# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

Th	e C/OH Instruction (	Guide explains how to comp	lete this form.	1 Filer ID (Ethics Commis 00069489	sion Filers)	2 Total pages	filed: 68
3	CANDIDATE /	MS / MRS / MR	FIRST	•	MI	OFFICE	LICE ON! Y
ľ	OFFICEHOLDER NAME	The Honorable	Tony D.			Date Received	USE ONLY
						ELECTRONI	CALLY FILED
		NIOVALANE			OUEEN	01/15/2024	07.2211.22
		NICKNAME	LAST Tinderholt		SUFFIX	01/13/2024	
4	CANDIDATE /	ADDRESS / PO BOX; APT	Γ / SUITE #: CIT	Y:	ZIP CODE	Date Hand-delivered	d or Date Postmarked
	OFFICEHOLDER MAILING ADDRESS	3800 Park Manor Ct.	.,	,		Receipt #	Amount
	Change of Address	Arlington, TX 76017				Date Processed	
	_					Bute 1 100c35cu	
						Date Imaged	
5	CAMPAIGN	MS / MRS / MR	FIRST		MI		
	TREASURER	Mrs.	Jan E.				
	NAME						
		NICKNAME	LAST		SUFFIX		
			Tyler				
6	CAMPAIGN	STREET ADDRESS (NO PO	D BOX PLEASE);	APT	/ SUITE #; CITY;	S	TATE; ZIP CODE
	TREASURER ADDRESS	3705 Pimlico Dr.					
	(Residence or Business)	Arlington, TX 76017					
Ļ	CAMPAIGN	AREA CODE PHO	NE NUMBER E	EXTENSION			
ľ	TREASURER		INE NOMBER E	EXTENSION			
	PHONE	(817) 465-2003					
8	REPORT						
	TYPE	X January 15	30th day before	election	Runoff	15th day after	campaign treasurer
		July 15	8th day before	olootion $\square$	Exceeded modified	_	officeholder only) Attach C/OH-FR)
			our day before	election	reporting limit	Final Report (A	MIACII C/OH-PK)
9	PERIOD	Month Day Year			Month Day	Year	
	COVERED	07/01/2023	TH	IROUGH	12/31/202	23	
10	ELECTION	ELECTION DATE			ELECTION TYPE	— a	
		Month Day Year 03/05/2024	LXIP	rimary	Runoff	Other	
		03/03/2024	G	eneral	Special		
11	OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
		State Representative Dis	trict 94 Tarrant		State Represent	tative District 94	1
L							
			<u> </u>			<u> </u>	
			GO T	O PAGE 2			
I				O FAGE 2			

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 68

13 C / OH NAME	Tinderholt, Tony D. (	he Honorable)	<b>14</b> Filer ID 00069489	(Ethics Commission Filers)							
15 NOTICE FROM POLITICAL COMMITTEE(S)	FROM candidate / officeholder. These expenditures may have been made without the candidate's or officeholders are required to report this information only if they receive										
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME									
	GENERAL	COMMITTEE ADDRESS									
	SPECIFIC	COMMITTEE ADDRESS									
	Si Edil id										
		COMMITTEE CAMPAIGN TREASI	JRER NAME								
		COMMITTEE CAMPAIGN TREASI	JRER ADDRESS								
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS ES OF LOANS, OR CONTRIBUTIO	OTHER THAN PLEDGES, LOANS NS MADE ELECTRONICALLY)	<b>\$</b> 0.00							
		<b>AL CONTRIBUTIONS</b> PLEDGES, LOANS, OR GUARANTE	EES OF LOANS)	\$ 9,669.50							
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00							
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 81,720.17							
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED RIOD	AS OF THE LAST DAY OF THE	\$ 208,844.89							
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDII TING PERIOD	NG LOANS AS OF THE LAST DAY	\$ 0.00							
<b>17</b> AFFIDAVIT			n, under penalty of perjury, that the a and includes all information required Election Code.								
			The Honorable Tony D. Tinde	erholt							
			Signature of Candidate or Officeh	older							
AFFIX NO	TARY STAMP / SEAL AB	OVE									
Sworn to and subso	cribed before me, by the s	aid	, this the	day							
of	, 20, to co	rtify which, witness my hand and se	al of office.								
Signature of office	er administering	Printed name of officer admini	stering Title of office	cer administering oath							

## **SUBTOTALS - C/OH**

# FORM C/OH COVER SHEET PG 3

			CC	OVER SHEET	3 of 68
	LER NA nderho	ME It, Tony D. (The Honorable)	<b>19</b> Filer ID 00069489	(Ethics Commission	Filers)
		E SUBTOTALS SCHEDULE		SUBTOTAL AM	10UNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	9,669.50
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS	\$		
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	81,720.17
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10	). <u> </u>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
1:	L. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12	2. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	1,024.95

	MONET	ARY POLITICAL CONTRIE		SCHEDULE A1				
	The Instruc	ction Guide explains how to complet	te this forr	n.	1	Total pages Schedule A1: Sch: 1/6 Rpt: 4/68		
2	FILER NAME Tinderholt, T	ony D. (The Honorable)			3	Filer ID (Ethics Commission 00069489	on Filers)	
4	Date 07/12/2023	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$1,041.02	
8	Principal occu	Bulverde, TX 78163 pation / Job title (See Instructions)	ام	Employer (See Instructions	·,			
<u> </u>	retired	pation 7 Job title (See Instructions)	9	retired	·)			
	Date Full name of contributor out-of-state PAC (ID#:)  11/22/2023 Christensen, Mark  Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$260.25	
	Deinsinal assu	Euless, TX 75060		Franks var (Caa Instructions				
	Principal occu Pilot instructo	pation / Job title (See Instructions) or		Employer (See Instructions Fight Safety Int'l	5)			
	Date 07/13/2023	Full name of contributor out-of-state Coker, Chris (Mrs.)  Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$250.00	
		San Antonio, TX 78260						
	Principal occu self-employe	pation / Job title (See Instructions) d		Employer (See Instructions) self-employed				
	Date 08/10/2023	Czarrowitz, Jon	PAC (ID#:	)		Amount of Contribution (\$)	\$25.00	
	Principal occu truck driver	pation / Job title (See Instructions)		Employer (See Instructions SRS Distributing	s)			
	Date Full name of contributor out-of-state PAC (ID#:					Amount of Contribution (\$)	\$25.00	
	Principal occu delivery drive	pation / Job title (See Instructions) er		Employer (See Instructions ABC Supply	s)			
			l .					

	MONET	ARY POLITICAL CONTRIBU		SCHEDULE A1				
	The Instruc	ction Guide explains how to complete t	this for	m.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 5/68		
2	FILER NAME Tinderholt, T	ony D. (The Honorable)			3	Filer ID (Ethics Commission 00069489	n Filers)	
4	Date 08/30/2023	<ul> <li>Full name of contributor  out-of-state PAC  Czrowitz, Jon</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$25.00	
8	Principal occu	Arlington, TX 76017 pation / Job title (See Instructions)	l <sub>a</sub>	Employer (See Instructions	-, 			
0	delivery drive		·)					
	Date Full name of contributor out-of-state PAC (ID#:)  O9/30/2023 Czrowitz, Jon  Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$25.00	
	Delicalization	Arlington, TX 76017	Fanda an (Carlos bastos tiana					
	delivery drive	pation / Job title (See Instructions) er		Employer (See Instructions ABC Supply	5)			
	Date 12/06/2023	Full name of contributor out-of-state PAC Czrowitz, Jon Contributor address; City; State; Zip Code	C (ID#:	)	•	Amount of Contribution (\$)	\$25.00	
		Arlington, TX 76017						
	Principal occu delivery drive	pation / Job title (See Instructions) er		Employer (See Instructions) ABC Supply				
	Date 09/19/2023	Full name of contributor out-of-state PAC Killy, Dennis Contributor address; City; State; Zip Code Arlington, TX 76012			•	Amount of Contribution (\$)	\$200.00	
	Principal occu Investor	pation / Job title (See Instructions)		Employer (See Instructions self-employed	5)			
	Date Full name of contributor out-of-state PAC (ID#:				•	Amount of Contribution (\$)	\$25.00	
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions retired	s)			
			•					

	MONET	ARY POLITICAL C		SCHEDULE A1			
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/68	
2	FILER NAME Tinderholt, T	ony D. (The Honorable)			3	Filer ID (Ethics Commission 00069489	on Filers)
4	Date 09/05/2023	Full name of contributor     McGuire, Michael     Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code		7	Amount of Contribution (\$)	\$1,500.00
8	Principal occu	Dallas, TX 75205 pation / Job title (See Instructions)	la	Employer (See Instructions	·)		
President/CE			P)				
	Date Full name of contributor out-of-state PAC (ID#:)  11/29/2023 McGuireWoods PAC  Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$500.00
		Richmond, VA 23219	1		<u> </u>		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	S)		
	Date Full name of contributor out-of-state PAC (ID#:_ 10/09/2023 Pack, Brain Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$25.00
		Hurst, TX 76054					
	Principal occu Manager	pation / Job title (See Instructions)		Employer (See Instructions CBI	5)		
	Date 09/28/2023	Full name of contributor Ramsey, John Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu Manufacturir	pation / Job title (See Instructions)		Employer (See Instructions self-employed	5)		
	Date Full name of contributor out-of-state PAC (ID#:					Amount of Contribution (\$)	\$25.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A			
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 4/6 Rpt: 7/68	
2	FILER NAME Tinderholt, T	ony D. (The Honorable)			3	Filer ID (Ethics Commission 00069489	Filers)
4	Date 10/20/2023	720/2023 Russell, Kay  6 Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$26.03
_		Boerne, TX 78015	1-				
8	Principal occu retired	pation / Job title (See Instructions)	9	Employer (See Instructions retired	5)		
	Date 07/20/2023	Full name of contributor out-of-state PAC (ID# Russell, Kay  Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$26.03		
	Dringing age	Boerne, TX 78015	_	Employer (Coo Instructions	<u></u>		
	retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 08/20/2023	Full name of contributor out-of-state PAC (ID# Russell, Kay  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$26.03
		Boerne, TX 78015					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired			
	Date 09/20/2023	Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$26.03
	Principal occu retired	Boerne, TX 78015 pation / Job title (See Instructions)		Employer (See Instructions retired	<u> </u> s)		
	Date 11/27/2023	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$26.03
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions retired	<b>.</b> (s)			
			-1				

