, 20, to certify which	n, witness my hand and seal of office.		
Signature of officer add	ministering oath Prin	ted name of officer administering oath	Title of office	er administering oath

SUBTOTALS - SPAC

FORM SPAC **COVER SHEET PG 3**

				3 01 65
17 CO	MMITTE	E NAME	18 Filer ID	(Ethics Commission Filers)
Tex	xans fo	r Joe Straus	00056637	
	HEDULE		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 ORGANIZATION	R	\$
5.	5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			\$
6.	6. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			\$
7.	7. SCHEDULE E: LOANS			\$
8.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 211,876.19
9.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 8,344.37
10.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
11.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 11,551.31
12.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
13.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
14.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$ 47,704.44

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

	Credit Card Payment	The Instruction Guide explains how to complete	e this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 1/27 Rpt: 4/65	Texans for Joe Straus	00056637
4	Date	5 Payee name	'
	07/31/2023	Brewer, Meredith (Mrs.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,370.07	2919 Trailend Dr.	
		San Antonio, TX 78209	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
	LAFLINDITORL	[Check if Austin, TX, officeholder living expense
			Wages for political services
_	Operation ONE V if dispose	Out it date (Office helder waren	Office health
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	· 		
	Date	Payee name	
	08/31/2023	Brewer, Meredith (Mrs.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,370.08	2919 Trailend Dr.	
		San Antonio, TX 78209	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Wages for political services
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	4	
	Date	Payee name	
	09/29/2023	Brewer, Meredith (Mrs.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,370.07	2919 Trailend Dr.	
		San Antonio, TX 78209	
	PURPOSE		Description
	OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	[Check if Austin, TX, officeholder living expense
		\	Wages for political services
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Con Credit Card Payment		Committee Legal Services Salaries/Wages/Contract Lal	ense bor		Travel in District Travel Out of Dis	quipment & Related Expense		
	·	The Instruction Guide explains how to complete this for	m.					
1	Total pages Schedule F1: Sch: 2/27 Rpt: 5/65	2 FILER NAME Texans for Joe Straus						
4	Date	5 Payee name						
	10/31/2023	Brewer, Meredith (Mrs.)						
6	Amount (\$) \$2,370.08	7 Payee address; City; State; Zip Code 2919 Trailend Dr. San Antonio, TX 78209						
8	PURPOSE OF EXPENDITURE	Checki	if travel ou if Austin, ⁻	TX,	de of Texas. Com officeholder living al services	plete Schedule T. J expense		
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought			Office he	eld		
	Date	Payee name						
	12/01/2023	Brewer, Meredith (Mrs.)						
	Amount (\$) \$2,370.08	Payee address; City; State; Zip Code 2919 Trailend Dr.						
		San Antonio, TX 78209						
	PURPOSE OF EXPENDITURE	Checki	if travel ou if Austin, ⁻	TX,	de of Texas. Com officeholder living al services	plete Schedule T. J expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought			Office he	eld		
	Date	Payee name						
	12/28/2023	Brewer, Meredith (Mrs.)						
	Amount (\$) \$7,370.07	Payee address; City; State; Zip Code 2919 Trailend Dr.						
		San Antonio, TX 78209						
	PURPOSE OF EXPENDITURE	Checki	if travel ou if Austin, ⁻	TX,	de of Texas. Com officeholder living al services	plete Schedule T. g expense		
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office 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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to con	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 3/27 Rpt: 6/65	Texans for Joe Straus	00056637
4 Date	5 Payee name	<u>'</u>
07/11/2023	Bridgehead, I.T.	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de
\$902.09	2810 N. Flores St.	
	San Antonio, TX 78212	
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.
EXPENDITURE	·	Check if Austin, TX, officeholder living expense
		Monthly IT Support and Quarterly Service
		25
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht Office held
Date	Payee name	
10/02/2023	Bridgehead, I.T.	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$902.09	2810 N. Flores St.	
	San Antonio, TX 78212	
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
		Monthly IT Support and Quarterly Service
		monary in Support and Quarterly Service
Complete ONLY if direct	Candidate/Officeholder name Office sour	ht Office held
expenditure to benefit C/O		
Date	Payee name	
07/11/2023	Bridgehead, I.T.	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$31.83	2810 N. Flores St.	
, , , ,		
	San Antonio, TX 78212	
PURPOSE		(h) Description
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Onice Overneau/Nemai Expense	Check if Austin, TX, officeholder living expense
		Monthly IT Support
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure 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 C

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 4/27 Rpt: 7/65	Texans for Joe Straus 00056637
4	Date	5 Payee name
	08/02/2023	Bridgehead, I.T.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$31.83	2810 N. Flores St.
		San Antonio, TX 78212
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
		Monthly IT Support
		onany in Capport
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/07/2023	Bridgehead, I.T.
	Amount (\$)	Payee address; City; State; Zip Code
	\$31.83	2810 N. Flores St.
	Ψ01.00	2010 14.1 10103 01.
		San Antonio, TX 78212
	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
		Monthly IT Support
	Operation ONE V # discort	Our stide to 10 ff as health are now as the control of the control
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/02/2023	Bridgehead, I.T.
	Amount (\$)	Payee address; City; State; Zip Code
	\$31.83	2810 N. Flores St.
		San Antonio, TX 78212
	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
		Monthly IT Support
		Michaely 17 Support
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	•	
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il 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: 5/27 Rpt: 8/65	Texans for Joe Straus 00056637
4	Date	5 Payee name
	11/09/2023	Bridgehead, I.T.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$31.83	2810 N. Flores St.
		San Antonio, TX 78212
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Monthly IT Support
		Worlding IT Support
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/O	
	Date	Payee name
	12/20/2023	Bridgehead, I.T.
	Amount (\$)	Payee address; City; State; Zip Code
	\$31.83	2810 N. Flores St.
		San Antonio, TX 78212
	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 Monthly IT Support
		Wiontiny 11 Support
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	07/03/2023	Bush, Mary (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$875.00	244 Retama Place
		San Antonio, TX 78209
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Committee office administrative consultant.
		Committee once aurimistrative consultant.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this fo	orm.		
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 6/27 Rpt: 9/65	Texans for Joe Straus			00056637	
4 Date	5 Payee name				
08/01/2023	Bush, Mary (Mrs.)				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$875.00	244 Retama Place				
	San Antonio, TX 78209				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descrip	otion		
OF EXPENDITURE	Consulting Expense	Chec	ck if travel outsi		plete Schedule T.
EXI ENDITORE		. —		officeholder living	
		Commi	iillee oiiice	e auministra	tive consultant.
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ıaht.		Office h	old
expenditure to benefit C/O		agrit		Office fi	eiu
D-1-	T _				
Date	Payee name				
09/11/2023	Bush, Mary (Mrs.)				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$875.00	244 Retama Place				
	San Antonio, TX 78209				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Descrip			
EXPENDITURE	Consulting Expense			de of Texas. Com officeholder living	plete Schedule T.
					tive consultant.
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught		Office h	eld
expenditure to benefit C/O	Н				
Date	Payee name				
10/04/2023	Bush, Mary (Mrs.)				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$875.00	244 Retama Place				
	San Antonio, TX 78209				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descrip	ntion		
OF	Consulting Expense			de of Texas. Com	nplete Schedule T.
EXPENDITURE	Concenting Expenses	Chec	ck if Austin, TX,	officeholder living	g expense
		Comm	nittee office	e administra	tive consultant.
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ught		Office h	eld
experientitie to beliefft C/O					

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 Committ

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

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

Candidate/Office Credit Card Payme		-	ervices struction Guide explains		s/Contract Labor ete this form.	OTHER (enter a	category not listed above)
1 Total pages Sch	nedule F1:	2 FILER NAME				3 Filer ID	(Ethics Commission Filers)
Sch: 7/27 Rpt	t: 10/65	Texans for Joe S	traus			00056637	
4 Date		5 Payee name					
11/03/2023		Bush, Mary (Mrs.)				
6 Amount (\$)		7 Payee address;	City; State	; Zip Code			
	\$875.00	244 Retama Plac	e				
		San Antonio, TX	78209				
8 PURPOSE OF			ories listed at the top of this sch	nedule) (b)	Description		
EXPENDITUR	E	Consulting Exper	ise			outside of Texas. Comp , TX, officeholder living	
					_	fice administrat	
					Committee of	mee aarminstrat	ive consultant.
9 Complete ONLY	/ if direct	Candidate/Officehold	er name /	Office sought		Office he	ald.
9 Complete ONLY expenditure to b			er name (Onice Sought		Office fie	eiu
Date		Payee name					
12/01/2023		Bush, Mary (Mrs.)				
Amount (\$)		Payee address;	City; State	; Zip Code			
	\$875.00	244 Retama Plac	e				
		San Antonio, TX	78209				
PURPOSE OF		(a) Category (See Category	ories listed at the top of this sch	nedule) (b)	Description		
EXPENDITUR	E	Consulting Exper	ise		ш	outside of Texas. Comp	
					ш	, TX, officeholder living ffice administrat	
					Committee of	ince administrat	ive consultant.
Complete ONLY	/ if direct	Candidate/Officehold	or namo (Office sought		Office he	ald.
expenditure to b			er name .	Office Sought		Office fie	nu .
Date		Payee name					
07/26/2023		Chase Cardmem	ber Service				
Amount (\$)		Payee address;	City; State	; Zip Code			
	\$399.92	PO Box 94014					
		Palatine, IL 6009	4				
PURPOSE		(a) Category (See Category	ories listed at the top of this sch	nedule) (b)	Description		
OF EXPENDITURI	E	Credit Card Payn	nent		ш	outside of Texas. Comp	
	_				ш	, TX, officeholder living	
					rayiileiil Oi C	reun caru Dili 10	r political expenses.
Complete ONL	/ if dina - +	Condidate/Office L	or name	Office assert :		Office	.ld
Complete ONLY expenditure to b		Candidate/Officehold	er name (Office sought		Office he	eiu
, : : : : : : : : : : :							

