# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to comple	te this form.	1 Filer ID (Ethics Commis 00081727	sion Filers)	2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	SE ONLY
OFFICEHOLDER NAME	The Honorable	David M.			Date Received	
					ELECTRONICA	LLY FILED
	NICI/NIAME			CUEELV	01/16/2024	
	NICKNAME	LAST Middleton		SUFFIX II	01/10/2024	
	Mayes	Miduleton		II		
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered or I	Date Postmarked
OFFICEHOLDER MAILING	P.O. Box 1526					_
ADDRESS					Receipt #	Amount
Change of Address	Galveston, TX 77553				2 . 2	
					Date Processed	
					Date Imaged	
					Date illiaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	<u> </u>	
TREASURER		J.P.		IVII		
NAME	IVII.	J.F.				
	NIOIGIANE					
		LAST		SUFFIX		
		Bryan				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO I	BOX PLEASE);	APT	/ SUITE #; CITY;	STA	TE; ZIP CODE
ADDRESS	1315 21st St.					
(Residence or Business)						
	Galveston, TX 77550					
7 CAMPAIGN	AREA CODE PHONE	E NUMBER E	VTENCION			
7 CAMPAIGN TREASURER		E NUMBER E	EXTENSION			
PHONE	(713) 753-1544					
8 REPORT						
TYPE	X January 15	30th day before	election	Runoff	15th day after cam	naign treasurer
		] courtacy before			appointment (office	
	July 15	8th day before 6		Exceeded modified	Final Report (Attac	h C/OH-FR)
				reporting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2023	TH	IROUGH	12/31/202	3	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	Pr	rimary	Runoff	Other	
		П	eneral	Special		
				ш.		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
III OFFICE	State Senator District 11			State Senator Di		
	State Conator Biotriot 11			State Condition Bi	01101 11	
		GO T	O PAGE 2			
I						

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 69

13 C / OH NAME	Middleton II, David M	(The Honorable)		14 Filer ID 00081727	(Ethics Cor	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accep These expenditures may h officeholders are required	nave been made without t	the candidate's or offi	iceholder's ki	nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
ш°	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN	N TREASURER NAME			
		COMMITTEE CAMPAIGN	N TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRI ES OF LOANS, OR CONT			\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR G	UARANTEES OF LOANS	5)	\$	21,571.99
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPEND	DITURES		\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURES			\$	195,271.48
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MA RIOD	INTAINED AS OF THE LA	AST DAY OF THE	\$	231,513.28
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OU <sup>*</sup> TING PERIOD	TSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		true ar	ır, or affirm, under penalty nd correct and includes al Title 15, Election Code.			
			The Honoral	ble David M. Middl	eton II	
			Signature of	Candidate or Officeh	older	
AFFIX NO	TARY STAMP / SEAL ABO	OVE				
Sworn to and subs	cribed before me, by the s	aid		, this the		day
	, 20, to ca					
Signature of offi	cer administering	Printed name of offic	eer administering	Title of office	cer administe	ring oath

## **SUBTOTALS - C/OH**

## FORM C/OH COVER SHEET PG 3

	CO/	VER SHEET PG 3 3 of 69
18 FILER NAME Middleton II, David M. (The Honorable)	Filer ID (E 00081727	Ethics Commission Filers)
20 SCHEDULE SUBTOTALS  NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	21,571.99
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	3
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	\$
4. SCHEDULE E: LOANS	\$	\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	175,791.76
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	S \$	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	\$
9. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	19,479.72
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	C/OH \$	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S \$	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETO FILER	TURNED \$	5

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 1/5 Rpt: 4/69		
2	FILER NAME Middleton II,	David M. (The Honorable)				3	Filer ID (Ethics Commission 00081727	on Filers)
4	Date 07/21/2023  5 Full name of contributor out-of-state PAC (ID#:)  Bachmann, Wally  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00			
_		Bacliff, TX 77518		_		_		
8	Attorney	pation / Job title (See Instructions	;)	9	Employer (See Instructions Self	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  08/05/2023 Buffington, D Andrew  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$1.99			
	Haslet, TX 76052  Principal occupation / Job title (See Instructions)  Employer (See Instructions)			 s)				
	retired retired							
	Date Full name of contributor out-of-state PAC (ID#:		)	•	Amount of Contribution (\$)	\$1,000.00		
		Crystal Beach, TX 77650						
		Employer (See Instructions Hospice Care Team	5)					
Date Full name of contributor out-of-state PAC (ID#:)  12/13/2023 Chicksaw Nation  Contributor address; City; State; Zip Code  Ada, TX 74820			•	Amount of Contribution (\$)	\$2,500.00			
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	5)		
	Date Full name of contributor			Amount of Contribution (\$)	\$1,000.00			
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	5)		