	MONET	ARY POLITICAL CONTRIBUTI	SCHEDULE A1				
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 5/6 Rpt: 8/68	
2	FILER NAME Tinderholt, T	ony D. (The Honorable)			3	Filer ID (Ethics Commission 00069489	on Filers)
4	Date 12/27/2023	<ul> <li>Full name of contributor  out-of-state PAC (ID# Russell, Kay</li> <li>Contributor address; City; State; Zip Code</li> </ul>			7	Amount of Contribution (\$)	\$26.03
_		Boerne, TX 78015	1_				
8	Principal occu retired	pation / Job title (See Instructions)	9	Employer (See Instructions retired	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  09/05/2023 Sacia, Hannah  Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$10.00
	Drincinal occu	Austin, TX 78724 pation / Job title (See Instructions)	1	Employer (See Instructions	-, 		
	Chief of Staf			State of Texas	·)		
	Date 10/17/2023	Full name of contributor out-of-state PAC (ID# Schnautz, Danny  Contributor address; City; State; Zip Code	t:		•	Amount of Contribution (\$)	\$52.05
	Deinsinal	Pasadena, TX 77508	_	Frankrije (Ozakastian			
	Principal occu Manager	pation / Job title (See Instructions)		Employer (See Instructions Clark	5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID# Texas Society of Anesthesiologists PAC Contributor address; City; State; Zip Code  Austin, TX 78701			•	Amount of Contribution (\$)	\$3,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/11/2023	Full name of contributor x out-of-state PAC (ID# Textron PAC Contributor address; City; State; Zip Code Washington, DC 20004	0123612		Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
			1				

MONET	ARY POLITICAL CONTRIBUTION	ΟN	IS		SCHEDULE A1
The Instru	ction Guide explains how to complete this	m.	1	Total pages Schedule A1: Sch: 6/6 Rpt: 9/68	
				3	Filer ID (Ethics Commission Filers) 00069489
• • • • • • • • • • • • • • • • • • • •				7	Amount of Contribution (\$) \$1,500.00
	Houston, TX 77019 upation / Job title (See Instructions)	9	Employer (See Instructions	     S)	
retired			retired		
	The Instru FILER NAME Tinderholt, Total Date 10/28/2023	The Instruction Guide explains how to complete this  FILER NAME Tinderholt, Tony D. (The Honorable)  Date 10/28/2023  5 Full name of contributor out-of-state PAC (ID# Weekley, Richard 6 Contributor address; City; State; Zip Code  Houston, TX 77019  Principal occupation / Job title (See Instructions)	The Instruction Guide explains how to complete this form  FILER NAME  Tinderholt, Tony D. (The Honorable)  Date  5 Full name of contributor out-of-state PAC (ID#:  Weekley, Richard  6 Contributor address; City; State; Zip Code  Houston, TX 77019  Principal occupation / Job title (See Instructions)	Tinderholt, Tony D. (The Honorable)  Date	The Instruction Guide explains how to complete this form.  FILER NAME Tinderholt, Tony D. (The Honorable)  Date 10/28/2023  S Full name of contributor out-of-state PAC (ID#: 7 Weekley, Richard G Contributor address; City; State; Zip Code  Houston, TX 77019  Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political 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	d 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:	
Sch: 1/58 Rpt: 10/68	Tinderholt, Tony D. (The Honorable) 00069489
4 Date	5 Payee name
10/10/2023	A Matter of Taste
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$142.89	4230 Williams Dr. B
	Georgetown, TX 78028
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	flowers for Hannah's father-in-law
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete ONLY if direct expenditure to benefit C/O	
Date	Payee name
10/17/2023	Airbnb
Amount (\$)	Payee address; City; State; Zip Code
\$188.71	888 Brannan St
	San Francisco, CA 94103
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	rental fee Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	X Check if Austin, TX, officeholder living expense
	for housing during Special Session
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
10/23/2023	Airbnb
Amount (\$)	Payee address; City; State; Zip Code
\$1,332.13	888 Brannan St
Ψ1,002.10	ooo Brainian ot
	Con Francisco CA 04103
	San Francisco, CA 94103
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  X Check if Austin, TX, officeholder living expense
	x Check if Austin, TX, officeholder living expense rental fee for housing during special Session
	Territaries for floading during special desision
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

#### 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 Credit Card Payment		mmittee	Legal Services			ages	/Contract Labor		OTHER (enter	a category not listed ab	oove)
			The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 2/58 Rpt: 11/68		Tinderholt, 7	Tony D. (The H	onorable)					00069489		
4	Date	5	Payee name									
	10/31/2023		Airbnb									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$126.12		888 Brannai	n St								
			San Francis	sco, CA 94103								
8	PURPOSE	(a)					(h)	Description				
ľ	OF	(۳)	rental fee	ee Categories listed at	the top of this sched	dule)	(5)		outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		Territar rec					ш		officeholder livin		
								housing durin	ng S	Special Ses	sion	
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Of	fice sou	ght			Office h	ield	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	10/10/2023		Airbnb									
	Amount (\$)	Г	Payee addres	ss; City;	State;	Zip Co	de					
	\$321.92		888 Brannai	n St								
			San Francis	sco, CA 94103								
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sched	dule)	(b)	Description				
	OF EXPENDITURE		rental fee					=			mplete Schedule T.	
								<b>—</b>		officeholder livin		
								housing durin	ıy s	ppeciai Ses	SIUH	
_	Complete ONLY if direct	<u> </u>	Candidate/Offic	ceholder name	Of	fice soug	aht			Office h	vold	
	expenditure to benefit C/OI		Januluale/Onic	centituel name	Oi	iice sou(	ynı			Office i	leiu	
_	Data	_										
	Date 11/07/2023		Payee name									
			Airbnb									
	Amount (\$)		Payee addres	-	State;	Zip Co	de					
	\$643.91		888 Brannai	n St								
			San Francis	sco, CA 94103								
	PURPOSE OF	(a)		ee Categories listed at	the top of this sched	dule)	(b)	Description				
	EXPENDITURE		rental fee					ш		de of Texas. Cor officeholder livin	nplete Schedule T.	
								housing durin				
								ouomig uumi	. y .	-poolal 003		
-	Complete ONLY if direct	L(	Candidate/Offic	ceholder name	Of	fice sou	aht			Office h	ield	
	expenditure to benefit C/OI		a. aa. a . a . a . a . a . a . a		OI		9.16			0.1100 11		
-												

### 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: Sch: 3/58 Rpt: 12/68	2 FILER NAME Tinderholt, Tony D. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00069489	
4	Date 11/13/2023	5 Payee name Airbnb	
6	Amount (\$) \$264.26	7 Payee address; City; State; Zip Code 888 Brannan St	
		San Francisco, CA 94103	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) rental fee  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense housibg during Special Session	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 11/14/2023	Payee name Airbnb	
	Amount (\$) \$397.59	Payee address; City; State; Zip Code 888 Brannan St	
		San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) rental fee  (b) Description Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense housing during Special Session	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 11/28/2023	Payee name Airbnb	
	Amount (\$) \$401.79	Payee address; City; State; Zip Code 888 Brannan St	
		San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) rental fee  (b) Description Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense trip to Austin housing	
	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 By

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

С	candidate/Officeholder/Politica dit Card Payment		Legal Services  The Instruction Guide	Salaries/	Wages	/Contract Labor		OTHER (enter a	category not listed above)
1 Total	pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
Sch	n: 4/58 Rpt: 13/68	Tinderholt,	Tony D. (The Honor	rable)				00069489	
4 Date		5 Payee name							
11/0	7/2023	Airbnb							
6 Amo	unt (\$) \$158.86	7 Payee addre 888 Branna		State; Zip C	ode				
		San Franci	sco, CA 94103						
8 F	PURPOSE OF	(a) Category (S	see Categories listed at the top	o of this schedule)	(b)	Description			
EXI	PENDITURE	rental fee							plete Schedule T.
						housing durin		officeholder living	
						nousing durin	ıy s	special Sess	SIOT
	plete <u>ONLY</u> if direct enditure to benefit C/OI		iceholder name	Office so	<u>l</u> ught			Office he	eld
Date		Payee name	:						
07/2	4/2023	Amazon.co							
Amo	unt (\$)	Payee addre	ess; City;	State; Zip C	ode				
	\$64.92	440 Terry <i>A</i>	Ave						
		Seattle, W	A 98101						
P	PURPOSE OF	(a) Category (S	see Categories listed at the top	o of this schedule)	(b)	Description			
EXI	PENDITURE	Office Over	head/Rental Expens	se		<b>=</b>			plete Schedule T.
						I-pad case	, 1,	officeholder living	g expense
						i-pau case			
	plete <u>ONLY</u> if direct enditure to benefit C/OI		iceholder name	Office so	<u>l</u> ught			Office he	eld
Date		Payee name	!						
	5/2023	Amazon.co							
Amo	unt (\$)	Payee addre	ess; City;	State; Zip C	ode				
7 1110	\$55.04	440 Terry A	•	Otato, Zip O	ouc				
	Ψ00.0-	i iii	WC						
		Seattle, W	A 98101						
P	PURPOSE	(a) Category (S	see Categories listed at the top	o of this schedule)	(b)	Description			
EXF	OF PENDITURE	Event Expe	ense			ш			plete Schedule T.
,						ш		officeholder living	
						supplies for A	yır	ıy ⊏xpo boo	uı
Com	plete ONLY if direct	Candidate/Off	iceholder name	Office so	uabt			Office he	ald
	nditure to benefit C/OI		TOTOGOT HAINE	Onice 30	agrit			Onice III	Jiu