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 Salarice Magnet/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	Titel a category flot listed above)
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	(Ethics Commission Filers)
	Sch: 8/27 Rpt: 11/65		,
4	Date	5 Payee name	
	08/23/2023	Chase Cardmember Service	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$96.23	PO Box 94014	
		Palatine, IL 60094	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas.	
		Payment of credit card b	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office	ce held
	expenditure to benefit C/OF	ЭН	
	Date	Payee name	
	08/30/2023	Chase Cardmember Service	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,414.98		
	Ψ1,-11-1.00	1 0 000 0 101 1	
		Palatine, IL 60094	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas.	
		Payment of credit card b	
		ayment of orealt bard is	mi for political expenses.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office	ce held
	expenditure to benefit C/O		
_	Date	Payee name	
	09/20/2023	Chase Cardmember Service	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$859.88		
	φουθ.00	FO BOX 94014	
		Palatine, IL 60094	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas.	·
	EXI ENDITORE	Check if Austin, TX, officeholder	
		Payment of credit card b	olli for political expenses.
	Operation ONLY if allowed	Out district Office helder waren	[].
	Complete ONLY if direct expenditure to benefit C/OH		ce held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Event Expense Loan Repayment/Reimb Fees Office Overhead/Rental Food/Beverage Expense Office Overhead/Rental Polling Expense Offit/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract The Instruction Guide explains how to complete this	Expense Transportation Equipment & Related Expense Travel in District Travel Out of District t Labor OTHER (enter a category not listed above)			
_	Total pages Cabadula F1:	<u> </u>	3 Filer ID (Ethics Commission Filers)			
1	Total pages Schedule F1: Sch: 9/27 Rpt: 12/65	Texans for Joe Straus 00056637				
4	Date	Payee name	-			
	09/29/2023	Chase Cardmember Service				
6	Amount (\$) \$386.61	Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094				
8	PURPOSE OF EXPENDITURE	ch	ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense nent of credit card bill for political expenses.			
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/26/2023	Chase Cardmember Service				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,087.03	PO Box 94014 Palatine, IL 60094				
	PURPOSE OF EXPENDITURE	ch	ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense nent of credit card bill for political expenses.			
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			
	Date 10/21/2023	Payee name Chase Cardmember Service				
	Amount (\$) \$1,036.49	Payee address; City; State; Zip Code PO Box 94014				
		Palatine, IL 60094				
	PURPOSE OF EXPENDITURE	ch	ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense nent of credit card bill for political expenses.			
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made 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	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/27 Rpt: 13/65	Texans for Joe Straus 00056637
4	Date	5 Payee name
	11/17/2023	Chase Cardmember Service
6	Amount (\$) \$2,169.77	7 Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense Payment of credit card bill for political expenses.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/18/2023	Chase Cardmember Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,287.98	PO Box 94014
		Palatine, IL 60094
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Payment of credit card bill for political expenses.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/05/2023	Chase Cardmember Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$159.03	PO Box 94014
		Palatine, IL 60094
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payment of credit card bill for political expenses.
		rayment of credit card bill for political expenses.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 11/27 Rpt: 14/65	Texans for Joe Straus 00056637				
4	Date	5 Payee name				
	07/14/2023	Davis Kaufman PLLC				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$1,500.00	508 West 14th Street				
		Austin, TX 78701				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Political consulting/Legal services				
		Folitical consulting/Legal services				
_	Complete ONU V if alice	Condidate/Officeholder name Office sought				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
	Date	Payee name				
	08/04/2023	Davis Kaufman PLLC				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,500.00	508 West 14th Street				
		Austin, TX 78701				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense Political consulting/Legal services				
		i ontical consulting/Legal services				
_	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
	Date	Payee name				
L	09/06/2023	Davis Kaufman PLLC				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,500.00	508 West 14th Street				
		Austin, TX 78701				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense				
		Political consulting/Legal services				
	0 1. 0					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held				
	experience to betterit Groff					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica			Legal Services	s Expense	Salaries/M		e /Contract Labor		OTHER (enter	a category not liste	ed above)
	Credit Card Payment			The Instruction G	Buide explains	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Com	mission Filers)
	Sch: 12/27 Rpt: 15/65		Texans for J	loe Straus						00056637		
4	Date	5	Payee name									
	10/04/2023		Davis Kaufm	nan PLLC								
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Co	de					
	\$1,500.00		508 West 14	4th Street								
			Austin, TX 7	8701								
8	PURPOSE	(a)		e Categories listed at	the ten of this eah	odulo)	(b)	Description				
ľ	OF	(")	Consulting E		the top of this sch	ledule)	(~)	`	outsi	de of Texas. Cor	mplete Schedule T	
	EXPENDITURE			- · · · · · · · · · · · · · · · · · · ·				Check if Austin,	, TX,	officeholder livir	ng expense	
								Political cons	ultii	ng/Legal se	ervices	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	ceholder name	C	Office sou	ght			Office h	neld	
	experiorare to benefit C/O											
	Date		Payee name									
	11/03/2023		Davis Kaufm	nan PLLC								
	Amount (\$)		Payee addres	ss; City;	State:	; Zip Co	de					
	\$1,500.00		508 West 14	4th Street								
			Austin, TX 7	8701								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	iedule)	(b)	Description				
	OF EXPENDITURE		Consulting E		•	,		<u></u>			nplete Schedule T	
	2/11/2/10/12							—		officeholder livir		
								Political cons	uitii	ng/Legai Se	ervices	
_	Complete ONLY if direct	<u> </u>	Candidate/Offic	caholdar nama		Office sou	aht			Office h	neld	
	expenditure to benefit C/OI		zandidate/Onic	cholder flame		Jilice 30u	grit			Office i	iciu	
	Data											
	Date 12/04/2023		Payee name Davis Kaufn	aan DLLC								
						7' 0						
	Amount (\$)		Payee addres		State	; Zip Co	ae					
	\$1,500.00		508 West 14	ılıı Sireet								
			A T./ =	10704								
			Austin, TX 7									
	PURPOSE OF	(a) 		e Categories listed at	the top of this sch	iedule)	(b)	Description	outei	do of Toyas Cor	nplete Schedule T	
	EXPENDITURE		Consulting E	-xpense				ш		officeholder livir		
								Political cons				
	Complete ONLY if direct		Candidate/Offic	ceholder name	C	Office sou	ght			Office h	neld	
	expenditure to benefit C/OH											
ı												

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

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

OTHER (enter a category not listed above)

Solicitation/Fundraising Expense

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: 13/27 Rpt: 16/65 Texans for Joe Straus 00056637 4 Date Payee name 07/07/2023 Department of Treasury 6 Amount (\$) Payee address; City; State; Zip Code Internal Revenue Service Center \$1,777.26 Ogden, UT 84201 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. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Federal Payroll Taxes Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/11/2023 Department of Treasury Amount (\$) Payee address; City; State; Zip Code \$1,777.30 Internal Revenue Service Center Ogden, UT 84201 **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 Federal Payroll Taxes Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/11/2023 Department of Treasury Amount (\$) Payee address: City: State; Zip Code \$1,777.26 Internal Revenue Service Center Ogden, UT 84201 **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 Federal Payroll Taxes 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
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

	Candidate/Officeholder/Politica Credit Card Payment	Il 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: 14/27 Rpt: 17/65	Texans for Joe Straus 00056637
4	Date	5 Payee name
	10/04/2023	Department of Treasury
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,777.30	Internal Revenue Service Center
		Ogden, UT 84201
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Federal Payroll Taxes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	11/06/2023	Department of Treasury
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,491.26	Internal Revenue Service Center
		Ogden, UT 84201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Federal Payroll Taxes
		Todoral Taylon Taxoo
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	10/02/2023	Embry Communications
	Amount (\$) \$20,000.00	
	Φ20,000.00	1901 Nelson Ranch Loop
		Cedar Park, TX 78613
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Consulting Expanse Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Communications Consultant
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	
-	T	
1	Total pages Schedule F1: Sch: 15/27 Rpt: 18/65	2 FILER NAME Texans for Joe Straus 3 Filer ID (Ethics Commission Filers) 00056637
4	Date	5 Payee name
	12/04/2023	Embry Communications
6	Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 1901 Nelson Ranch Loop Cedar Park, TX 78613
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense Communications Consultant
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/20/2023	Embry Communications
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	1901 Nelson Ranch Loop
		Cedar Park, TX 78613
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Communications Consultant
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/18/2023	Johnson, Gordon (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$42,000.00	1122 Colorado Street
	Ψ-12,000.00	
		Suite 208
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Political Consultant
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to co	complete	this form.		
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 16/27 Rpt: 19/65	Texans for Joe Straus			00056637	
4 Date	5 Payee name				
07/31/2023	Korstad, Tara (Mrs.)				
6 Amount (\$)	7 Payee address; City; State; Zip C	Code			
\$2,260.18	412 Thistlewood Dr.				
	Austin, TX 78745				
8 PURPOSE		(h) D	escription		
OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Check if travel outsic	de of Texas. Com	plete Schedule T.
EXPENDITURE	Galaries/ Wages/ Gorillage Easor		Check if Austin, TX,		
		W	Vages for politic	al/administ	ative services
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ought		Office he	eld
expenditure to benefit C/O	н				
Date	Payee name				
08/31/2023	Korstad, Tara (Mrs.)				
Amount (\$)	Payee address; City; State; Zip C	Code			
\$2,260.19	412 Thistlewood Dr.				
. ,					
	Austin, TX 78745				
PURPOSE		(h) p			
OF	(a) Category (See Categories listed at the top of this schedule)		Description Check if travel outside	de of Texas. Com	plete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor	-	Check if Austin, TX,		
		\ \	– Vages for politic	al/administ	ative services
Complete ONLY if direct	Candidate/Officeholder name Office so	ought		Office h	eld
expenditure to benefit C/O	Н				
Date	Payee name				
09/29/2023	Korstad, Tara (Mrs.)				
Amount (\$)	Payee address; City; State; Zip C	Code			
\$2,260.18	412 Thistlewood Dr.				
72,200.20					
	Auctin TV 79745				
	Austin, TX 78745	1			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) D	Description Check if travel outside	do of Toyas Com	inlota Schodula T
EXPENDITURE	Salaries/Wages/Contract Labor		Check if Austin, TX,		•
		W	Uages for politic		
			- 1		
Complete ONLY if direct	Candidate/Officeholder name Office so	ught		Office he	eld
expenditure to benefit C/O		J			