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDUI	LE <b>A1</b>
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 2/5 Rpt: 5/69			
2	FILER NAME Middleton II,	David M. (The Honorable)				3	Filer ID (Ethics Commission 00081727	on Filers)
4	Date 10/31/2023	<ul><li>5 Full name of contributor</li><li>Ebert, Michael</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:		)	7	Amount of Contribution (\$)	\$50.00
•	Dringing Lagge	League City, TX 77573	, I	_	Employer (Con Instructions	<u></u>		
8		pation / Job title (See Instructions Management	)	9	Employer (See Instructions SSKR Enterprises	5)		
	Date 12/31/2023	Full name of contributor Fieldstead and Company Contributor address; City; St			)		Amount of Contribution (\$)	\$1,000.00
	Irvine, CA 92623  Principal occupation / Job title (See Instructions)  Employer (See Instructions)			<u>:)</u>				
	i illicipai occu	pation / Job title (See Instructions	,		Employer (See mandenoria	"		
	Date 08/02/2023	Full name of contributor out-of-state PAC (ID#:) Hallam, Walter  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00	
	Dickinson, TX 77539							
	Principal occu retired	pation / Job title (See Instructions	)		Employer (See Instructions retired	5)		
	Date 11/23/2023				Amount of Contribution (\$)	\$2,500.00		
	Principal occu retired	pation / Job title (See Instructions	)		Employer (See Instructions retired	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 07/03/2023 Havel, David  Contributor address; City; State; Zip Code  Galveston, TX 77554		•	Amount of Contribution (\$)	\$1,000.00			
	Principal occu Retired	pation / Job title (See Instructions	)		Employer (See Instructions Retired	s)		

MONETARY POLITICAL CONTRIBUTIONS						SCHEDUL	E A1	
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 3/5 Rpt: 6/69		
2	FILER NAME Middleton II,	David M. (The Honorable)				3	Filer ID (Ethics Commission 00081727	on Filers)
4	Date 10/30/2023    5   Full name of contributor		7	Amount of Contribution (\$)	\$5,000.00			
_		Kemah , TX 77565	,			<u> </u>		
8	Retired	pation / Job title (See Instructions	(5)	9	Employer (See Instructions Retired	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 07/14/2023 McAtee, Norman  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00			
	Principal occu	League City, TX 77573 pation / Job title (See Instructions	9)		Employer (See Instructions	:) 		
	retired retired		•)					
	Date Full name of contributor out-of-state PAC (ID#:) 07/17/2023 McCarley, Gordon  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$5.00		
		Baytown, TX 77523						
	Principal occu staffing	pation / Job title (See Instructions	(3)		Employer (See Instructions bruce	s)		
	Date Full name of contributor			Amount of Contribution (\$)	\$1,000.00			
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  10/10/2023 Pollock, Donald  Contributor address; City; State; Zip Code  Texas City , TX 77590			Amount of Contribution (\$)	\$100.00			
	Principal occu Retired	pation / Job title (See Instructions	5)		Employer (See Instructions Retired	5)		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.					1	Total pages Schedule A1: Sch: 4/5 Rpt: 7/69	
2	FILER NAME Middleton II,	David M. (The Honorable)				3	Filer ID (Ethics Commission 00081727	n Filers)
4	Date  5 Full name of contributor out-of-state PAC (ID#:)  7 Pyle, Edward  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00			
0	Dringing coou	La Marque, TX 77568		_	Employer (See Instructions	<u></u>		
8	retired	pation / Job title (See Instructions	)	9	Employer (See Instructions retired	»)		
	Date Full name of contributor out-of-state PAC (ID#:)  08/03/2023 Schnautz, Danny  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00			
	Dringing age	Pasadena, TX 77508			Employer (See Instructions	<u></u>		
	Principal occupation / Job title (See Instructions)  Mgr  Employer (See Instructions  Clark		5)					
	Date 10/08/2023			)		Amount of Contribution (\$)	\$100.00	
		Houston, TX 77019						
Principal occupation / Job title (See Instructions)  Real Estate  Employer (See Instructions)  self employed		Employer (See Instructions self employed	s)					
	Date Full name of contributor out-of-state PAC (ID#:)  11/23/2023 Sherlock, Colleen  Contributor address; City; State; Zip Code  Houston, TX 77098				Amount of Contribution (\$)	\$100.00		
	Principal occu Real Estate	pation / Job title (See Instructions	;)		Employer (See Instructions self employed	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  12/27/2023 Sherlock, Colleen  Contributor address; City; State; Zip Code  Houston, TX 77098			Amount of Contribution (\$)	\$50.00			
	Principal occu Real Estate	pation / Job title (See Instructions	(i)		Employer (See Instructions self employed	5)		