### 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 Comm

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/58 Rpt: 14/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	09/26/2023	Amazon.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.41	440 Terry Ave
		Seattle, WA 98101
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		easel for display at Aging Expo
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	12/06/2023	Arlington Board of Realtor Assoc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.00	3916 Interstate 20 W #160
	\$ 10.00	obje interestate 20 W Wilde
		Arlington, TX 76017
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Realitors awards and installtion luncheon
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/24/2023	Arlington Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$65.00	505 E. Border St
		Arlington, TX 76010
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  State of the City
		registration
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	By - Gift/Awards/Memorials Expense Printing Expense Tra	avel in District avel Out of District THER (enter a category not listed above)
1	Total pages Schedule F1:		ler ID (Ethics Commission Filers)
Ļ	Sch: 6/58 Rpt: 15/68	, , , , , , , , , , , , , , , , , , , ,	0069489
4	Date	5 Payee name Arlington Education Equipolation	
Ļ	09/06/2023	Arlington Education Foundation	
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1141 W. Pioneer Parkway	
	φου.υυ	suite103	
		Arlington, TX 76013	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	, , , , , , , , , , , , , , , , , , ,	of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee	ceholder living expense
		Fundraiser	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Oh		
	Date	Payee name	
	07/03/2023	Arlington Retired School Employees Assoc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$155.00	1000 Eunice Street	
		Arlington, TX 76010	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	of Toyac Complete Cabadida T
	EXPENDITURE	Fees Check if travel outside of Check if Austin, TX, office	of Texas. Complete Schedule T. ceholder living expense
			Shannon Kidd and Tony
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought OH	Office held
	Date	Payee name	
	09/11/2023	Bill Waybourn.com	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,025.00	P.O. Box 151305	
		Arlington, TX 76015	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Continuations/Donations wade by	of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Check if Austin, TX, office campaigne donatio	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought OH	Office held
			i

### SCHEDULE F1

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

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

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

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

	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: 7/58 Rpt: 16/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	09/14/2023	Bluebird Creative co LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$270.00	3211 White Settlement Rd.
		Fort Worth, TX 76107
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  website maintenance
		website maintenance
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Power name
	11/06/2023	Payee name Bluebird Creative co LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	3211 White Settlement Rd.
		Fort Worth, TX 76107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  website update
		website update
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	10/17/2023	Brent Money for Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	2606 Lee St.
		Greenville, TX 75401
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Continuation for campaign
_	Complete ONLY if direct	Candidate/Officeholder name Office sought 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 Committe

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/58 Rpt: 17/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	10/03/2023	Buttermilk Sky Pies
6	Amount (\$) \$90.00	7 Payee address; City; State; Zip Code 1707 N Collins
		Arlington, TX 76011
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Pies for ribbon cutting
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/31/2023	CWS Reseach LLC
	Amount (\$) \$8,375.00	Payee address; City; State; Zip Code 2100 Heritage Ave Apt. 6202 Euless, TX 76039
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Contract labor for campaign staff and consulting
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 10/02/2023	Payee name CWS Reseach LLC
	Amount (\$) \$11,500.00	Payee address; City; State; Zip Code 2100 Heritage Ave Apt. 6202 Euless, TX 76039
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Contract wages managed by CWS
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

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

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

rsement Solicitation/Fundraising Expense

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

OTHER (onter a extension part listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	nmittee	Gift/Awards/Memori Legal Services			/ages/	/Contract Labor		Travel Out of Di OTHER (enter a	District a category not listed above)
L		_		The Instruction	Guiae expiains	now to col	inbie	ete this form.	_		
1	Total pages Schedule F1:	ı							3		(Ethics Commission Filers)
_	Sch: 9/58 Rpt: 18/68	⊢		Tony D. (The	Honorable)					00069489	
4	Date	ı	Payee name								
	08/30/2023		Campos, El	izabeth							
6	Amount (\$)	7	Payee addres	ss; City;	State	e; Zip Co	de				
	\$52.70		1028 Rigsb	у							
			J = 2								
			San Antonio	o, TX 78210							
8	PURPOSE	⊢		ee Categories listed a	at the top of this!	Jedulo)	(b)	Description			
	OF			ee Categories listed a /Memorials Ex		neuul <del>e</del> )	. 7		outsi	de of Texas. Con	mplete Schedule T.
	EXPENDITURE		wwarus	omonais Ei	., 50, 100			_		, officeholder livin	
								Gift for Public	Н	ealth Chair	
9	Complete ONLY if direct		Candidate/Offi	ceholder name	(	Office sou	ght			Office h	ıeld
	expenditure to benefit C/O					1					
H	Date	Π	Payee name				_				
	09/26/2023	ı	Cannon Flo	ral							
_	Amount (\$)	╙	Payee addres		State	e; Zip Co	de				
	\$298.72		512 W. Divi	, ,,	Sidle	., _ıp CU	uc				
	\$ <b>298.7</b> 2		JIC VV. DIVI	JIUII							
				:							
L		L	Arlington, T	X 76004			_				
	PURPOSE	(a)	Category (Se	ee Categories listed a	at the top of this sch	nedule)	(b)	Description			
	OF EXPENDITURE			/Memorials Ex				<b>=</b>			mplete Schedule T.
								<b>—</b>		, officeholder livin	
								Flowers for O	ITIC	ei MCMICha	aei iurieral
	0		No. 10.10.10.10.10.10.10.10.10.10.10.10.10.1			24					
	Complete ONLY if direct expenditure to benefit C/OH		Jandidate/Offi	ceholder name	(	Office sou	ght			Office h	neid
	,	_					_				
	Date		Payee name	_		_	-	_		_	
	10/02/2023	L	City Garage	) 			_		_		
	Amount (\$)	Г	Payee addres	ss; City;	State	e; Zip Co	de				
	\$3.00	ı	201 Main Si								
			Fort Worth,	TX 76012							
	PURPOSE	<u> </u>		ee Categories listed a	at the top of this!	Jedulo)	(b)	Description			
	OF		Event Expe		at the top of this sch	neuule)	<i>,~,</i>		outsi	de of Texas. Con	mplete Schedule T.
	EXPENDITURE		_vont _vhe							, officeholder livin	
						ļ		Parking fee fo			
	Complete ONLY if direct		Candidate/Offi	ceholder name	(	Office sou	ght			Office h	neld
	expenditure to benefit C/OF	Н									
		Ala '	- 0 ' ' '					-			

### SCHEDULE F1

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

Credit Card Payment

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

The Instruction Guide explains how to complete this form

1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
l	Sch: 10/58 Rpt: 19/68	Tinderholt, Tony D. (The Honorable)	00069489
4	Date	5 Payee name	
	08/08/2023	City of Arlington	
6	Amount (\$)	7 Payee address; City; State; Zip Code	)
	\$250.00	P.O. Box 90231	
l			
		Arlington, TX 76004	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense
			fee for booth at Aging Expo
Ļ	Operation ONE V if discort	Overdidate/Office halden account	Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt Office held
⊨	Dete		
	Date 07/07/2023	Payee name Cleod9 Voice	
L			
	Amount (\$) \$51.75	Payee address; City; State; Zip Code 2500 E Randol Mill Road	<i>3</i>
	φ31.73	Ste 204	
L		Arlington, TX 76011	-
	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living expense
			phone service
г	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
l			
	expenditure to benefit C/OI	1	
_		Payee name	
=	expenditure to benefit C/OI		
	expenditure to benefit C/Ol	Payee name	<b>;</b>
	expenditure to benefit C/Ol  Date  08/02/2023	Payee name Cleod9 Voice	3
	Date 08/02/2023 Amount (\$)	Payee name Cleod9 Voice Payee address; City; State; Zip Code	•
	Date 08/02/2023 Amount (\$)	Payee name Cleod9 Voice Payee address; City; State; Zip Code 2500 E Randol Mill Road	3
	Date 08/02/2023 Amount (\$)  PURPOSE	Payee name Cleod9 Voice  Payee address; City; State; Zip Code 2500 E Randol Mill Road Ste 204 Arlington, TX 76011	e b) Description
	Date 08/02/2023 Amount (\$)  PURPOSE OF	Payee name Cleod9 Voice  Payee address; City; State; Zip Code 2500 E Randol Mill Road Ste 204 Arlington, TX 76011	D) Description  Check if travel outside of Texas. Complete Schedule T.
	Date 08/02/2023 Amount (\$)  PURPOSE	Payee name Cleod9 Voice  Payee address; City; State; Zip Code 2500 E Randol Mill Road Ste 204 Arlington, TX 76011  (a) Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
_	Date 08/02/2023 Amount (\$)  PURPOSE OF	Payee name Cleod9 Voice  Payee address; City; State; Zip Code 2500 E Randol Mill Road Ste 204 Arlington, TX 76011  (a) Category (See Categories listed at the top of this schedule)	D) Description  Check if travel outside of Texas. Complete Schedule T.
	Date 08/02/2023  Amount (\$)  PURPOSE OF EXPENDITURE	Payee name Cleod9 Voice  Payee address; City; State; Zip Code 2500 E Randol Mill Road Ste 204 Arlington, TX 76011  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense District office phone service
	Date 08/02/2023 Amount (\$)  PURPOSE OF	Payee name Cleod9 Voice  Payee address; City; State; Zip Code 2500 E Randol Mill Road Ste 204 Arlington, TX 76011  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate/Officeholder name Office sough	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense District office phone service
	Date 08/02/2023  Amount (\$)  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Payee name Cleod9 Voice  Payee address; City; State; Zip Code 2500 E Randol Mill Road Ste 204 Arlington, TX 76011  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate/Officeholder name Office sough	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense District office phone service
	Date 08/02/2023  Amount (\$)  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Payee name Cleod9 Voice  Payee address; City; State; Zip Code 2500 E Randol Mill Road Ste 204 Arlington, TX 76011  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate/Officeholder name Office sough	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense District office phone service