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

	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: 17/27 Rpt: 20/65	Texans for Joe Straus	00056637				
4	Date	5 Payee name					
	10/31/2023	Korstad, Tara (Mrs.)					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$2,546.19	412 Thistlewood Dr.					
		Austin, TX 78745					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Salaries/Wages/Contract Labor	outside of Texas. Complete Schedule T.				
	LAI LINDITORE	l	n, TX, officeholder living expense				
		wages for po	olitical/administrative services				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
9	expenditure to benefit C/O		Office field				
_	Data						
	Date 12/01/2023	Payee name Koretad, Tara (Mrs.)					
		Korstad, Tara (Mrs.)					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$2,546.18	412 Thistlewood Dr.					
		Austin, TX 78745					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Jaianes/ Wages/Contract Eabor	outside of Texas. Complete Schedule T. n, TX, officeholder living expense				
		l	olitical/administrative services				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/O	н					
_	Date	Payee name					
	12/29/2023	Korstad, Tara (Mrs.)					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$7,967.44	412 Thistlewood Dr.					
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
		Austin, TX 78745					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF		outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin	n, TX, officeholder living expense				
		Wages for po	olitical/administrative services				
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held				
	experience to perionic of or i						

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 18/27 Rpt: 21/65	Texans for Joe Straus 00056637				
4	Date	5 Payee name				
	07/14/2023	LHP+Company Inc.				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$7,500.00	PO Box 29382				
		Austin, TX 78755				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Political consultant and related expenses.				
		Totalogi consultant and rotated superioce.				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	H				
	Date	Payee name				
	08/01/2023	LHP+Company Inc.				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$7,500.00	PO Box 29382				
		Austin, TX 78755				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Political consultant and related expenses.				
		Totalogi consultant and rotated superiocei				
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O					
_	Dato	Dougo nama				
	Date	Payee name				
	09/06/2023	LHP+Company Inc.				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$7,500.00	PO Box 29382				
		Austin, TX 78755				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.				
	EXI ENDITORE	Check if Austin, TX, officeholder living expense				
		Political consultant and related expenses.				
_	Operation ONE V. C. F.	Ora didata (Office hadden grown				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held				

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made Ry - Giff/Alwards/Mei

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 19/27 Rpt: 22/65	Texans for Joe Straus 00056637
4 Date	5 Payee name
10/02/2023	LHP+Company Inc.
6 Amount (\$) \$7,500.00	7 Payee address; City; State; Zip Code PO Box 29382
Ψ1,500.00	1 O BOX 23302
	Austin, TX 78755
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Political consultant and related expenses.
	Folitical consultant and related expenses.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Oł	1
Date	Payee name
11/03/2023	LHP+Company Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$7,500.00	PO Box 29382
	Austin, TX 78755
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Political consultant and related expenses.
	· Citalotti Carita i
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Oł	7
Date	Payee name
12/04/2023	LHP+Company Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$9,273.71	PO Box 29382
	A (1. TV 70755
	Austin, TX 78755
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Consulting Expanse (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Political consultant and related expenses.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

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

	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: 20/27 Rpt: 23/65	Texans for Joe Straus 00056637
4	Date	5 Payee name
	07/12/2023	Millan and Company P.C.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$131.25	812 San Antonio St., Suite L17
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Accounting Fee/Ethics Compliance
		7.000 untiling 1 cc/Eurica Compilarioc
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	the state of the s
F	Date	Payee name
	09/01/2023	Millan and Company P.C.
H	Amount (\$)	Payee address; City; State; Zip Code
	\$736.91	813 San Antonio St., Suite L17
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Accounting Fee/Ethics Compliance
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Payee name
	09/07/2023	Millan and Company P.C.
L	Amount (\$)	
	` '	
	\$75.00	814 San Antonio St., Suite L17
		A
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Accounting Fee/Ethics Compliance
		7.55561.tal.ig 7.53/_allio5 551.pliatio5
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		

SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explain	ns how to comp	•
1	Total pages Schedule F1:	· ·	<u> </u>	3 Filer ID (Ethics Commission Filers)
	Sch: 21/27 Rpt: 24/65	Texans for Joe Straus		00056637
4	Date	5 Payee name		•
	11/01/2023	Millan and Company P.C.		
6	Amount (\$)	7 Payee address; City; Sta	ate; Zip Code	9
	\$75.00	815 San Antonio St., Suite L17		
		Austin, TX 78701		
8	PURPOSE	(a) Category (See Categories listed at the top of this	schedule) (b	D) Description
	OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Accounting Fee/Ethics Compliance
				7 loosanting 1 coreanies compilaries
9	Complete ONLY if direct	Candidate/Officeholder name	Office sough	office held
	expenditure to benefit C/OI		J	
F	Date	Payee name		
	11/30/2023	Millan and Company P.C.		
H	Amount (\$)	Payee address; City; Sta	ate; Zip Code	
	\$418.16	816 San Antonio St., Suite L17		
		Austin, TX 78701		
Г	PURPOSE	(a) Category (See Categories listed at the top of this	schedule) (b	D) Description
	OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Accounting Fee/Ethics Compliance
				Accounting recreatines compilative
┢	Complete ONLY if direct	Candidate/Officeholder name	Office sough	office held
	expenditure to benefit C/OI	1		
F	Date	Payee name		
	12/18/2023	Millan and Company P.C.		
	Amount (\$)	Payee address; City; Sta	ate; Zip Code	
	\$56.25	817 San Antonio St., Suite L17		
		Austin, TX 78701		
	PURPOSE	(a) Category (See Categories listed at the top of this	schedule) (b	D) Description
	OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Accounting Fee/Ethics Compliance
				/ locounting i co/Lunes compliance
\vdash	Complete ONLY if direct	Candidate/Officeholder name	Office sough	office held
	expenditure to benefit C/OI		9	
\vdash				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Cobadula F1	1
1	Total pages Schedule F1:	
	Sch: 22/27 Rpt: 25/65	Texans for Joe Straus 00056637
4	Date	5 Payee name
	08/02/2023	Nueces Marketing Partners LTD
6	Amount (\$)	7 Payee address; City; State; Zip Code
١	\$850.50	1920 Nacogdoches Rd.
	Ψ030.30	1020 Haddyaddilod Hai.
		San Antonio, TX 78209
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Rent for committee use.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1
	Date	Payee name
	09/01/2023	Nueces Marketing Partners LTD
	Amount (\$)	Payee address; City; State; Zip Code
	\$850.50	1920 Nacogdoches Rd.
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		San Antonio, TV 70200
		San Antonio, TX 78209
	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 Rent for committee use.
		Refit for confinituee use.
_	Complete ONLY if direct	Condidate/Officeholder name Office cought
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
L	10/02/2023	Nueces Marketing Partners LTD
	Amount (\$)	Payee address; City; State; Zip Code
	\$850.50	1920 Nacogdoches Rd.
		San Antonio, TX 78209
H	PURPOSE	1
	OF	l e e e e e e e e e e e e e e e e e e e
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Rent for committee use.
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y

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

	Credit Card Payment	The Instruction Guide explains how to com	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
l	Sch: 23/27 Rpt: 26/65	Texans for Joe Straus		00056637
4	Date	5 Payee name		,
l	11/02/2023	Nueces Marketing Partners LTD		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	de	
l	\$850.50	1920 Nacogdoches Rd.		
l				
l		San Antonio, TX 78209		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
l				Check if Austin, TX, officeholder living expense Rent for committee use.
l				Netit for committee use.
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
ľ	expenditure to benefit C/O		,,,,	Office field
⊨	Date	Payee name		
l	12/01/2023	Nueces Marketing Partners LTD		
┝	Amount (\$)	Payee address; City; State; Zip Cod	10	
l	\$850.50	1920 Nacogdoches Rd.	JE	
l	Ψ030.30	1320 Nacoguothes Na.		
l		San Antonio, TX 78209		
┡	DUDDOCE		(I=)	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(u)	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Office Overfleau/Refital Expense		Check if Austin, TX, officeholder living expense
l				Rent for committee use.
L				
l	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office soug	ght	Office held
L	experialitate to benefit C/O	1		
l	Date	Payee name		
	07/12/2023	Plum Interests, LLC		
l	Amount (\$)	Payee address; City; State; Zip Cod	de	
l	\$68.20	115 Circle Street		
l				
l		San Antonio, TX 78209		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
l				Check if Austin, TX, officeholder living expense Computer Software
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/O		-	