	MONETARY POLITICAL CONTRIBUTIONS						LE A1	
	The Instruction Guide explains how to complete this form.					1	Total pages Schedule A1: Sch: 5/5 Rpt: 8/69	
2	FILER NAME					3	Filer ID (Ethics Commission	on Filers)
	Middleton II,	David M. (The Honorable)					00081727	
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 7  12/27/2023 Sherlock, Colleen  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$50.00			
		Houston, TX 77098	iale, zip Code					
8	Principal occu	pation / Job title (See Instructions	5)	9	Employer (See Instructions	5)		
	Real Estate				self employed			
_	Date	Full name of contributor	out-of-state PAC (ID#:		)	Г	Amount of Contribution (\$)	
	10/16/2023	Sparks, Marian	_					\$15.00
		Contributor address; City; S	tate; Zip Code			l		
		Baytown, TX 77520						
	Principal occupation / Job title (See Instructions)  Employer (See Instruction			<b>s</b> )				
	Nail Tech				Self			
	Date	Full name of contributor	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	
	11/01/2023	Texas Cornerstone Credi	t Union League PAC					\$1,000.00
		Contributor address; City; S	tate; Zip Code					
		D-II TV 75005						
	Drive in all accord	Dallas, TX 75265			Francis von (Coo Instructions	<u></u>		
	Principal occu	pation / Job title (See Instructions	o) 		Employer (See Instructions	)		
	Data	Full name of contributor	D sub of state DAC (ID)//			_	Amount of Contribution (\$)	
	Date 11/15/2023	Full name of contributor  Texas Medical Assocation	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$2,500.00
	11/13/2023	Contributor address; City; S						Ψ2,500.00
		Continuator address, City, 5	iale, Zip Code					
		Austin, TX 78701						
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:		)	Г	Amount of Contribution (\$)	
	07/04/2023	Texas Optometric PAC	<b>–</b>		,		,,	\$2,000.00
		Contributor address; City; S	tate; Zip Code	••••		l		
			. ,					
		Austin, TX 78705						
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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/Politic 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: 1/54 Rpt: 9/69	Middleton II, David M. (The Honorable) 00081727
4 Date	5 Payee name
11/14/2023	Anypromo.com
6 Amount (\$) \$588.49	7 Payee address; City; State; Zip Code 1511 E Holt Blvd
	Ontario, CA 91761
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  Campaign Promotional Products
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/13/2023	Bay Area Republican Women
Amount (\$) \$150.00	Payee address; City; State; Zip Code PO Box 58103
	Webster, TX 77598
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  Campaign Event Sponsorship
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/10/2023	Bennett, Kaleb
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code 1389 Quail Run Dr
	Troy, TX 76579
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 Services
Complete ONLY if direct expenditure to benefit C/C	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 Comm

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	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/54 Rpt: 10/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	08/03/2023	Bennett, Kaleb
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,500.00	1389 Quail Run Dr
		Troy, TX 76579
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Contract Labor for Campaign Services
		Contract East for Campaign Contract
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
┕	·	
	Date	Payee name
	09/08/2023	Bennett, Kaleb
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,500.00	1389 Quail Run Dr
		Troy, TX 76579
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
		Community and the second sec
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· ·
⊨	Date	Davisa nama
	10/04/2023	Payee name  Payeet Kalah
_		Bennett, Kaleb
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,500.00	1389 Quail Run Dr
		Troy, TX 76579
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
$\vdash$	Computate ONU V Station	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
ldash	,	