### 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: Sch: 11/58 Rpt: 20/68	FILER NAME     Tinderholt, Tony D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069489
4	Date 09/21/2023	5 Payee name Cleod9 Voice	
6	Amount (\$) \$52.14	7 Payee address; City; State; Zip Code 2500 E Randol Mill Road Ste 204 Arlington, TX 76011	
8	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. , TX, officeholder living expense phone service
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 10/26/2023	Payee name Cleod9 Voice	
	Amount (\$) \$52.45	Payee address; City; State; Zip Code 2500 E Randol Mill Road Ste 204 Arlington, TX 76011	
	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. , TX, officeholder living expense e phone service
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 10/06/2023	Payee name Cleod9 Voice	
	Amount (\$) \$52.14	Payee address; City; State; Zip Code 2500 E Randol Mill Road Ste 204 Arlington, TX 76011	
	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. , TX, officeholder living expense e phone service
	Complete ONLY if direct expenditure to benefit C/ON	Candidate/Officeholder name Office sought	Office held

### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 12/58 Rpt: 21/68	Tinderholt, Tony D. (The Honorable)		00069489
4	Date	5 Payee name		
	12/19/2023	Cleod9 Voice		
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode	
	\$52.45	2500 E Randol Mill Road		
		Ste 204		
		Arlington, TX 76011		
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
				district office phone service
				р
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ıght	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	09/27/2023	Cupid Sweets		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$297.69	11108 Loblolly Lane		
		Euless, TX 76040		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense cookies for ribbon cutting
				COOKIES TOT TIDDOTT CULLING
	Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ıaht	Office held
	expenditure to benefit C/OI		J	
	Date	Payee name		
	12/13/2023	Del Friscos		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$756.00	812 Main St		
		Fort Worth, TX 76102		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE			Check if Austin, TX, officeholder living expense Conservative Leaders dinner
				Conservative Leaders diffiner
	Complete ONLY if direct	Candidate/Officeholder name Office sou	lapt	Office held
	expenditure to benefit C/OI		agrit	Office field
_				

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	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: 13/58 Rpt: 22/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	08/17/2023	Digital Corp Publishing
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,217.81	801 Station
		Arlington, TX 76015
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense door hangers
		door hangers
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
Г	Date	Payee name
	10/04/2023	Digital Corp Publishing
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$6,479.05	801 Station
		Arlington, TX 76015
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense first aid kits to give out as campaign advertising
		mot did kito to give out as campaign daverdoing
┢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>
F	Date	Payee name
	10/27/2023	Digital Corp Publishing
	Amount (\$)	Payee address; City; State; Zip Code
	\$207.84	801 Station
		Arlington, TX 76015
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Graduation certificates
		Graduation certificates
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
ı		

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schodula F1:	
1	Total pages Schedule F1: Sch: 14/58 Rpt: 23/68	2 FILER NAME Tinderholt, Tony D. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00069489
4	Date	5 Payee name
•	10/27/2023	Digital Corp Publishing
L		
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,250.29	801 Station
		Arlington, TX 76015
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		door hangers and pushcards
L		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/27/2023	Digital Corp Publishing
	Amount (\$)	Payee address; City; State; Zip Code
	\$245.19	801 Station
		Arlington, TX 76015
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	LAI LIBITOIL	Check if Austin, TX, officeholder living expense
		thank you cards for donations
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
L	10/27/2023	Digital Corp Publishing
	Amount (\$)	Payee address; City; State; Zip Code
	\$703.63	801 Station
		Arlington, TX 76015
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	LAI LIBITOIL	Check if Austin, TX, officeholder living expense
		pushcards
	Operation ONE V. C. F.	Overlights 10ff on helder and the control of the co
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Openations 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

	Contributions/ Donations Made By Candidate/Officeholder/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: 15/58 Rpt: 24/68	Tinderholt, Tony D. (The Honorable) 00069489	
4	Date	5 Payee name	
	10/27/2023	Digital Corp Publishing	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$172.85	801 Station	
		Arlington, TX 76015	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Gift/Awards/Memorials Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Graduation certificates	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
	Date	Payee name	
	11/07/2023	Digital Corp Publishing	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$2,396.05	801 Station	
		Arlington, TX 76015	
	DUDDOGE		_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Camaign shirts	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
	Date	Payee name	-
	07/03/2023	Direct TV	
			_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$156.77	P.O. Box 60036	
		Los Angeles, CA 90060-0036	
	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.	
	LAI LINDITORL	Check if Austin, TX, officeholder living expense	
		Distict office communication services	
	Complete ONII V if allow	Condidate/Officeholder name Office county	_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
			_
_			

### 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	v to con	npl	lete this form.
1	Total pages Schedule F1:	2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 16/58 Rpt: 25/68		Tinderholt, Tony D. (The Honorable)			00069489
4	Date	5	Payee name			-
	08/02/2023		Direct TV			
6	Amount (\$)	7	Payee address; City; State; Z	ip Cod	de	
	\$93.95		P.O. Box 60036			
			Los Angeles, CA 90060-0036			
8	PURPOSE	(a	Category (See Categories listed at the top of this schedul	(0)	(b)	) Description
	OF	`	Office Overhead/Rental Expense	(e)	,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		·			Check if Austin, TX, officeholder living expense
						District office communications services
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office	ce soug	ght	t Office held
_	- Companient of the second of					
	Date		Payee name			
	09/05/2023		Direct TV			
	Amount (\$)		Payee address; City; State; Z	ip Cod	de	
	\$93.95		P.O. Box 60036			
			Los Angeles, CA 90060-0036			
	PURPOSE	(a	Category (See Categories listed at the top of this schedul	le)	(b)	) Description
	OF EXPENDITURE		Office Overhead/Rental Expense			Check if travel outside of Texas. Complete Schedule T.
						Check if Austin, TX, officeholder living expense district office communications
						district office communications
	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Offic	ce soug	ıht	t Office held
	expenditure to benefit C/O				,	
	Date	Π	Payee name			
	10/03/2023		Direct TV			
	Amount (\$)	┢	Payee address; City; State; Z	in Cor	10	
	\$168.64		P.O. Box 60036	.ip Coc	iC.	
	Ψ100.04		1.6. Box 66666			
			Los Angeles, CA 90060-0036			
		L				
	PURPOSE OF	(a	Category (See Categories listed at the top of this schedul	le)	(b)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Office Overhead/Rental Expense			Check if Austin, TX, officeholder living expense
						District office communications services
	Complete ONLY if direct		Candidate/Officeholder name Offic	ce soug	ght	t Office held
	expenditure to benefit C/O	Н				
_						

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
tising Expense 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/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: 17/58 Rpt: 26/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	11/02/2023	Direct TV
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$93.95	P.O. Box 60036
		Los Angeles, CA 90060-0036
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  District office communiations services
		District office communications services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Date	Payee name
	12/04/2023	Direct TV
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.26	P.O. Box 60036
		Los Angeles, CA 90060-0036
	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  District office communictions service
		District Office confindingtions service
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Davies name
	07/03/2023	Payee name Facebook
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	1312 Menlo Rd.
		Menlo Park, CA 94025
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Boosting political ads
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
I	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
l		

### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By Contributions/ Officials India Committee
Graduates/Officials India Committee

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

	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: 18/58 Rpt: 27/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	07/05/2023	Facebook
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$75.00	1312 Menlo Rd.
		Menlo Park, CA 94025
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Boost political ads
		Boost political aus
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
<b>—</b>	Data	Para a same
	Date	Payee name
	07/10/2023	Facebook
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	1312 Menlo Rd.
		Menlo Park, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense boosting political ads
		boosting political aus
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name Facebook
	07/20/2023	
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.00	1312 Menlo Rd.
		Menlo Park, CA 94025
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense boosting political ads
		boosting political aus
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

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

	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: 19/58 Rpt: 28/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	07/26/2023	Facebook
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$175.00	1312 Menlo Rd.
		Menlo Park, CA 94025
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		boosting political ads
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>1</del>
	Date	Payee name
	07/27/2023	Facebook
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.75	1312 Menlo Rd.
		Menlo Park, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense boosting political ads
		boosting political ads
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	07/28/2023	Facebook
	Amount (\$)	Payee address; City; State; Zip Code
	\$36.48	1312 Menlo Rd.
		Menlo Park, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	LAPENDITORE	Check if Austin, TX, officeholder living expense
		boosting polical ads
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -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: 20/58 Rpt: 29/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	08/02/2023	Facebook
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	1312 Menlo Rd.
		Menlo Park, CA 94025
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		boosting political ads
		Social g political date
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	08/28/2023	Facebook
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$267.87	1312 Menlo Rd.
		Menlo Park, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		boosting political ads
		Social g political date
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	08/28/2023	Facebook
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$43.03	1312 Menlo Rd.
		Menlo Park, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense boosting political ads
		มีของรูปแบบ political aus
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		

### 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

	Credit Card Payment	The Instruction Guide explains how to con	-	te this form.
1	Total pages Schedule F1:	2 FILER NAME	_	3 Filer ID (Ethics Commission Filers)
	Sch: 21/58 Rpt: 30/68	Tinderholt, Tony D. (The Honorable)		00069489
4	Date	5 Payee name		<b>I</b>
	09/20/2023	Facebook		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$400.00	1312 Menlo Rd.		
		Menlo Park, CA 94025		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE			Check if Austin, TX, officeholder living expense
				website email hosting
_				200
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght	Office held
	Date	Payee name		
	09/25/2023	Facebook		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$600.00	1312 Menlo Rd.		
		Menlo Park, CA 94025		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense boosting political ads
				boosting political aus
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI		JIIL	Office field
	Data	D		
	Date 09/11/2023	Payee name Facebook		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$400.00	1312 Menlo Rd.		
		Menlo Park, CA 94025		
	PURPOSE OF	,	(b)	Description
	EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				boosting political ads
				<b>.</b>
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/OI	<u> </u>		