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

	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: 24/27 Rpt: 27/65	Texans for Joe Straus 00056637
4	Date	5 Payee name
	12/31/2023	Plum Interests, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$68.20	115 Circle Street
		San Antonio, TX 78209
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ľ	OF	Office Overhead/Rental Expense Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Computer Software
L		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experialiture to benefit C/OI	<u> </u>
	Date	Payee name
l	08/02/2023	Spectrum Business
	Amount (\$)	Payee address; City; State; Zip Code
	\$131.09	PO Box 660815
l		
l		Dallas, TX 75266
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Office Overhead/Rental Expense
l	LAI LINDITORE	Check if Austin, TX, officeholder living expense
l		Committee Office Utilities
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	
	Date 09/01/2023	Payee name Spectrum Rusiness
L		Spectrum Business
	Amount (\$)	Payee address; City; State; Zip Code
	\$131.09	PO Box 660815
l		
		Dallas, TX 75266
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Committee Office Utilities
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H		

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

	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: 25/27 Rpt: 28/65	Texans for Joe Straus	00056637
4	Date	5 Payee name	•
	10/02/2023	Spectrum Business	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$130.09	PO Box 660815	
		Dallas, TX 75266	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	outside of Texas. Complete Schedule T.
		Committee C	n, TX, officeholder living expense
		Committee C	onice oundes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/O		Chiec Hela
_	Date	Payee name	
	11/02/2023	Spectrum Business	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$131.09	PO Box 660815	
	4101.00	1 0 Dox 000010	
		Dallas, TX 75266	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overficad/Nertial Expense	n, TX, officeholder living expense
		Committee C	Office Utilities
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	12/01/2023	Spectrum Business	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$131.09	PO Box 660815	
		Dallas, TX 75266	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Committee C	· ·
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	9	

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
Gift/Awards/Memorials Expense
Legal Services

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

	Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Services	s Expense	Salaries/M		e /Contract Labor		OTHER (enter a	category not listed above)	
				The Instruction G	uide explains h	now to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission File	rs)
	Sch: 26/27 Rpt: 29/65		Texans for 3	loe Straus						00056637		
4	Date	5	Payee name									
	12/18/2023		Texas State	History Museu	ım Foundatio	on						
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$10,000.00		1700 Congr	ess Ave.								
			Austin, TX 7	8701								
8	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE			s/Donations M		,		브			plete Schedule T.	
	EXI ENDITORE		Candidate/C	Officeholder/Pol	itical Commi	ittee		—		officeholder living	g expense	
								Charitable Co	ontr	ibution		
_	Opening the ONLY if allowed	L	2 II - I - I - I Offi				1 4			Off: I-	-1-1	
9	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Offic	ceholder name	O	office sou	gnt			Office h	eia	
_		_										
	Date		Payee name									
	09/01/2023		Travelers In									
	Amount (\$)		Payee address		State;	Zip Co	de					
	\$71.85		PO Box 660	317								
			Dallas, TX 7	5266-0317								
	PURPOSE OF	(a)		e Categories listed at		edule)	(b)	Description				
	EXPENDITURE		Office Overl	nead/Rental Ex	pense			<u></u>		de of Texas. Con officeholder livin	plete Schedule T.	
								—			erage for committee	
								Office.		•	-	
	Complete ONLY if direct		 Candidate/Offic	ceholder name	0	office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	11/02/2023		Travelers In	surance								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$71.85		PO Box 660	317								
			Dallas, TX 7	5266-0317								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE	` `		nead/Rental Ex		, aaio)			outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITORE							_		officeholder living		
								Office.	Ca	sualty Cove	erage for committee	
_	Complete ONLY if alias -t	Ļ	Condidate /Cff	achaldar :		office and	ak+			Office !-	ald	
	Complete ONLY if direct expenditure to benefit C/OI		Januluate/Offic	ceholder name	O	office sou	ynt			Office h	eiu	
_												

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 Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	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: 27/27 Rpt: 30/65	Texans for Joe Straus 00056637
4	Date	5 Payee name
	12/01/2023	Travelers Insurance
6	Amount (\$) \$71.85	7 Payee address; City; State; Zip Code PO Box 660317
		Dallas, TX 75266-0317
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Property and Casualty Coverage for committee Office.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/18/2023	U.S. Post Office
	Amount (\$) \$332.00	Payee address; City; State; Zip Code 5500 Broadway San Antonio, TX 78209
	PURPOSE	
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PO Box Rental Fee
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/02/2023	U.S. Post Office
	Amount (\$) \$16.17	Payee address; City; State; Zip Code 5500 Broadway
		San Antonio, TX 78209
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Postage
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(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) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 31/65 Texans for Joe Straus 00056637 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS Date Payee name 12/31/2023 Chase Cardmember Service Amount (\$) Payee address; City; State; Zip Code \$183.44 PO Box 94014 Palatine, IL 60094 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (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 Credit Card Payment Due 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date Department of Treasury 12/31/2023 Amount (\$) Payee address; City; State; Zip Code \$8,160.93 Internal Revenue Service Center Ogden, UT 84201 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Federal Payroll Taxes Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F4

Advertising Expense Accounting/Banking	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District			
Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Food/Beverage Expense Polling Expense ly - Gift/Awards/Memorials Expense Printing Expense lal Committee Legal Services Salaries/Wages/Contract Labor			Travel Out of D			
Candidate/Officeriolder/Folitica	The Instruction Guide expl			OTTILK (enter a	a category not listed above)		
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID	(Ethics Commission Filers)		
Sch: 1/30 Rpt: 32/65	Texans for Joe Straus			00056637			
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CRE	DIT CARD	\$	613.36		
5 Date 12/10/2023	6 Payee name AT&T Mobility						
7 Amount (\$)	•	State; Zip Co	de				
\$138.76	PO Box 650574	, ,					
	Dallas, TX 75265-0574						
9 TYPE OF EXPENDITURE	X Political	Non-Polit	ical				
10 PURPOSE OF	(a) Category (See Categories listed at the top of the	nis schedule)	(b) Description				
EXPENDITURE	Office Overhead/Rental Expense		ш	outside of Texas. Con , TX, officeholder livin			
			Cellular Telep	ohone for politi	cal use		
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sou	ght	Office h	eld		
Date	Payee name						
07/10/2023	AT&T Mobility						
Amount (\$)	· · · · · · · · · · · · · · · · · · ·	State; Zip Co	de				
\$141.68	PO Box 650574						
	Dallas, TX 75265-0574						
TYPE OF EXPENDITURE	X Political	Non-Polit	ical				
PURPOSE	(a) Category (See Categories listed at the top of the	nis schedule)	(b) Description				
OF EXPENDITURE	Office Overhead/Rental Expense		ш	outside of Texas. Con , TX, officeholder livin			
				phone for politi			
			·	•			
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name	Office sou	ght	Office h	eld		
Ī							

EXPENDITURE CATEGORIES FOR BOX 10(a)

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense	Office Ove Polling Ex		Transportation E Travel in District	
Contributions/ Donations Made By Candidate/Officeholder/Politica			rpense /ages/Contract Labor	Travel Out of Dis OTHER (enter a	strict category not listed above)
	The Instruction Guide exp	plains how to co	mplete this form.	<u> </u>	
1 Total pages Schedule F4: Sch: 2/30 Rpt: 33/65	2 FILER NAME Texans for Joe Straus			3 Filer ID 00056637	(Ethics Commission Filers)
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CRE	DIT CARD	\$	613.36
5 Date 08/15/2023	6 Payee name AT&T Mobility				
7 Amount (\$) \$146.76	8 Payee address; City; PO Box 650574	State; Zip Co	de		
9 TYPE OF	Dallas, TX 75265-0574				
EXPENDITURE	X Political	Non-Poli	tical		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense		Check if Austin	outside of Texas. Com n, TX, officeholder living phone for polition	g expense
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sou	ght	Office he	eld
Date 09/10/2023	Payee name AT&T Mobility				
Amount (\$) \$146.76	PO Box 650574	State; Zip Co	de		
	Dallas, TX 75265-0574				
TYPE OF EXPENDITURE	X Political	Non-Poli	tical		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense		Check if Austin	outside of Texas. Com n, TX, officeholder living phone for polition	g expense
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ght	Office he	eld

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ns how to complete this form.	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 F4:	·	·	3 Filer ID (Ethics Commission Filers)
Sch: 3/30 Rpt: 34/65	Texans for Joe Straus		00056637
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED T	O A CREDIT CARD	\$ 613.36
5 Date 10/10/2023	6 Payee name AT&T Mobility		
7 Amount (\$) \$157.10	PO Box 650574	ate; Zip Code	
	Dallas, TX 75265-0574		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense phone for political use
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
11/10/2023	AT&T Mobility		
Amount (\$) \$157.04	Payee address; City; Sta PO Box 650574 Dallas, TX 75265-0574	ate; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense phone for political use
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

EXPENDITURE CATEGORIES FOR BOX 10(a)