### SCHEDULE F1

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

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

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

1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Sch: 3/54 Rpt: 11/69 Middleton II, David M. (The Honorable) 00081727	not listed above)
	Commission Filore)
	Commission Filers)
4 Date 5 Payee name	
11/03/2023 Bennett, Kaleb	
6 Amount (\$) 7 Payee address; City; State; Zip Code \$3,500.00 1389 Quail Run Dr	
Troy, TX 76579	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Sche	edule T.
EXPENDITURE Salaries/ Wages/ Contract Labor Check if Austin, TX, officeholder living expense	
Contract Labor for Campaign Servi	ces
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
Date Payee name	
12/05/2023 Bennett, Kaleb	
Amount (\$) Payee address; City; State; Zip Code	
\$3,500.00 1389 Quail Run Dr	
Troy, TX 76579	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Salarias/Wages/Contract Labor Check if travel outside of Texas. Complete Sche	edule T.
EXPENDITURE Check if Austin, TX, officeholder living expense	
Contract Labor for Campaign Servi	ces
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
Date Payee name	
12/29/2023 Berry Communications	
,	
\$93,600.00 1014 W Milton St	
Austin, TX 78701	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	edule T.
OF Consulting Expanse Check if travel outside of Texas. Complete Sche	
OF Consulting Expense Check if travel outside of Texas. Complete Sche	sulting
OF EXPENDITURE  Consulting Expense  Check if travel outside of Texas. Complete Sche	sulting
OF EXPENDITURE  Consulting Expense  Check if travel outside of Texas. Complete Sche Check if Austin, TX, officeholder living expense Campaign Stategy and Advice Con	nsulting
OF EXPENDITURE  Consulting Expense  Check if travel outside of Texas. Complete Sche	nsulting
Consulting Expense  Consulting Expense  Check if travel outside of Texas. Complete Sche Check if Austin, TX, officeholder living expense Campaign Stategy and Advice Con  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	nsulting
Consulting Expense  Consulting Expense  Check if travel outside of Texas. Complete Sche Check if Austin, TX, officeholder living expense Campaign Stategy and Advice Con  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	nsulting