### 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: 22/58 Rpt: 31/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	10/30/2023	Facebook
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$65.88	1312 Menlo Rd.
		Menlo Park, CA 94025
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense boosting political ads
		boosting political aus
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
_	<u> </u>	
	Date	Payee name
	10/30/2023	Facebook
	Amount (\$)	Payee address; City; State; Zip Code
	\$440.28	1312 Menlo Rd.
		Menlo Park, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense boosting political ads
		boosting political aus
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	09/28/2023	Facebook
	Amount (\$)	Payee address; City; State; Zip Code
	\$81.58	1312 Menlo Rd.
		Menlo Park, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		boosting political ads
_	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

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	omple	lete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 23/58 Rpt: 32/68		Tinderholt, Tony D. (The Honorable)		00069489
4		5	Payee name		
	09/28/2023		Facebook		
6	` '	7	Payee address; City; State; Zip Co 1312 Menlo Rd.	ode	
	\$92.22		1312 Menio Ru.		
			Menlo Park, CA 94025		
8	PURPOSE	(a)		(b)	) Description
	OF	(",	Category (See Categories listed at the top of this schedule) Advertising Expense	(5)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		• .		Check if Austin, TX, officeholder living expense
					boosting political ads
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office sou	<u>l</u> uaht	t Office held
	expenditure to benefit C/O			3	
F	Date		Payee name		
	10/19/2023		Facebook		
	Amount (\$)		Payee address; City; State; Zip Co	ode	
	\$900.00		1312 Menlo Rd.		
		L	Menlo Park, CA 94025		
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Advertising Expense		Check if Austin, TX, officeholder living expense
					boosting political ads
		L_		<u> </u>	05.111
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sou	ugnt	t Office held
_	Date		Payee name		
	11/16/2023		Facebook		
	Amount (\$)		Payee address; City; State; Zip Co	ode	
	\$900.00		1312 Menlo Rd.		
			Menlo Park, CA 94025		
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	) Description
	EXPENDITURE		Advertising Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
					boosting political ads
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sou	ught	t Office held
	experientare to beliefft C/Or				

### 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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	OTTLA (etitet a category not listed above)
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 24/58 Rpt: 33/68	Tinderholt, Tony D. (The Honorable)	00069489
4	Date	5 Payee name	
	11/28/2023	Facebook	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$17.43	1312 Menlo Rd.	
L		Menlo Park, CA 94025	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	/ Advertising Expense	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
		boosting pol	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
_	Date	Payee name	
	11/28/2023	Facebook	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$211.24	1312 Menlo Rd.	
		Menlo Park, CA 94025	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
		boosting pol	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OH	PH .	
	Date	Payee name	
	12/28/2023	Facebook	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$612.33	1312 Menlo Rd.	
		Menlo Park, CA 94025	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	/\dvertising Expense	el outside of Texas. Complete Schedule T.
	-	Check if Aust boosting po	in, TX, officeholder living expense
		Soosing pol	
	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 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: 25/58 Rpt: 34/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	08/16/2023	Flying Horse Country Club
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$440.26	1880 Weiskopf Point
		Colorado Springs, CO 80921
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense National Firefighters Memorial honoring Arlington
		firefighters
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/19/2023	Flying Horse Country Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,050.08	1880 Weiskopf Point
		Colorado Springs, CO 80921
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Hotel charges for attending National Firefighters
		Memorial honoring arlington firefighters
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	08/21/2023	Fort Worth Repubican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$31.00	P.O. Box 101613
		Fort Worth, TX 76185
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense    Uncheon meeting
		iuncheon meeting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Leaal Services Salaries/Waacs/Contract Labor

	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: 26/58 Rpt: 35/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	09/15/2023	Fort Worth Repubican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$31.00	P.O. Box 101613
		Fort Worth, TX 76185
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		luncheon meeting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	<del>-</del>
	Date	Payee name
	08/31/2023	Go Daddy.com
H	Amount (\$)	Payee address; City; State; Zip Code
	\$44.34	2155 E. GoDaddy Way
		Tempe, TX 85284
	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
		Domaine name
┢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>y</b>
H	Date	Payee name
	09/21/2023	Go Daddy.com
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$724.95	2155 E. GoDaddy Way
	Ψ124.33	2133 L. Gobaday Way
		Tempe, TX 85284
$\vdash$	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		6 new domain names
L	0 1: 0:::::::::::::::::::::::::::::::::	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_		

### SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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 compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 27/58 Rpt: 36/68	Tinderholt, Tony D. (The Honorable)	00069489
4	Date	5 Payee name	
	08/02/2023	Google	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$12.79	1600 Amphitheatre	
		Mountain View, CA 94043	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			website email hosting
			5
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
F	Date	Payee name	
	08/02/2023	Google	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$14.85	1600 Amphitheatre	
		Mountain View, CA 94043	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense website email hosting
			wester email needing
H	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
F	Date	Payee name	
	09/05/2023	Google	
Г	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.58	1600 Amphitheatre	
		Mountain View, CA 94043	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense website email boosting
			TOSONO OTHER BOOSEING
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
ı			

### 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 Committee

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 comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 28/58 Rpt: 37/68	Tinderholt, Tony D. (The Honorable)	00069489
4	Date	5 Payee name	
	10/02/2023	Google	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$25.58	1600 Amphitheatre	
		Mountain View, CA 94043	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
l			website email hosting
Ļ			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
┕	'		
	Date	Payee name	
L	11/02/2023	Google	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$24.58	1600 Amphitheatre	
l			
l		Mountain View, CA 94043	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
l			website email hosting
l			Woodle Chian Hooling
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
H	Date	Payee name	
l	12/04/2023	Google	
┝	Amount (\$)	Payee address; City; State; Zip Code	
l	\$25.58	1600 Amphitheatre	
	,		
		Mountain View, CA 94043	
	PURPOSE		Description
	OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
l			website email hosting
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experientale to beliefft C/OI	,	

### 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:	
	Sch: 29/58 Rpt: 38/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date 08/10/2023	5 Payee name Grapevine Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
Ü	\$80.00	200 Vine St E
		Grapevine, TX 76051
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		2 tickets for Legislative Lunch with Cornyn
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/18/2023	HEB Chamber of Commerce
	Amount (\$) \$25.00	Payee address; City; State; Zip Code 2109 Martin Dr
	Ψ23.00	2100 Martin Di
		Bedford, TX 76095
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		HEB luncheon
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	08/18/2023	HEB Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$175.00	2109 Martin Dr
		Bedford, TX 76095
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule 1.  Check if Austin, TX, officeholder living expense
		membership dues
	Complete ONLY if direct expenditure to benefit C/OI	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 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/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: 30/58 Rpt: 39/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	09/01/2023	HEB Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	2109 Martin Dr
		Bedford, TX 76095
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Fundraiser
		1 3.13.13.00
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	09/25/2023	HEB Chamber of Commerce
	Amount (\$)	
	\$868.42	Payee address; City; State; Zip Code 2109 Martin Dr
	\$808.42	2109 Marun Di
		Bedford, TX 76095
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		HEB donations
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	09/25/2023	HEB Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code 2109 Martin Dr
	\$25.91	2109 Martin Di
		Bedford, TX 76095
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		The fand door donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought 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: Sch: 31/58 Rpt: 40/68	2 FILER NAME Tinderholt, Tony D. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00069489
4	Date 12/04/2023	5 Payee name HEB
6	Amount (\$) \$59.54	7 Payee address; City; State; Zip Code 2701 East 7th  Austin, TX 78702
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  Office snack supplies
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 11/14/2023	Payee name HEB
	Amount (\$) \$122.11	Payee address; City; State; Zip Code 2701 East 7th
	PURPOSE OF EXPENDITURE	Austin, TX 78702  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense snacks for Capitol office
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 07/17/2023	Payee name Hilton Inn Garden Inn
	Amount (\$) \$429.16	Payee address; City; State; Zip Code 301 W 17th Street
		Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Austin living expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Special session stay
	Complete ONLY if direct expenditure to benefit C/OI	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 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 (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to cor	-	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 32/58 Rpt: 41/68	Tinderholt, Tony D. (The Honorable)		00069489
4	Date	5 Payee name		
	10/02/2023	Hobby Lobby Arlngton		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	de	
	\$30.29	4628 S. Cooper		
		Arlington, TX 76017		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense	` '	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	·		Check if Austin, TX, officeholder living expense
				Frames for memorial flags reimbursed Shannon Kidd
_				
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office souç	ght	Office held
	Date	Payee name		
	12/22/2023	Hobby Lobby Arlngton		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$38.42	4628 S. Cooper		
		Arlington, TX 76017		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense		Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE			Check if Austin, TX, officeholder living expense
				frames for resolutions reimbursed Shannon Kidd
	Complete ONLY if direct	Candidate/Officeholder name Office sour	abt	Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	ynı	Office field
	Date	Payee name		
	09/18/2023	I Нор		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$29.46	1315 Wet N Wild Way		
		Arlington, TX 76011		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense constituant breakfast
				Sonomant broadast
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	9,11	Office field