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(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 Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 4/30 Rpt: 35/65 Texans for Joe Straus 00056637 \$ 613.36 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 07/26/2023 Apple Store Amount (\$) Payee address; City; State; Zip Code \$2.99 1 Infinite Loop Cupertino, CA 95014 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (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 Data Storage Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 08/26/2023 Apple Store Amount (\$) Payee address; City; State; Zip Code \$2.99 1 Infinite Loop

SCHEDULE F4

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 10(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Ove Polling Ex Printing Ex			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
		The Instruction Guide exp	olains how to co	mplete this form.		
1 Total pages Schedule F4:	2 FILER NAM	E			3	Filer ID (Ethics Commission Filers)
Sch: 5/30 Rpt: 36/65	Texans for	Joe Straus				00056637
4 TOTAL OF UNITEMIX	ZED EXPENI	DITURES CHARGED	TO A CRE	DIT CARD	\$	613.36
5 Date	6 Payee name	9				
09/27/2023	Apple Stor	е				
7 Amount (\$) \$2.99	8 Payee addre	оор	State; Zip Co	de		
0 TVDE 05	Cupertino,	CA 95014				
9 TYPE OF EXPENDITURE	X	Political	Non-Poli	tical		
10 PURPOSE	(a) Category (See Categories listed at the top of	this schedule)	(b) Description		
OF EXPENDITURE	1 ,	rhead/Rental Expense	·	Check if travel	n, TX,	de of Texas. Complete Schedule T. officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ght		Office held
Date	Payee name	9				
10/27/2023	Apple Stor	е				
Amount (\$) \$2.83	Payee addr 1 Infinite L		State; Zip Co	de		
	Cupertino,	CA 95014				
TYPE OF EXPENDITURE	X	Political	Non-Poli	tical		
PURPOSE OF EXPENDITURE	1 ,	See Categories listed at the top of rhead/Rental Expense	this schedule)	=	n, TX,	de of Texas. Complete Schedule T. officeholder living expense
Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ght		Office held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Legal Services	Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
1 Total pages Cabadula F4:	The Instruction Guide explains	now to complete this form.	2 Files ID (Ethios Commission Files)
1 Total pages Schedule F4: Sch: 6/30 Rpt: 37/65	Texans for Joe Straus		3 Filer ID (Ethics Commission Filers) 00056637
TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED TO	A CREDIT CARD	\$ 613.36
5 Date 11/08/2023	6 Payee name Apple Store		
7 Amount (\$) \$587.81	1 Infinite Loop	Zip Code	
	Cupertino, CA 95014		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ardware
11 Complete ONLY if direct expenditure to benefit C/OF		Office sought	Office held
Date	Payee name		
07/01/2023	Aristotle		
Amount (\$) \$982.50	Payee address; City; State; 205 Pennsylvania Ave., SE Washington, DC 20003	Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense pliance software and database.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Dlains how to complete this form.	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 F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 7/30 Rpt: 38/65	Texans for Joe Straus		00056637
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$ 613.36
5 Date 10/01/2023	6 Payee name Aristotle		
7 Amount (\$) \$982.50	205 Pennsylvania Ave., SE	State; Zip Code	
9 TYPE OF EXPENDITURE	Washington, DC 20003 X Political	Non-Political	
10 PURPOSE	(a) Category (See Categories listed at the top of	this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	Check if trave	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense npliance software and database.
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
08/30/2023	Bohanan's		
Amount (\$) \$257.31	Payee address; City; 219 E Houston St. San Antonio, TX 78205	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	Check if trave	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense discuss political business.
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Over Polling Exp Printing Exp		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide exp	plains how to con	nplete this form.	
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Sch: 8/30 Rpt: 39/65	Texans for Joe Straus			00056637
TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREI	DIT CARD	\$ 613.36
5 Date 12/13/2023	6 Payee name Bush Foundation			
7 Amount (\$) \$422.30	8 Payee address; City; PO Box 14141	State; Zip Coo	le	
	College Station, TX 77841-4141			
9 TYPE OF EXPENDITURE	X Political	Non-Politi	cal	
10 PURPOSE	(a) Category (See Categories listed at the top of	this schedule)	(b) Description	
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political C		Check if Austin	outside of Texas. Complete Schedule T. 1, TX, officeholder living expense th Birthday Celebration Event
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	ht	Office held
Date	Payee name			
09/30/2023	Dropbox			
Amount (\$) \$127.79	333 Brannan Street	State; Zip Coo	le	
	San Francisco, CA 94107			
TYPE OF EXPENDITURE	X Political	Non-Politi	cal	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense	this schedule)	<u> </u>	outside of Texas. Complete Schedule T. n, TX, officeholder living expense offtware
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name	Office soug	ht	Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(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 Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 9/30 Rpt: 40/65 Texans for Joe Straus 00056637 \$ 613.36 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 12/13/2023 Forge and Feather Amount (\$) Payee address; State; Zip Code \$767.34 308 Elizabeth Rd. Austin, TX 78209 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Holiday gift for committee staff member. 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 09/23/2023 Go Daddy.com Payee address: Amount (\$) City; State; Zip Code \$527.74 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Domain Registration**

Complete ONLY if direct

expenditure to benefit C/OH

Candidate/Officeholder name

Office sought

Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(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) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 10/30 Rpt: 41/65 Texans for Joe Straus 00056637 \$ 613.36 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 07/16/2023 Go Daddy.com Amount (\$) Payee address; City; State; Zip Code \$31.97 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (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 Website and email hosting 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 08/02/2023 Go Daddy.com Payee address: Amount (\$) City; State; Zip Code \$31.97 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Website and email hosting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(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) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 11/30 Rpt: 42/65 Texans for Joe Straus 00056637 \$ 613.36 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 09/16/2023 Go Daddy.com Amount (\$) Payee address; City; State; Zip Code \$31.97 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (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 Website and email hosting 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 10/02/2023 Go Daddy.com Payee address: Amount (\$) City; State; Zip Code \$31.97 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Website and email hosting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(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) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 12/30 Rpt: 43/65 Texans for Joe Straus 00056637 \$ 613.36 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 11/16/2023 Go Daddy.com Amount (\$) Payee address; City; State; Zip Code \$31.97 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (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 Website and email hosting 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 12/16/2023 Go Daddy.com Payee address: Amount (\$) City; State; Zip Code \$31.97 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Website and email hosting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F4

	Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense		ayment/Reimbursement erhead/Rental Expense pense	Solicitation/Fundraising Expense Transportation Equipment & Relat Travel in District	ed Expense
	Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards/Memorials Expense	e Printing E		Travel Out of District OTHER (enter a category not liste	ed above)
		The Instruction Guide ex	plains how to co	mplete this form.		
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Comm	mission Filers)
	Sch: 13/30 Rpt: 44/65	Texans for Joe Straus			00056637	
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	O TO A CRE	DIT CARD	\$ 613.36	
1	Date 07/05/2023	6 Payee name Houston Chronicle				
	Amount (\$)		State; Zip Co	ode		
	\$29.99	4747 Southwest Freeway				
		-				
		Houston, TX 77027				
9	TYPE OF EXPENDITURE	X Political	Non-Pol	tical		
10	PURPOSE	(a) Category (See Categories listed at the top of	this schedule)	(b) Description		
	OF EXPENDITURE	Office Overhead/Rental Expense		_ <u></u>	outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
					scription for Political Use.	
				, , , , , , , , , , , , , , , , , , , ,		
	Complete ONLY if direct	Candidate/Officeholder name	Office sou	ght	Office held	
	expenditure to benefit C/OI	4				
	Date	Payee name				
	08/05/2023	Houston Chronicle				
	Amount (\$)	Payee address; City;	State; Zip Co	ode		
	\$29.99	4747 Southwest Freeway				
	TVDE OF	Houston, TX 77027				
	TYPE OF EXPENDITURE	X Political	Non-Pol	tical		
	PURPOSE OF	(a) Category (See Categories listed at the top of		(b) Description		
	EXPENDITURE	Office Overhead/Rental Expense			outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
					scription for Political Use.	
				,	•	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ght	Office held	
1						

SCHEDULE F4

	Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense		ayment/Reimbursement rhead/Rental Expense bense		draising Expense Equipment & Related Expense t
	Contributions/ Donations Made By Candidate/Officeholder/Politica	y - Gift/Awards/Memorials Expense	Printing Ex		Travel Out of Di	
		The Instruction Guide expl	lains how to co	mplete this form.		
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID	(Ethics Commission Filers)
	Sch: 14/30 Rpt: 45/65	Texans for Joe Straus			00056637	
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CRE	DIT CARD	\$	613.36
5	Date 09/05/2023	6 Payee name Houston Chronicle				
7	Amount (\$)	8 Payee address; City; S	State; Zip Co	de		
	\$29.99	4747 Southwest Freeway				
		Houston TV 77027				
Ļ	TYPE OF	Houston, TX 77027				
9	EXPENDITURE	X Political	Non-Poli	tical		
10		(a) Category (See Categories listed at the top of the	his schedule)	(b) Description		
	OF EXPENDITURE	Office Overhead/Rental Expense		<u>—</u>	outside of Texas. Con	
				ш	n, TX, officeholder livin Scription for Po	
				Wieritally Gub	onpuon for i o	mudai 030.
11	. Complete ONLY if direct	Candidate/Officeholder name	Office sou	ght	Office h	eld
	expenditure to benefit C/OI	4				
Г	Date	Payee name				
	10/05/2023	Houston Chronicle				
Г	Amount (\$)	Payee address; City; S	State; Zip Co	de		
	\$29.99	4747 Southwest Freeway				
		Havetan TV 77007				
H	TYPE OF	Houston, TX 77027				
L	TYPE OF EXPENDITURE	X Political	Non-Poli	tical		
	PURPOSE	(a) Category (See Categories listed at the top of the	his schedule)	(b) Description		
	OF EXPENDITURE	Office Overhead/Rental Expense		<u> </u>	outside of Texas. Con n, TX, officeholder livin	•
					scription for Po	- ·
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ght	Office h	eld
T						
1						