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Politi 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: 4/54 Rpt: 12/69	Middleton II, David M. (The Honorable)  00081727
4	Date	5 Payee name
	12/29/2023	Campaign Advocacy Management Professionals, LLC
6	Amount (\$) \$4,232.90	7 Payee address; City; State; Zip Code 401 NE 46th  Oklahoma City, OK 73105
8	PURPOSE	1
ľ	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  District Mailer
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/23/2023	Capitol Gift Shop
	Amount (\$)	Payee address; City; State; Zip Code
	\$86.60	1400 Congress Ave
		E1.006
		Austin, TX 78701
	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
		Campaigh Donation tens
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/26/2023	Capitol Gift Shop
	Amount (\$)	Payee address; City; State; Zip Code
	\$259.80	1400 Congress Ave
		E1.006
		Austin, TX 78701
	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
		Campaign Donation Items
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services	Salaries/	Wage	s/Contract Labor		OTHER (enter a	strict category not listed abo	ve)
	oroak oara'r aymone		The Instruction G	Guide explains how to c	ompl	ete this form.				
1	Total pages Schedule F1:	2 FILER	NAME				3	Filer ID	(Ethics Commission	on Filers)
	Sch: 5/54 Rpt: 13/69	Middl	eton II, David M. (The	e Honorable)				00081727		
4	Date	<b>5</b> Payee	name							
	10/24/2023	Capit	ol Gift Shop							
6	Amount (\$)	<b>7</b> Payee	address; City;	State; Zip C	ode					
	\$173.20	1400	Congress Ave							
		E1.00	)6							
		Austir	n, TX 78701							
8	PURPOSE	(a) Cated	Ory (See Categories listed at	the top of this schedule)	(b)	Description				
	OF		ibutions/Donations M		` `	:	outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE		idate/Officeholder/Po			Check if Austin	, TX,	officeholder living	g expense	
						Campaign Do	ona	tion Items		
9	Complete ONLY if direct expenditure to benefit C/OI		ate/Officeholder name	Office so	ught			Office h	eld	
	experialitate to beliefit eroi									
	Date	Payee	e name							
	07/10/2023	Carus	so, Ryan							
	Amount (\$)	Payee	address; City;	State; Zip C	ode					
	\$500.00	1460	6 Sweetwater Dr							
		Bayto	own, TX 77523							
	PURPOSE	(a) Categ	Ory (See Categories listed at	the top of this schedule)	(b)	Description				
	OF EXPENDITURE	l	ies/Wages/Contract L						plete Schedule T.	
	EXI ENDITORE					ш		officeholder living		
						Contract Lab	OI I	or Campaig	II Services	
_	Complete ONLY if direct	Candida	ata/Officabaldar nama	Office as	uabt			Office h	ald	
	Complete ONLY if direct expenditure to benefit C/OI		ate/Officeholder name	Office so	ugni			Office h	eiu	
_		1								
	Date	l ´	name							
	08/08/2023	Carus	so, Ryan							
	Amount (\$)	1	e address; City;	State; Zip C	ode					
	\$500.00	1460	6 Sweetwater Dr							
		Bayto	own, TX 77523							
	PURPOSE	(a) Categ	Ory (See Categories listed at	the top of this schedule)	(b)	Description		<u> </u>		
	OF EXPENDITURE	Salar	ies/Wages/Contract L	abor					plete Schedule T.	
	-					ш		officeholder living		
						Contract Lab	UI I	or Campaig	II JEIVICES	
$\vdash$	Complete ONLY if direct	Candid	ate/Officeholder name	Office so	liapt			Office h	eld.	
	expenditure to benefit C/OI		ALC/OHIGGHOIDE HAIHE	Office SU	agrit			Onice II	Ciu	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

ng Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/54 Rpt: 14/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	09/14/2023	Caruso, Ryan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	14606 Sweetwater Dr
		Baytown, TX 77523
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Contract Labor for Compaign Soniice
		Contract Labor for Campaign Services
Ļ	0 1. 0	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/06/2023	Caruso, Ryan
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	14606 Sweetwater Dr
		Baytown, TX 77523
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
		Contract Labor for Campaign Convictor
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Power name
	11/06/2023	Payee name Caruso, Ryan
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	14606 Sweetwater Dr
		Baytown, TX 77523
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Contract Labor for Campaign Services
		Contract Labor for Campaign Services
_	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 -

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	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:	
Sch: 7/54 Rpt: 15/69	Middleton II, David M. (The Honorable) 00081727
4 Date	5 Payee name
12/07/2023	Caruso, Ryan
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	14606 Sweetwater Dr
	Baytown, TX 77523
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Contract Labor for Campaign Services
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
08/08/2023	Caruso, Ryan
Amount (\$)	Payee address; City; State; Zip Code
\$110.88	14606 Sweetwater Dr
	Baytown, TX 77523
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Miloago Poimbursoment for Compaign Travel
	Mileage Reimbursement for Campaign Travel
Complete CALL V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	· ·
Data	Davies same
Date	Payee name Carusa Dyan
07/10/2023	Caruso, Ryan
Amount (\$)	Payee address; City; State; Zip Code
\$313.50	14606 Sweetwater Dr
	Baytown, TX 77523
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
D. LIBITORE	Check if Austin, TX, officeholder living expense
	Mileage Reimbursement for Campaign Travel
Complete CALL V if direct	Candidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

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/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: 8/54 Rpt: 16/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	10/27/2023	Caruso, Ryan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$509.92	14606 Sweetwater Dr
		Baytown, TX 77523
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Mileage Reimbursement for Campaign Travel
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
	11/16/2023	Caruso, Ryan
	Amount (\$)	Payee address; City; State; Zip Code
	\$851.20	14606 Sweetwater Dr
		Baytown, TX 77523
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
	12/20/2023	Caruso, Ryan
	Amount (\$)	Payee address; City; State; Zip Code
	\$484.12	14606 Sweetwater Dr
		Baytown, TX 77523
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Mileage Reimbursement for Campaign Travel
		Willeage Neimbursement for eampaign Traver
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·