### SCHEDULE F1

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

	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: 33/58 Rpt: 42/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	11/29/2023	In Bloom Flowers
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$162.89	3708 Arapaho
		Addison, TX 75001
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Funeral flowers for constituent
		Fulleral flowers for consultaerit
Ļ	Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	•	
	Date	Payee name
	09/28/2023	Inspitations Fork & Table
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,265.52	506 E. Division
		Arlington, TX 76011
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Food for Ribbon Cutting for District Office
		1 dod for rubboth dutaing for bloanet differ
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	07/01/2023	Kidd, Shannon
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	1000 Ballpark Way
		Arlington, TX 76011
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		contract labor for campaign services
_	Operation ONE VIII II	On didn't 10 ff a balden name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	p = 1 2 25 3/01	

### 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: 34/58 Rpt: 43/68	Tinderholt, Tony D. (The Honorable) 00069489	
4	Date	5 Payee name	_
	07/14/2023	Lynn Stucky Campaign	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$64.95	P.O. Box 464	
		Denton, TX 76202	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Gift/Awards/Memorials Expense	
		Check if Austin, TX, officeholder living expense  County Affairs Chair gift donation	
		County Analis Chail girt donation	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
•	expenditure to benefit C/OI		
	Date	Payee name	=
	07/24/2023	Mailchimp	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$85.28	675 Ponce De Leon Ave. NE	
	Ψ03.20	073 T ONCE DE LEON AVE. NE	
		Atlanta CA 20209	
	DUDD 005	Atlanta, GA 30308	_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		email server for political emails	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experioration benefit C/O		
	Date	Payee name	
	08/22/2023	Mailchimp	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$85.28	675 Ponce De Leon Ave. NE	
		Atlanta, GA 30308	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense email server for political emails	
		Sinal Server for political circuits	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	
			-

### SCHEDULE F1

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

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

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

Printing Expense 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: 35/58 Rpt: 44/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	09/22/2023	Mailchimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$85.28	675 Ponce De Leon Ave. NE
		Atlanta, GA 30308
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		email server for political emails
Ļ		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
┕	'	
	Date	Payee name
L	10/23/2023	Mailchimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$85.28	675 Ponce De Leon Ave. NE
l		
l		Atlanta, GA 30308
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
l		email server for political ads
l		ornan our for pointed add
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	11/22/2023	Mailchimp
⊢	Amount (\$)	Payee address; City; State; Zip Code
	\$85.28	675 Ponce De Leon Ave. NE
	,,,,,	
l		Atlanta, GA 30308
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		email server for political emails
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiulture to beliefft 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: 36/58 Rpt: 45/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	12/22/2023	Mailchimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$98.07	675 Ponce De Leon Ave. NE
		Atlanta, GA 30308
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		email server for political emails
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	10/11/2023	Marianne Cox Photography
H	Amount (\$)	Payee address; City; State; Zip Code
	\$1,200.00	2650 N State Highway 360
		Grand Prairie, TX 75050
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense photos for mailings and media
		photos for mainings and media
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	10/11/2023	Metroplex Republican Women
H	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	2912 Sweet Briar
	Ψ230.00	2012 OWOCK BING
		Grapevine, TX 76051
Н	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
1		Golf tournament advertising
L	Operated Children	Openhalte Office halden and a second of the
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
$\vdash$		

#### SCHEDULE F1

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

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	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: 37/58 Rpt: 46/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	10/02/2023	Metroplex Women's Clinic
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	5150 S. Collins
		Arlington, TX 76018
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
_	Date	Payros namo
	10/02/2023	Payee name Office Depot
		<u> </u>
	Amount (\$) \$68.96	Payee address; City; State; Zip Code 401 SW Plaza
	φ00.90	
		Ste. 107
		Arlington, TX 76016
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Handouts For Aging Expo reimbursed Shannon Kidd
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	11/02/2023	Passion Life Ministries
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 862223
		Marrrieta, GA 30062
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		donation
_	Complete Chilly's "	Condidate/Officeholder name
	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 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 complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 38/58 Rpt: 47/68	Tinderholt, Tony D. (The Honorable)	00069489
4	Date	5 Payee name	
	09/19/2023	Pour La France	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$63.00	8900 Pena blvd	
		Denver, CO 80249	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense	outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense ional Firefighters Memorial
		Lunch at Nat	ional Filelighters Memorial
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/O		Office Held
_	Date	Davisa nama	
	12/26/2023	Payee name Prince Lebanese Grill	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00	502 W. Randol Mill Rd	
	Ψ2,000.00	302 W. Randon Willi Ru	
		Arlington, TV 76011	
		Arlington, TX 76011	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel	outside of Texas. Complete Schedule T.
	EXPENDITURE	1 000/Develage Expense	n, TX, officeholder living expense
			neals to first responders working
		Rangers victor	ory parade
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
	Date	Payee name	
	10/23/2023	Red Robin Catering	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$409.88	10000 E. Geddes	
		Englewood, CO 80112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense	outside of Texas. Complete Schedule T.
	EXI ENDITORE		n, TX, officeholder living expense
		lood for Pred	inct Chair meeting
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	•	Office field

#### 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

	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: 39/58 Rpt: 48/68	Tinderholt, Tony D. (The Honorable)  00069489
4	Date	5 Payee name
	09/28/2023	Republican Women of Arlington
6	Amount (\$) \$20.00	7 Payee address; City; State; Zip Code P.O. Box 14317  Arlington, TX 76094
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ľ	OF	
	EXPENDITURE	Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  lunch meeting for Shannon
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/22/2023	Republican Women of Arlington
	Amount (\$)	Payee address; City; State; Zip Code
	\$535.38	P.O. Box 14317
		Arlington, TX 76094
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		event sponsor wingle and onigie
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/27/2023	Reublican Party of Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O.Box 2206
		Austin, TX 78768
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		contribution to party
	Complete ONLY if direct expenditure to benefit C/OI	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 -Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials 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: 40/58 Rpt: 49/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	07/20/2023	Saltgrass Steakhouse
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$46.40	2200 East Lamar
		Arlington, TX 76006
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		constituent lunch
		Concata on triansin
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1 -
F	Date	Payee name
	09/29/2023	Sam's
H	Amount (\$)	Payee address; City; State; Zip Code
	\$29.96	8351 Anderson Blvd
		Fort Worth, TX 76120
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		giveaway candy for Aging expo
		gireanay canay iso riging onpo
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	11/03/2023	Schatzline for Texas
H	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	6642 N Riverside Dr.
		Suite 620
		Fort Worth, TX 76137
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		campaign contribution
L	Complete ONU V if allow	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
dash		

#### SCHEDULE F1

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

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ	Tatalana O. I. S.	· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 41/58 Rpt: 50/68	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Underholt, Tony D. (The Honorable) 00069489
L	•	
4	Date	5 Payee name
L	11/16/2023	Seal Lagacy Foundaton
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	2110-B Boca Raton
		Suite B-102
		Austin, TX 78747
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		donation
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experiorale to belieff C/Of	
	Date	Payee name
	07/03/2023	Spark Arlington
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	1000 Ballpark Way
		suite 310
		Arlington, TX 76011
_	PURPOSE	
	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	Check if Austin, TX, officeholder living expense
		District Office parking space
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	п 
	Date	Payee name
	08/01/2023	Spark Arlington
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	1000 Ballpark Way
		suite 310
		Arlington, TX 76011
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		District offce parking spaces
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	п

#### 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: 42/58 Rpt: 51/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	09/01/2023	Spark Arlington
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$150.00	1000 Ballpark Way
l		suite 310
		Arlington, TX 76011
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		parking spaces for District office
		Filling of the control of the contro
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	10/02/2023	Spark Arlington
H	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	1000 Ballpark Way
		suite 310
		Arlington, TX 76011
	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 district office parking spaces
		district Office parking spaces
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/27/2023	Spark Arlington
	Amount (\$)	Payee address; City; State; Zip Code
	\$375.00	1000 Ballpark Way
		suite 310
		Arlington, TX 76011
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense fee for room for Precinct Chair meeting
		lee for foom for Freeing Chair meeting
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>
ı		

### SCHEDULE F1

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

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

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

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

nse Travel in E nse Travel Ou es/Contract Labor OTHER (e

	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: 43/58 Rpt: 52/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	11/03/2023	Spark Arlington
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$150.00	1000 Ballpark Way
		suite 310
		Arlington, TX 76011
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  District office parking spaces
		District office parking spaces
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
_	expenditure to benefit C/Ol	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	12/01/2023	Spark Arlington
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	1000 Ballpark Way
		suite 310
		Arlington, TX 76011
	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  District offfice parkiing spaces
		District offfice parking spaces
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	11/03/2023	St. Joseph's Catholic School
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	2015 SW Green Oaks
		Arlington, TX 76017
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		T unutuiset uoniaion
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>y</b>

### SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gitt/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 complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 44/58 Rpt: 53/68	Tinderholt, Tony D. (The Honorable)	00069489
4	Date	5 Payee name	
	07/31/2023	State Preservation Board	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$65.00	201 E. 14th St	
	1		
	l	Austin, TX 78701	
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.
	LA LIBITOTE	·	n, TX, officeholder living expense to be hung up
	l	paid for 1 V S	to be fiding up
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
٠	expenditure to benefit C/O		Office Held
_	Date	Payee name	
	09/27/2023	Susser Bank	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.00	3030 Matlock Rd	
	\$25.00	SOSO MALIOCK RU	
	!	Adiantes TV 70045	
		Arlington, TX 76015	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	autaida of Tayan Campleta Cabadula T
	EXPENDITURE	1 003	outside of Texas. Complete Schedule T.  n, TX, officeholder living expense
	!	wire transfer	
	l		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	Н	
	Date	Payee name	
	07/21/2023	T Mobile	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$37.89	3900 Arlington Highlands Blvd	
	1	suite 137	
	l	Arlington, TX 76018	
	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
	!	Wifi servicen	for I-pads
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	experientare to benefit 6/61	·	