SCHEDULE F4

Advertising Ex Accounting/Ba Consulting Ex	inking	Event Expense Fees Food/Beverage Expense	Office Ov	ayment/Reimbursement erhead/Rental Expense spense	Solicitation/Fundraising Expense Transportation Equipment & Related Ex Travel in District	xpense
Contributions/	Donations Made By Officeholder/Politica	y - Gift/Awards/Memorials E	xpense Printing E	xpense Vages/Contract Labor	Travel Out of District OTHER (enter a category not listed about	ove)
		The Instruction Guid	de explains how to co	mplete this form.		
1 Total pages	Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
Sch: 15/30	Rpt: 46/65	Texans for Joe Straus			00056637	
4 TOTAL O	F UNITEMIZ	ZED EXPENDITURES CHAR	GED TO A CRE	DIT CARD	\$ 613.36	
5 Date	,	6 Payee name				
11/06/2023	3	Houston Chronicle				
7 Amount (\$)	#20.00	8 Payee address; City;	State; Zip Co	ode		
	\$29.99	4747 Southwest Freeway				
		Houston, TX 77027				
9 TYPE C		X Political	Non-Pol	itical		
10 PURPOS	SE	(a) Category (See Categories listed at the	e ton of this schedule)	(b) Description		
OF		Office Overhead/Rental Expe		l — ·	outside of Texas. Complete Schedule T.	
EXPENDIT	URE	'			n, TX, officeholder living expense	
				Monthly Sub	scription for Political Use.	
11 Complete O	NII V if alianat	Coundidate/Office ballder reces	Office		Office hold	
11 Complete O expenditure	to benefit C/O	Candidate/Officeholder name H	Office sou	igni	Office held	
Date		Payee name				
12/05/2023	3	Houston Chronicle				
Amount (\$)		Payee address; City;	State; Zip Co	ode		
	\$29.99	4747 Southwest Freeway				
		Houston, TX 77027				
TYPE C)E					
EXPENDIT		X Political	Non-Pol	itical		
PURPO	SE	(a) Category (See Categories listed at the	e top of this schedule)	(b) Description		
OF EXPENDIT	URE	Office Overhead/Rental Expe	ense	l =	outside of Texas. Complete Schedule T.	
				│ 	n, TX, officeholder living expense scription for Political Use.	
				Wioriany Sub	scription for Folitical Osc.	
	NLY if direct to benefit C/OI	Candidate/Officeholder name H	Office sou	<u>l</u> ıght	Office held	

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Overho Polling Exper Printing Exper Salaries/Wag	ense Jes/Contract Labor	Transportation E Travel in District Travel Out of Di	
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID	(Ethics Commission Filers)
Sch: 16/30 Rpt: 47/65	Texans for Joe Straus			00056637	
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGEI	TO A CRED	IT CARD	\$	613.36
5 Date 12/10/2023	6 Payee name Ingas				
7 Amount (\$) \$120.16	8 Payee address; City; 66 Hicks St.	State; Zip Code	2		
	New York, NY 11201				
9 TYPE OF EXPENDITURE	X Political	Non-Politic	al		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	this schedule) (k	Check if Austin,	outside of Texas. Com TX, officeholder living SCUSS political l	g expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sough	t	Office he	eld
Date	Payee name				
09/19/2023	Jefferson Hotel				
Amount (\$) \$779.18	Payee address; City; 1200 16th St. NW Washington, DC 20036	State; Zip Code	•		
TYPE OF					
EXPENDITURE	X Political	Non-Politic	al		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Travel Out of District	this schedule) (k	Check if Austin,	outside of Texas. Com TX, officeholder living De Straus while	•
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sough	t	Office he	eld

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(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) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 17/30 Rpt: 48/65 Texans for Joe Straus 00056637 \$ 613.36 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 08/15/2023 Jeffrey's Amount (\$) Payee address; State; Zip Code City; 1204 W Lynn St. \$128.24 Austin, TX 78703 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meeting to discuss political business. 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 12/10/2023 Lyft Amount (\$) Payee address; City; State; Zip Code \$160.69 548 Market St. Suite 68514 San Francisco, CA 94104 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Travel Out of District

Candidate/Officeholder name

Check if Austin, TX, officeholder living expense

business

Office sought

Transportation for Joe Straus while on political

Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Legal Services	Loan Repayment/Reimbursen Office Overhead/Rental Exper Polling Expense se Printing Expense Salaries/Wages/Contract Labo xplains how to complete this forn	nse Transportation Equipment & Related Expense Travel in District Travel Out of District or OTHER (enter a category not listed above)
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 18/30 Rpt: 49/65	Texans for Joe Straus		00056637
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	D TO A CREDIT CARD	\$ 613.36
5 Date 09/30/2023	6 Payee name Mama's Caf		
7 Amount (\$) \$44.89	8 Payee address; City; 2442 Nacogdoches Rd.	State; Zip Code	
	San Antonio, TX 78217		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	Check if	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense to discuss political business.
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
10/27/2023	Mama's Caf		
Amount (\$) \$115.43	Payee address; City; 2442 Nacogdoches Rd. San Antonio, TX 78217	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	Check if	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense to discuss political business.
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Overhe Polling Exper se Printing Expe Salaries/Wag	ense Jes/Contract Labor	Transportation E Travel in District Travel Out of Dis	
1 Total pages Schedule F4:		Apianis now to comp		3 Filer ID	(Ethics Commission Filers)
Sch: 19/30 Rpt: 50/65	Texans for Joe Straus			00056637	(Ethios Commission Filers)
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	D TO A CRED	IT CARD	\$	613.36
5 Date 11/01/2023	6 Payee name Mama's Caf				
7 Amount (\$) \$43.60	8 Payee address; City; 2442 Nacogdoches Rd.	State; Zip Code	,		
9 TYPE OF	San Antonio, TX 78217	_ <u></u>			
9 TYPE OF EXPENDITURE	X Political	Non-Politic	al		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	of this schedule) (b		utside of Texas. Com TX, officeholder living CUSS political I	g expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sough	t	Office he	eld
Date	Payee name				
07/24/2023	Mary Lou's Caf				
Amount (\$) \$40.70	Payee address; City; 4405 McCullough Rd. San Antonio, TX 78212	State; Zip Code			
TYPE OF	X Political	Non-Politic	al		
EXPENDITURE		<u> </u>			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	of this schedule) (b		utside of Texas. Com TX, officeholder livinç CUSS political l	g expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sough	t	Office he	eld

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explair	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ns how to complete this form.	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 F4:	· · · · · · · · · · · · · · · · · · ·	·	3 Filer ID (Ethics Commission Filers)
Sch: 20/30 Rpt: 51/65	Texans for Joe Straus		00056637
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED T	O A CREDIT CARD	\$ 613.36
5 Date 10/18/2023	6 Payee name Microsoft		
7 Amount (\$) \$270.61	8 Payee address; City; Sta 1 Microsoft Way Redmond, WA 98052	te; Zip Code	
0 TVDE 05	Reuliolia, WA 98052		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sometimes of the control o	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense oftware
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
07/23/2023	Nation Builder		
Amount (\$) \$120.00	Payee address; City; Sta PO Box 811428 Los Angeles, CA 90081	te; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sometimes of the control o	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense paign software
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ns how to complete this form.	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 F4:	· · · · · · · · · · · · · · · · · · ·		3 Filer ID (Ethics Commission Filers)
Sch: 21/30 Rpt: 52/65	Texans for Joe Straus		00056637
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED T	O A CREDIT CARD	\$ 613.36
5 Date 08/23/2023	6 Payee name Nation Builder		
7 Amount (\$) \$120.00	PO Box 811428	ate; Zip Code	
2 7/25 25	Los Angeles, CA 90081		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense paign software
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
09/23/2023	Nation Builder		
Amount (\$) \$120.00	Payee address; City; Sta PO Box 811428 Los Angeles, CA 90081	ate; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
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. n, TX, officeholder living expense paign software
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Overhead, Polling Expense Printing Expense Salaries/Wages/	Contract Labor	Travel in District Travel Out of Dis	quipment & Related Expense
1 Total pages Schedule F4:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 22/30 Rpt: 53/65	Texans for Joe Straus			00056637	
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT	CARD \$		613.36
5 Date 10/23/2023	6 Payee name Nation Builder				
7 Amount (\$) \$120.00	PO Box 811428	State; Zip Code			
9 TYPE OF	Los Angeles, CA 90081	Non-Political			
EXPENDITURE		<u> </u>			
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense		Description Check if travel outsi Check if Austin, TX Political campai	, officeholder living	
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sought		Office he	eld
Date	Payee name				
11/23/2023	Nation Builder				
Amount (\$) \$120.00	PO Box 811428	State; Zip Code			
	Los Angeles, CA 90081				
TYPE OF EXPENDITURE	X Political	Non-Political			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense		Description Check if travel outsi Check if Austin, TX Political campai	, officeholder living	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought		Office he	eld

SCHEDULE F4

	Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
	Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards/Memorials Expense	Travel Out of District OTHER (enter a category not listed above)	
		•	Salaries/Wages/Contract Labor ins how to complete this form.	(*
1	Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 23/30 Rpt: 54/65	Texans for Joe Straus		00056637
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$ 613.36
5	Date 12/23/2023	6 Payee name Nation Builder		
7	Amount (\$) \$120.00	8 Payee address; City; St PO Box 811428	ate; Zip Code	
		Los Angeles, CA 90081		
9	TYPE OF EXPENDITURE	X Political	Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if trave	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense npaign software
11	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name H	Office sought	Office held
	Date	Payee name		
	08/02/2023	National Car		
	Amount (\$) \$364.27	Payee address; City; St 600 Corporate Park Dr. St. Louis, MO 63105	ate; Zip Code	
	TYPE OF EXPENDITURE	X Political	Non-Political	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Travel Out of District	Check if trave	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense on for Joe Straus while on political
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

	EXPENDITURE CAT	EGORIES FOR BOX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense (- Git/Awards/Memorials Expense Legal Services	Loan Repayment/Reimbursemer Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	
	The Instruction Guide exp	plains how to complete this form.	
1 Total pages Schedule F4: Sch: 24/30 Rpt: 55/65	FILER NAME Texans for Joe Straus	3 Filer ID (Ethics Commission Filers) 00056637	
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$ 613.36
5 Date 07/17/2023	6 Payee name New York Times		
7 Amount (\$) \$29.79	620 Eighth Ave.	State; Zip Code	
9 TYPE OF EXPENDITURE	New York, NY 10018 X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of a Office Overhead/Rental Expense	Check if tra	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense SCription
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
08/11/2023	New York Times		
Amount (\$) \$29.79	Payee address; City; 620 Eighth Ave. New York, NY 10018	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of a Office Overhead/Rental Expense	Check if tra	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense SCription
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repayment/R. Office Overhead/Re Polling Expense Printing Expense Salaries/Wages/Coi	ntal Expense ntract 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 F4:	·			Filer ID (Ethics Commission Filers)
Sch: 25/30 Rpt: 56/65	Texans for Joe Straus			00056637
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT C	ARD \$	613.36
5 Date 09/08/2023	6 Payee name New York Times		•	
7 Amount (\$) \$29.79	8 Payee address; City; 5 620 Eighth Ave.	State; Zip Code		
9 TYPE OF	New York, NY 10018			
9 TYPE OF EXPENDITURE	X Political	Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of to Office Overhead/Rental Expense			e of Texas. Complete Schedule T. officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought		Office held
Date	Payee name			
10/06/2023	New York Times			
Amount (\$) \$29.79	Payee address; City; S 620 Eighth Ave. New York, NY 10018	State; Zip Code		
TYPE OF EXPENDITURE	X Political	Non-Political		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of to Office Overhead/Rental Expense		l	e of Texas. Complete Schedule T. officeholder living expense ON
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought		Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(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 Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 26/30 Rpt: 57/65 Texans for Joe Straus 00056637 \$ 613.36 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 11/03/2023 **New York Times** Amount (\$) Payee address; State; Zip Code City; \$29.79 620 Eighth Ave. New York, NY 10018 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (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 **Digital Subscription** 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/01/2023 **New York Times**

SCHEDULE **F4**

Accounting/Banking Consulting Expense			Fees Food/Beverage Expense		erhead/Rental Expense xpense	Transportation I Travel in Distric	
	Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee	Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor		Travel Out of Di OTHER (enter a	istrict a category not listed above)	
			The Instruction Guide ex	plains how to co	omplete this form.		
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID	(Ethics Commission Filers)
	Sch: 27/30 Rpt: 58/65	Texans for	Joe Straus			00056637	
4	TOTAL OF UNITEMIZ	ZED EXPEND	ITURES CHARGEI	O TO A CRE	EDIT CARD	\$	613.36
5	Date 12/29/2023	6 Payee name New York T	imes				
7	Amount (\$) \$29.79	8 Payee addres		State; Zip Co	ode		
		New York, I	NY 10018				
9	TYPE OF EXPENDITURE	X	Political	Non-Pol	itical		
10		(a) Category (Se	ee Categories listed at the top of	this schedule)	(b) Description		
	OF EXPENDITURE	Office Over	head/Rental Expense		l <u>–</u>	outside of Texas. Con	
					Digital Subso	n, TX, officeholder livin cription	ig expense
11	Complete ONLY if direct expenditure to benefit C/O		ceholder name	Office sou	ught	Office h	eld
	Date	Payee name					
	07/21/2023	Paradise Ke	еу				
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode		
l	Amount (ϕ)	i dyce dddie.					
	\$50.03	165 Cove F	Harbor N				
		165 Cove H		•			
		165 Cove H	X 78382	Non Ro			
	\$50.03	165 Cove H		Non-Pol			
	\$50.03 TYPE OF EXPENDITURE PURPOSE	165 Cove H Rockport, T	X 78382		itical (b) Description		
	\$50.03 TYPE OF EXPENDITURE	165 Cove H Rockport, T X (a) Category (Se	X 78382 Political		itical (b) Description Check if travel	outside of Texas. Con	
	\$50.03 TYPE OF EXPENDITURE PURPOSE OF	165 Cove H Rockport, T X (a) Category (Se	X 78382 Political ee Categories listed at the top of		itical (b) Description Check if travel	n, TX, officeholder livin	g expense
	\$50.03 TYPE OF EXPENDITURE PURPOSE OF	165 Cove H Rockport, T X (a) Category (Se	X 78382 Political ee Categories listed at the top of		itical (b) Description Check if travel		g expense
	\$50.03 TYPE OF EXPENDITURE PURPOSE OF	165 Cove H Rockport, T X (a) Category (St Food/Bever) Candidate/Offi	X 78382 Political ee Categories listed at the top of		(b) Description Check if travel Check if Austin Meeting to d	n, TX, officeholder livin	g expense business.
	\$50.03 TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	165 Cove H Rockport, T X (a) Category (St Food/Bever) Candidate/Offi	Political ee Categories listed at the top of tage Expense	this schedule)	(b) Description Check if travel Check if Austin Meeting to d	n, TX, officeholder livin	g expense business.
	\$50.03 TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	165 Cove H Rockport, T X (a) Category (St Food/Bever) Candidate/Offi	Political ee Categories listed at the top of tage Expense	this schedule)	(b) Description Check if travel Check if Austin Meeting to d	n, TX, officeholder livin	g expense business.
	\$50.03 TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	165 Cove H Rockport, T X (a) Category (St Food/Bever) Candidate/Offi	Political ee Categories listed at the top of tage Expense	this schedule)	(b) Description Check if travel Check if Austin Meeting to d	n, TX, officeholder livin	g expense business.
	\$50.03 TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	165 Cove H Rockport, T X (a) Category (St Food/Bever) Candidate/Offi	Political ee Categories listed at the top of tage Expense	this schedule)	(b) Description Check if travel Check if Austin Meeting to d	n, TX, officeholder livin	g expense business.
	\$50.03 TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	165 Cove H Rockport, T X (a) Category (St Food/Bever) Candidate/Offi	Political ee Categories listed at the top of tage Expense	this schedule)	(b) Description Check if travel Check if Austin Meeting to d	n, TX, officeholder livin	g expense business.
	\$50.03 TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	165 Cove H Rockport, T X (a) Category (St Food/Bever) Candidate/Offi	Political ee Categories listed at the top of tage Expense	this schedule)	(b) Description Check if travel Check if Austin Meeting to d	n, TX, officeholder livin	g expense business.
	\$50.03 TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	165 Cove H Rockport, T X (a) Category (St Food/Bever) Candidate/Offi	Political ee Categories listed at the top of tage Expense	this schedule)	(b) Description Check if travel Check if Austin Meeting to d	n, TX, officeholder livin	g expense business.
	\$50.03 TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	165 Cove H Rockport, T X (a) Category (St Food/Bever) Candidate/Offi	Political ee Categories listed at the top of tage Expense	this schedule)	(b) Description Check if travel Check if Austin Meeting to d	n, TX, officeholder livin	g expense business.
	\$50.03 TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	165 Cove H Rockport, T X (a) Category (St Food/Bever) Candidate/Offi	Political ee Categories listed at the top of tage Expense	this schedule)	(b) Description Check if travel Check if Austin Meeting to d	n, TX, officeholder livin	g expense business.
	\$50.03 TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	165 Cove H Rockport, T X (a) Category (St Food/Bever) Candidate/Offi	Political ee Categories listed at the top of tage Expense	this schedule)	(b) Description Check if travel Check if Austin Meeting to d	n, TX, officeholder livin	g expense business.