### 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

Total pages Schedule F1:		olete this form.
	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 45/58 Rpt: 54/68	Tinderholt, Tony D. (The Honorable)	00069489
Date	5 Payee name	
07/21/2023	T Mobile	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$75.78	3900 Arlington Highlands Blvd	
	suite 137	
	Arlington, TX 76018	
B PURPOSE OF	1 ' ' 1	Description
EXPENDITURE	Polling Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		wifi service for I-pads
Complete ONLY if direct	Candidate/Officeholder name Office sough	ot Office held
expenditure to benefit C/OI	Н	
Date	Payee name	
07/21/2023	T Mobile	
Amount (\$)	Payee address; City; State; Zip Code	)
\$723.00	3900 Arlington Highlands Blvd	
	suite 137	
	Arlington, TX 76018	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
EXPENDITURE	Polling Expense	
		floor
Complete ONLY if direct	Candidate/Officeholder name Office sough	ot Office held
expenditure to benefit C/OI	Н	
Date	Payee name	
07/20/2023	T Mobile	
Amount (\$)	Payee address; City; State; Zip Code	9
\$423.74	3900 Arlington Highlands Blvd	
	suite 137	
	Arlington, TX 76018	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
OF EXPENDITURE	Polling Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense I-pads and service Check written to Tony Tinderholt
		to reimburse
Complete ONLY if direct	Candidate/Officeholder name Office sough	ot Office held
Complete ONLY if direct expenditure to benefit C/OI	•	office held
	•	ot Office held
Amount (\$)  \$723.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/Ol  Date 07/20/2023  Amount (\$)	Payee address; City; State; Zip Code 3900 Arlington Highlands Blvd suite 137 Arlington, TX 76018  (a) Category (See Categories listed at the top of this schedule) Polling Expense  Candidate/Officeholder name Office sough Payee name T Mobile Payee address; City; State; Zip Code	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense I- padsnfor polling  Office held

### 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 Salaries (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: 46/58 Rpt: 55/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	10/10/2023	T Mobile
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$322.64	3900 Arlington Highlands Blvd
		suite 137
		Arlington, TX 76018
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Polling Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		wifi and equipment
_	2 2	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/08/2023	T Mobile
	Amount (\$)	Payee address; City; State; Zip Code
	\$322.64	3900 Arlington Highlands Blvd
		suite 137
		Arlington, TX 76018
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense
		☐ Check if Austin, TX, officeholder living expense  wifi and equipment
		wiii and equipment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· ·
_	Date	Davies warms
	12/08/2023	Payee name T Mobile
	Amount (\$)	Payee address; City; State; Zip Code
	\$470.14	3900 Arlington Highlands Blvd
		suite 137
		Arlington, TX 76018
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  wifi and equipment
		Tim and equipment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

	Contributing/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 47/58 Rpt: 56/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	08/21/2023	TARRANT COUNTY GOP
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,000.00	7524 Mosier View Ct. #230
		FORT WORTH, TX 76118
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	ZA ZIIDII GRZ	Candidate/Officeholder/Political Committee
		Fundraiser
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/14/2023	TARRANT COUNTY GOP
	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	7524 Mosier View Ct. #230
	Ψ130.00	7324 MOSIEL VIEW Ct. #230
		FORT WORTH, TX 76118
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		filing fee for primary election
	Operation ONLY if all part	On did to 10 ff as hald a grant Off as south
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/06/2023	TDCJ
	Amount (\$)	Payee address; City; State; Zip Code
	\$220.83	P.O. Box 4013
		Huntsville, TX 77342-4013
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXPENDITURE	Candidate/Officeholder/Political Committee
		bought items to donate
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
l		

#### SCHEDULE F1

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

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

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

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

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		
1	Total pages Schedule F1:	
L	Sch: 48/58 Rpt: 57/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	09/06/2023	TDCJ
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$512.68	P.O. Box 4013
		Huntsville, TX 77342-4013
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		bought items for fundraiser events to auction
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
T	Date	Payee name
	09/25/2023	Tarrant Special Events Foundaton
$\vdash$	Amount (\$)	Payee address; City; State; Zip Code
	\$155.15	645 Grapevine highway
	Ψ100.10	suite 200
		Hurst, TX 76054
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Taxon Complete Schedule T
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		fee for booth at Empowering Seniors Expo
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	12/11/2023	Tarrant Star Republican Women
$\vdash$	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	2060 Normandy
	φ1,000.00	2000 Normandy
		Hurst, TX 76054
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	<b></b>	Candidate/Officeholder/Political Committee
		sponsor for Christinas party
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### 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

	Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Legal Services Frinting Expense Salaries/Wages/Contract Labor		OTHER (enter a category not listed above)							
				The Instruction G	uide explains h	ow to cor	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commissi	on Filers)
	Sch: 49/58 Rpt: 58/68		Tinderholt, T	ony D. (The Ho	onorable)					00069489		
4	Date	5	Payee name									
	12/18/2023		Texas Live									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$36.73		1650 E. Ran	ndol Mill Rd								
			Arlington, TX	x 76011								
8	PURPOSE	┝					(h)	Description				
ľ	OF			e Categories listed at t age Expense	he top of this sche	dule)	(5)	`	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		1 Ood/Dever	age Expense				브		officeholder livin		
								lunch with TC	GC	OP Chair		
9	Complete ONLY if direct		andidate/Offic	ceholder name	Of	ffice sou	ght			Office h	eld	
	expenditure to benefit C/OI	4										
	Date		Payee name									
	10/13/2023		Texas Live L	₋ockhart								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$84.98		1650 E. Ran	ndol Mill Rd								
			Arlington, TX	X 76011								
	PURPOSE	┝		e Categories listed at t	ho top of this coho	dulo)	(b)	Description				
	OF	ı		age Expense	ne top of this series	duic)	` ,	`	outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE							Check if Austin,	, TX,	officeholder livin	g expense	
								constituent lu	nch	า		
Complete <u>ONLY</u> if direct Ca expenditure to benefit C/OH			andidate/Offic	ceholder name	Of	ffice sou	ght			Office h	eld	
	experialitate to beliefit e/of											
	Date	ı	Payee name									
	12/01/2023		Texas Score	ecard								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$200.00		P.O. Box 24	8								
			Leander, TX	78646								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Food/Bevera	age Expense				ш			nplete Schedule T.	
								Check if Austin, 2023 Conserv		officeholder livin		
								ZUZS CUIISEI	vali	ive Leauei /	Awarus	
_	Complete ONLY if direct		`andidate/Offic	ceholder name	Of	ffice soug	aht			Office h	eld	
	expenditure to benefit C/OI		andidate/Offic	cholder Haille	Oi	mee soul	giil			Onice II	uiu.	
l												

#### 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

	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: 50/58 Rpt: 59/68	Tinderholt, Tony D. (The Honorable)  00069489
4	Date	5 Payee name
	12/04/2023	Texas Silvered-Hair Legislative Foundation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$550.00	3006 Bee Caves
		Ste. C-215
		Austin, TX 78746
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		contribution
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/02/2023	Texas Star Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	2242 E. Loop 820
		Fort Worth, TX 76112
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Lunch meeting
		Editor meeting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/18/2023	The Keg Lounge
	Amount (\$)	Payee address; City; State; Zip Code
	\$52.99	730 Manitou Ave
		Manitou Springs, CO 80829
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Dinner at National Firefighters memorial
		Diffici at National Filenghters memorial
_	Complete ONLY if direct	Candidate/Officeholder name Office sought
	Complete ONLY if direct expenditure to benefit C/OI	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 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: 51/58 Rpt: 60/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	11/09/2023	Tiff's Treats
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$70.51	1705 N. Collins
		#121
		Arlington, TX 76011
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense sent to Spark staff in appreciation
		Sent to Spark Stair in appreciation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
·	expenditure to benefit C/O	
	Date	Payee name
	07/17/2023	Trudy's Hallmark
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.29	255 SW Plaza Ste 104
		Arlington, TX 76016
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		cards for constituents
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	08/14/2023	Turo, Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$476.83	116 New Montgomery St.
		Suite 700
		San Francisco, CA 94105
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EM LINDITURE	Check if Austin, TX, officeholder living expense
		car rental for National Firefighters Memorial honoring Arlington firefighters
_	Complete ONLY if direct	Candidate/Officeholder name Office sought 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: 52/58 Rpt: 61/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
Ļ	08/30/2023	U Haul Moving & Storage
6	Amount (\$) \$259.79	7 Payee address; City; State; Zip Code 3414 S. Collins
		Arlington, TX 76014
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Dayton moved campaign signs
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
L	09/05/2023	US Storage centers
	Amount (\$) \$880.00	Payee address; City; State; Zip Code 2130 WPleasant Ridge Rd
		Arlington , TX 76015
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  storage fee for 11 months for campaign signs and materials
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Г	Date	Payee name
	10/03/2023	US Storage centers
	Amount (\$) \$174.92	Payee address; City; State; Zip Code 2130 WPleasant Ridge Rd
		Arlington , TX 76015
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense monthy fee for campaign signs and materials
	Complete ONLY if direct expenditure to benefit C/OI	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 -

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	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: 53/58 Rpt: 62/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	09/05/2023	US Storage centers
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$174.92	2130 WPleasant Ridge Rd
		Arlington , TX 76015
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense monthly storage for compaign signs and materials
		monthly storage for compaight signs and materials
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
$\vdash$	Date	Davies same
		Payee name
	11/02/2023	US Storage centers
	Amount (\$)	Payee address; City; State; Zip Code
	\$174.92	2130 WPleasant Ridge Rd
		Arlington , TX 76015
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense storage of signs and campaign materials
		Storage of signs and campaign materials
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	<b>D</b> :	
	Date	Payee name
	11/27/2023	US Storage centers
	Amount (\$)	Payee address; City; State; Zip Code
	\$264.00	2130 WPleasant Ridge Rd
		Arlington , TX 76015
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign storage reimbursed tony for charges
		campaight storage reimbursed tony for charges
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_		