SCHEDULE F4

	EXPENDITUR	RE CATEGORIES FOR B	OX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Overhea se Polling Expens Expense Printing Expen	d/Rental Expense Tran e Trav se Trav	citation/Fundraising Expense sportation Equipment & Related Expense el in District el Out of District ER (enter a category not listed above)
	•	uide explains how to compl		(* * * * * * * * * * * * * * * * * * *
1 Total pages Schedule F4:	2 FILER NAME		3 File	r ID (Ethics Commission Filers)
Sch: 28/30 Rpt: 59/65	Texans for Joe Straus		000	056637
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHA	RGED TO A CREDIT	r CARD \$	613.36
5 Date	6 Payee name			
08/15/2023	The Line Hotel			
7 Amount (\$) \$351.62	8 Payee address; City; 111 E Cesar Chavez Austin, TX 78701	State; Zip Code		
9 TYPE OF	<u> </u>			
EXPENDITURE	X Political	Non-Politica	I	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Travel Out of District	the top of this schedule) (b)	Check if Austin, TX, office	Texas. Complete Schedule T. sholder living expense sus while on political business.
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought		Office held
Date	Payee name			
12/13/2023	The Philosophical Society			
Amount (\$) \$630.00	Payee address; City; PO Box 160144 Austin, TX 78716	State; Zip Code		
TYPE OF EXPENDITURE	X Political	Non-Politica	I	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at a Contributions/Donations Ma Candidate/Officeholder/Pol	ade By	Description Check if travel outside of Check if Austin, TX, office Annual Conference	·
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought		Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(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 Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 29/30 Rpt: 60/65 Texans for Joe Straus 00056637 \$ 613.36 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 12/10/2023 Three Monkeys Amount (\$) Payee address; City; State; Zip Code \$7.05 236 W 54th St. New York, NY 10019 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meeting to discuss political business. 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date Uber

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards	age Expense /Memorials Expense	Polling Expense Printing Exper		Travel in Distr Travel Out of I			
Sundiductor of fice from the first of the fi	-	uction Guide explains			OTTLK (enter	a category not issee above)		
1 Total pages Schedule F4: Sch: 30/30 Rpt: 61/65	2 FILER NAME Texans for Joe Stra	us			3 Filer ID 00056637	(Ethics Commission Filers)		
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES	S CHARGED TO) A CREDI	T CARD	\$	613.36		
5 Date 12/12/2023	6 Payee name United Airlines							
7 Amount (\$) \$337.39	233 S. Wacker Dr.	ity; State	e; Zip Code					
9 TYPE OF EXPENDITURE	Chicago, IL 60606		Non-Politica	al				
10 PURPOSE OF EXPENDITURE	(a) Category (See Categorie Travel Out of Distric		(b)	Check if Austin	, TX, officeholder liv	omplete Schedule T. ing expense tend Yale CEO		
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder	name	Office sought	i	Office	held		
Date 12/11/2023	Payee name Warwick Hotel New	York						
Amount (\$) \$535.93	Payee address; C 65 W 54th St. New York, NY 1001		e; Zip Code					
TYPE OF EXPENDITURE	X Political		Non-Politica	al				
PURPOSE OF EXPENDITURE	(a) Category (See Categorie Travel Out of Distric		(b)	Check if Austin	outside of Texas. Co , TX, officeholder liv oe Straus wh			
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder	name	Office sought		Office	held		

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

SCHEDULE K

	The Instru	cti	on Guide explains how to complete this form.	1	Total p	ages Schedule K:	
	THE IIISUA		on Guide explains now to complete this form.		Sch: 1	/4 Rpt: 62/65	
2	FILER NAME			3		(Ethics Commis	sion Filers)
	Texans for J	oe	Straus		00056	637	
4	Date	5	Name of person from whom amount is received			8 Amount (\$)	
	07/31/2023	<u> </u>	Frost Bank				\$4,261.50
		6	Address of person from whom amount is received; City; State; Zip Code				
			Can Antonia TV 70206				
		Ļ	San Antonio, TX 78296				eu
		7	Purpose for which amount is received	f politic	al conti	ribution returned to	filer
		<u> </u>					
	Date		Name of person from whom amount is received			Amount (\$)	
	08/31/2023	ļ	Frost Bank				\$4,418.75
			Address of person from whom amount is received; City; State; Zip Code				
			San Antonio, TX 78296				
		H		f politic	ol conti	sibution returned to	filor
			Interest Income	і рошіс	ai conti	ribution returned to	illei
		<u> </u>				I	
	Date		Name of person from whom amount is received			Amount (\$)	¢1 4F2 20
	09/29/2023	ļ	Frost Bank				\$1,452.39
			Address of person from whom amount is received; City; State; Zip Code				
			San Antonio, TX 78296				
		H		f politic	al conti	I ribution returned to	filer
			Interest Income	pointe			
	Date	\vdash	Name of person from whom amount is received			Amount (\$)	
	10/31/2023		Frost Bank			Amount (ψ)	\$553.07
	10/01/2020	ļ	Address of person from whom amount is received; City; State; Zip Code			-	Ψ000.01
			Address of person from whom amount is received, City, State, 21p Code				
			San Antonio, TX 78296				
		Г	Purpose for which amount is received	f politic	al conti	ribution returned to	filer
			Interest Income				
	Date	Ħ	Name of person from whom amount is received			Amount (\$)	
	11/30/2023		Frost Bank			, ,	\$428.29
		ļ	Address of person from whom amount is received; City; State; Zip Code			1	
		L	San Antonio, TX 78296				
			Purpose for which amount is received	f politic	al conti	ribution returned to	filer
			Interest Income				
		•					

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

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		pages Schedule K: 2/4 Rpt: 63/65
2	FILER NAME		3	Filer II	D (Ethics Commission Filers)
	Texans for J	oe Straus		0005	6637
4	Date	5 Name of person from whom amount is received	<u> </u>		8 Amount (\$)
	12/31/2023	Frost Bank			\$340.37
		6 Address of person from whom amount is received: City; State; Zip Code			
		Address of person from whom amount is received, City, State, 21p Code			
		San Antonio, TX 78296			
			olitic	nal aan	tribution returned to filer
		Interest Income	Ontic	ai con	tribution returned to filer
		interest meome			
	Date	Name of person from whom amount is received			Amount (\$)
	07/31/2023	Frost Bank Brokerage			\$1,983.80
		Address of person from whom amount is received; City; State; Zip Code			1
		San Antonio, TX 78296			
		Purpose for which amount is received	olitic	al con	tribution returned to filer
		Dividend Income			
	Date	Name of person from whom amount is received			Amount (\$)
	08/31/2023	Frost Bank Brokerage			\$2,063.53
	00/01/2020				
		Address of person from whom amount is received; City; State; Zip Code			
		San Antonio, TX 78296			
			olitic	al con	I tribution returned to filer
		Dividend Income	Ontic	ai con	inbution retained to life
	Date	Name of person from whom amount is received			Amount (\$)
	09/29/2023	Frost Bank Brokerage			\$5,851.45
		Address of person from whom amount is received; City; State; Zip Code			
		San Antonio, TX 78296			
		Purpose for which amount is received	olitic	al con	tribution returned to filer
		Dividend Income			
	Date	Name of person from whom amount is received			Amount (\$)
	10/31/2023	Frost Bank Brokerage			\$7,311.49
		Address of person from whom amount is received; City; State; Zip Code	•••••		•
		Address of person from whom amount is received, Only, State, 2 p sode			
		San Antonio, TX 78296			
			olitic	al con	L tribution returned to filer
		Dividend Income	J.161C	.a. 0011	aauon rotainou to moi
_					

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

SCHEDULE K

	The Instru	cti	on Guide explains how to complete this form.	1		pages Schedule K: 3/4 Rpt: 64/65
2	FILER NAME			3	Filer II	Commission Filers)
	Texans for J	oe	Straus		0005	6637
4	Date	5	Name of person from whom amount is received	•		8 Amount (\$)
	11/30/2023		Frost Bank Brokerage			\$7,126.73
		6	Address of person from whom amount is received; City; State; Zip Code			"
		L	San Antonio, TX 78296			
		7		politi	cal con	tribution returned to filer
			Dividend Income			
	Date		Name of person from whom amount is received			Amount (\$)
	12/31/2023		Frost Bank Brokerage			\$7,371.45
		l	Address of person from whom amount is received; City; State; Zip Code			"
			San Antonio, TX 78296			
				politi	cal con	tribution returned to filer
			Dividend Income			
	Date		Name of person from whom amount is received			Amount (\$)
	07/31/2023		Jefferson Bank			\$721.04
		l	Address of person from whom amount is received; City; State; Zip Code			Ϊ
			Car. Antaria TV 70001			
		L	San Antonio, TX 78201			<u> </u>
			Purpose for which amount is received	politi	cal con	tribution returned to filer
		<u> </u>				<u> </u>
	Date		Name of person from whom amount is received			Amount (\$)
	08/31/2023	ļ	Jefferson Bank			\$771.84
			Address of person from whom amount is received; City; State; Zip Code			
			San Antonio, TX 78201			
		\vdash		noliti	cal con	I tribution returned to filer
			Interest Income	politi	cai com	inbution returned to lile
_	Data	<u> </u>	Name of parson from whom amount is received			Amount (th)
	Date 09/29/2023		Name of person from whom amount is received Jefferson Bank			Amount (\$) \$772.98
	03/23/2023	ļ				Ψ112.30
			Address of person from whom amount is received; City; State; Zip Code			
			San Antonio, TX 78201			
		\vdash		politi	cal con	tribution returned to filer
			Interest Income			

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: 4/4 Rpt: 65/65 2 FILER NAME Filer ID (Ethics Commission Filers) Texans for Joe Straus 00056637 Date 8 Amount (\$) 5 Name of person from whom amount is received 10/31/2023 Jefferson Bank \$749.16 6 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78201 Purpose for which amount is received Check if political contribution returned to filer Interest Income Name of person from whom amount is received Amount (\$) Date 11/30/2023 Jefferson Bank \$750.24 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78201 Purpose for which amount is received Check if political contribution returned to filer Interest Income Date Name of person from whom amount is received Amount (\$) 12/31/2023 \$776.36 Jefferson Bank Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78201 Purpose for which amount is received Check if political contribution returned to filer Interest Income