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense 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/Political Commit Credit Card Payment			Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.			Travel Out of District OTHER (enter a category not listed above)				
				ie explains now	v to comp	nete tills lutill.	I	(=u) = u = u = u		
1	Total pages Schedule F1:	l					3 Filer ID	(Ethics Commission Filers)		
	Sch: 54/58 Rpt: 63/68	Tinde	rholt, Tony D. (The Hor	orable)			00069489			
4	Date	<b>5</b> Payee	name							
	12/04/2023	US St	orage centers							
6	Amount (\$)	<b>7</b> Payee	address; City;	State; Z	ip Code	)				
	\$174.92	2130	WPleasant Ridge Rd							
			<b>J</b>							
		Arling	ton , TX 76015							
<u>_</u>	DUDDOCE	_			1,,	<b></b>				
8	PURPOSE OF	1	Ory (See Categories listed at the	top of this schedule	e) (n	Description	outside of Toyas, Com	nloto Cohodulo T		
	EXPENDITURE	Adver	tising Expense				outside of Texas. Com , TX, officeholder living			
						<b>—</b>	ampaign signs a			
						<b>3</b>	, 5 - 5			
9	Complete ONLY if direct	Candida Candida	ate/Officeholder name	Offic	e sough	t	Office he	eld .		
	expenditure to benefit C/OI		as, omornoidor namo	Onic	.s sough		Omoc no	···		
$\vdash$	Data									
	Date 07/17/2022	Payee								
	07/17/2023	USPS								
	Amount (\$)	1	address; City;	State; Z	ip Code	•				
	\$52.80	4108	4108 SW Green Oaks							
		Arling	ton, TX 76017							
	PURPOSE	(a) Catego	Ory (See Categories listed at the	top of this schedule	e) (b	) Description				
	OF EXPENDITURE		tising Expense			Check if travel	outside of Texas. Com			
	LAFLINDITORE					ш	, TX, officeholder living	expense		
						stamps for th	ank you notes			
	Complete ONLY if direct expenditure to benefit C/OI		te/Officeholder name	Offic	e sough	t	Office he	eld		
	Date	Payee	name							
	08/14/2023	United	d Airlines							
	Amount (\$)	Payee	address; City;	State; Z	ip Code	)				
	\$879.60	233 S	. S. Wacher Dr.							
		Chica	go, IL 60606							
	PURPOSE			ton of this!!!	a) [/h	) Description				
	OF	1	Ory (See Categories listed at the Expense	top of this schedule	e)   (N		outside of Texas. Com	plete Schedule T.		
	EXPENDITURE	Lveni	Елропос				ı, TX, officeholder living			
								or National Firefighters		
						Memorial hor	noring Arlington	Firefighters		
	Complete ONLY if direct		ate/Officeholder name	Offic	e sough	t	Office he	eld		
	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 Cc

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: 55/58 Rpt: 64/68	Tinderholt, Tony D. (The Honorable) 00069489
4	Date	5 Payee name
	09/18/2023	United Airlines
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$140.00	233 S. S. Wacher Dr.
		Chicago, IL 60606
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		flight baggage charges for trip to National Firefighters
		Memorial honoring Arlington
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/25/2023	Wal Mart
	Amount (\$)	Payee address; City; State; Zip Code
	\$82.01	710 E. Ben White
	402.01	120 E. 3511 White
		Austin, TX 78704
	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  austin office supplies
		dustin office supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Date	Payee name
	09/27/2023	Walgreens
	Amount (\$)	Payee address; City; State; Zip Code
	\$57.90	4208 SW Green Oaks
	Ψ37.90	4200 SW GIEEN Oaks
		Arlington, TX 76017
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Give away gift cards for Aging Expo
	Computate ONLY if direct	Constitute (Office helds a name Office appoint
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	·	

### 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	omplete th	nis form.					
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID	(Ethics Commission Filers)				
Sch: 56/58 Rpt: 65/68	Tinderholt, Tony D. (The Honorable)			00069489				
4 Date	5 Payee name							
10/17/2023	Walgreens							
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode						
\$57.90	4208 SW Green Oaks							
	Arlington, TX 76017							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Des	scription					
OF EXPENDITURE	Event Expense		Check if travel outs					
EXI ENDITORE			Check if Austin, TX					
		give	eaway gift ca	irus ioi Agin	y Expo			
9 Complete ONLY if direct	Condidate/Officeholder name Office seu	ıaht		Office h	ald			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sou	agrit		Office n	ciu			
Date	Payee name							
10/23/2023	Walmart							
Amount (\$)	Payee address; City; State; Zip Co	ode						
\$20.58	5401 Park Springs Blvd							
	Arlington, TX 76017							
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)		scription					
EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense paper goods and water for Precinct chair meeting					
			,					
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>I</u> ught		Office h	eld			
expenditure to benefit C/OF	+	-						
Date	Payee name							
09/28/2023	Walmart							
Amount (\$)	Payee address; City; State; Zip Co	nde						
\$37.79	5401 Park Springs Blvd							
,								
	Arlington, TX 76017							
PURPOSE	-	(h) Das						
OF	(a) Category (See Categories listed at the top of this schedule)  Event Expense	I	scription Check if travel outs	ide of Texas. Com	nplete Schedule T.			
EXPENDITURE	Event Expense	▎▕▋	Check if Austin, TX	, officeholder living	g expense			
		sup	oplies for boo	th set-up for	Aging EXpo			
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught		Office h	eld			
expenditure to benefit C/OI	٦							
_								

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		·)
_	T		F1
1	Total pages Schedule F1: Sch: 57/58 Rpt: 66/68	2 FILER NAME Tinderholt, Tony D. (The Honorable)  3 Filer ID (Ethics Commission 00069489	Filers)
4	Date	5 Payee name	
	12/04/2023	Walmart	
6	Amount (\$) \$29.54	7 Payee address; City; State; Zip Code 5401 Park Springs Blvd	
		Arlington, TX 76017	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		Check if Austin, TX, officeholder living expense district office Christmas tree	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	onponditare to benefit eye.		
	Date	Payee name	
	09/21/2023	White Rhino Coffee	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$18.53	401 E. Border St	
		Arlington, TX 76010	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Coffee with consituent	
		Conce was concident	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	12/31/2023	WinRed.com	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$161.66	1776 Wilson Blvd	
		Arlington, WV 22209	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		processing fee for on-line contributions	
_	Complete ONLY if direct	Condidate/Officeholder name Office courses	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

### SCHEDULE F1

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

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expen Legal Services The Instruction Guide e	Salaries	Expense /Wages/Contract Labor		n District out of District (enter a category not listed above)	
1	Total pages Schedule F1:					3 Filer II		5)
L	Sch: 58/58 Rpt: 67/68		lt, Tony D. (The Honora	able)		00069	9489	
4	Date	5 Payee nar						
L	12/11/2023		ktension Gift Shop					
6	Amount (\$)	7 Payee add		State; Zip C	ode			
	\$302.23	1400 Cor	ngress Ave E1-006					
		Austin, T	X 78701					
8	PURPOSE OF	(a) Category	(See Categories listed at the top	of this schedule)	(b) Description			
	EXPENDITURE	Gift/Awar	ds/Memorials Expense	<b>!</b>	, <u> </u>		as. Complete Schedule T. der living expense	
					, <u> </u>		Tony Tinderholt	
							•	
9	Complete ONLY if direct expenditure to benefit C/Ol		Officeholder name	Office so	ught	Of	fice held	

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

#### SCHEDULE K

╙									
	I The Instruction Guide explains how to complete this form						ages Schedule K: /1 Rpt: 68/68		
2	2 FILER NAME 3 Filer						r ID	(Ethics Commission Fi	lers)
	Tinderholt, Tony D. (The Honorable)						69	489	
4	Date 5 Name of person from whom amount is received							8 Amount (\$)	
	07/10/2023		Amazon					,	\$49.68
		6	Address of person from whom amount is received; City; State; Zip Code	······)					
			Seattle, TX 98109						
		7	Purpose for which amount is received	Check if p	oliti	cal c	ontr	ibution returned to filer	
			refund on an item						
F	Date	Ħ	Name of person from whom amount is received					Amount (\$)	
	07/03/2023		Cort Furniture						\$73.38
		ļ	Address of person from whom amount is received; City; State; Zip Code						
			Address of person from whom amount is received, Gity, State, 21p code	•					
			West Chester , OH 45246						
		H	Purpose for which amount is received	Check if p	oliti	cal co	ontr	ibution returned to filer	
			Refund from rental return						
H	Date	<u> </u>	Name of person from whom amount is received					Amount (\$)	
	11/14/2023		HEB					Amount (\$)	\$7.24
	11/14/2020	ļ							Ψ1.24
			Address of person from whom amount is received; City; State; Zip Code	;					
			Austin, TX 78704						
		H	Purpose for which amount is received	Check if p	oliti	cal co	ontr	ibution returned to filer	
			refund						
H	Date	H	Name of person from whom amount is received					Amount (\$)	
	11/30/2023		In Bloom					` '	162.89
	11/30/2023	ļ						Ψ.	102.03
			Address of person from whom amount is received; City; State; Zip Code	;					
			Carrollton, TX 75006						
		┢	Purpose for which amount is received	Check if n	oliti	cal co	ontr	ibution returned to filer	
			refund	_ chook ii p	Onti	OC. 0	J1161	ibation retarned to mer	
H	Data	╁	Name of parson from whom amount is received				_	Amount (\$)	
	Date 12/31/2023		Name of person from whom amount is received Susser Bank					Amount (\$)	731.76
							Ψ	731.70	
	Address of person from whom amount is received; City; State; Zip Code								
			Arlington, TX 76015						
							antr	ibution returned to filer	
checking account interest							JIILI	ibation retained to life	
Chooking account interest									
I									