#### 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

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

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services	Salaries/V	Vages	s/Contract Labor		OTHER (enter a	strict a category not listed above	e)
			The Instruction Guid	e explains how to co	mple	ete this form.	_			
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission	Filers)
	Sch: 9/54 Rpt: 17/69	Middleton II	, David M. (The H	onorable)				00081727		
4	Date	5 Payee name								
	12/31/2023	Caruso, Ry	an							
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode					
	\$655.66	14606 Swe	etwater Dr							
		Baytown, T	X 77523							
8	PURPOSE	-	ee Categories listed at the t	top of this echodula)	(b)	Description				
	OF	Travel In Di		top of this schedule)	l` ´		outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE	Traver iii Bi	31101			Check if Austin,	, TX,	officeholder living	g expense	
						Mileage Reim	าbน	rsement		
9	Complete ONLY if direct		ceholder name	Office sou	ıght			Office h	eld	
	expenditure to benefit C/OI	4								
	Date	Payee name								
	07/19/2023	Clear Creek	Republican Wom	nen						
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$35.00	PO Box 217	1							
		League City	, TX 77574							
	PURPOSE	(a) Category (Se	ee Categories listed at the t	top of this schedule)	(b)	Description				
	OF	Event Expe		,		Check if travel	outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE	·				ш		officeholder living	g expense	
						Campaign Ev	/en	t Ticket		
	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office sou	ıght			Office h	eld	
	experioralizate to beriefit C/Or	<b>1</b>								
	Date	Payee name								
	12/05/2023	Clear Creek	Republican Wom	nen						
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$50.00	PO Box 217	<b>'</b> 1							
		League City	, TX 77574							
	PURPOSE	(a) Category (Se	ee Categories listed at the t	top of this schedule)	(b)	Description				
	OF	Event Expe		,		Check if travel	outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE	·						officeholder living	g expense	
						Campaign Ev	/en	t Ticket		
	Complete ONLY if direct		ceholder name	Office sou	ıght			Office h	eld	
	expenditure to benefit C/O	٦								
ı										

### SCHEDULE F1

Vertising Expense Event Expense Loan Repayment/Reimbur

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		nmittee	Legal Services	·		/ages	/Contract Labor		OTHER (enter a	strict category not listed above)	
				The Instruction G	uide explains l	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission F	ilers)
	Sch: 10/54 Rpt: 18/69		Middleton II,	David M. (The	Honorable)					00081727		
4	Date	5	Payee name									
	10/10/2023			Republican W	omen (							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$1,200.00		PO Box 217	1								
			League City	, TX 77574								
8	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Advertising I			,		Check if travel of	outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITORE							<b>—</b>		officeholder livin		
								Campaign Ev	en'	t Sponsorsh	nip	
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	ceholder name	C	Office sou	ght			Office h	eld	
	expenditure to benefit C/Oi											
	Date		Payee name									
	09/27/2023		Crestline Pro	omotional Prod	lucts							
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$2,721.38		PO Box 202	7								
			Lewiston, M	E 14241								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Advertising I					<b>-</b>			plete Schedule T.	
	LAI LINDITORE							<b>—</b>		officeholder livin		
								Campaign Pro	om	otional Prod	ducts	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Offic	ceholder name	С	Office sou	ght			Office h	eld	
	Date		Payee name									
	07/03/2023		FedEx									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de		_			
	\$11.45		936 South S	hady Grove R	d							
			Memphis, TI	N 38120								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE			nead/Rental Ex				<b></b>			plete Schedule T.	
	EXPENDITORE									officeholder livin		
								Miscellaneous	s C	ampaign S	hipping & Postage	
	0 1 0 0 0 0 0	Ļ			_							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Offic	ceholder name	C	Office sou	ght			Office h	eia	
	experience to benefit Groff											

### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/54 Rpt: 19/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	07/13/2023	FedEx
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$30.65	936 South Shady Grove Rd
		Memphis, TN 38120
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Miscellaneous Campaign Shipping & Postage
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experientare to benefit G/OI	
	Date	Payee name
	07/18/2023	FedEx
	Amount (\$)	Payee address; City; State; Zip Code
	\$31.08	936 South Shady Grove Rd
		Memphis, TN 38120
	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  Miscellaneous Campaign Shipping & Postage
		Wilderland Campaign Ompping a rostage
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	08/16/2023	FedEx
H	Amount (\$)	Payee address; City; State; Zip Code
	\$75.10	936 South Shady Grove Rd
	Ψ10.120	ood double charay crove ha
		Memphis, TN 38120
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Miscellaneous Campaign Shipping & Postage
$\vdash$	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 12/54 Rpt: 20/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	08/30/2023	FedEx
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$105.16	936 South Shady Grove Rd
		Memphis, TN 38120
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
		Miscellaneous Campaign Shipping & Postage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_		
	Date	Payee name
	09/05/2023	FedEx
	Amount (\$)	Payee address; City; State; Zip Code
	\$31.53	936 South Shady Grove Rd
		Memphis, TN 38120
	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  Miscellaneous Campaign Shipping & Postage
		Wilderlanded Sampaigh Shipping & Festage
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Data	
	Date 09/14/2023	Payee name FedEx
	Amount (\$)	Payee address; City; State; Zip Code
	\$49.19	936 South Shady Grove Rd
		Memphis, TN 38120
	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  Miscellaneous Campaign Shipping & Postage
		iviisceilarieous Campaign Shipping & rustage
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
l		

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

	Credit Card Payment	The Instruction Guide explains how to complete	e this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 13/54 Rpt: 21/69	Middleton II, David M. (The Honorable)	00081727
4	Date	5 Payee name	•
	10/10/2023	FedEx	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$49.30	936 South Shady Grove Rd	
		Memphis, TN 38120	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE		Check if Austin, TX, officeholder living expense
		, in the second	Miscellaneous Campaign Shipping & Postage
_	Complete ONLY if direct	Candidate/Officeholder name Office cought	Office hold
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/17/2023	FedEx	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$22.90	936 South Shady Grove Rd	
		Memphis, TN 38120	
	PURPOSE OF	, ,	Description
	EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		L	Josephin Special Williams of the Miscellaneous Campaign Shipping & Postage
			1 3 11 3 3
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
	Date	Payee name	
	10/30/2023	FedEx	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$11.45	936 South Shady Grove Rd	
	,		
		Memphis, TN 38120	
	PURPOSE		
	OF	(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.
	EXPENDITURE	Office Overhead/Nertial Expense	Check if Austin, TX, officeholder living expense
		, , , , , , , , , , , , , , , , , , ,	Miscellaneous Campaign Shipping & Postage
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	l 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)
L	Sch: 14/54 Rpt: 22/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	11/13/2023	FedEx
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$53.07	936 South Shady Grove Rd
l		
		Memphis, TN 38120
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Miscellaneous Campaign Shipping & Postage
		missonanssas sampaign simpling a restage
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
l	07/05/2023	Ferguson, Beverly
H	Amount (\$)	Payee address; City; State; Zip Code
l	\$500.00	1407 Chaparral Crossing
l	, , , , , ,	2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -
		League City, TX 77573
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
		Contract Labor for Campaign Convices
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
H	Date	Davisa nama
	07/27/2023	Payee name Ferguson, Beverly
L		
l	Amount (\$)	Payee address; City; State; Zip Code
l	\$500.00	1407 Chaparral Crossing
		League City, TX 77573
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor
l	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
dash	0 1: 0:::::::::::::::::::::::::::::::::	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	superiorder to borient 6/01	· 

### 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: 15/54 Rpt: 23/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	08/14/2023	Ferguson, Beverly
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1407 Chaparral Crossing
		League City, TX 77573
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
		Communication for Company of Communication
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г	Date	Payee name
	09/25/2023	Ferguson, Beverly
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1407 Chaparral Crossing
		League City, TX 77573
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
		Communication for Company of Communication
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	10/13/2023	Ferguson, Beverly
H	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1407 Chaparral Crossing
		League City, TX 77573
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$		
ı		

### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica		OTHER (enter a category not listed above)
	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: 16/54 Rpt: 24/69	Middleton II, David M. (The Honorable)	00081727
4	Date	5 Payee name	-
	11/07/2023	Ferguson, Beverly	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
٠	\$500.00	1407 Chaparral Crossing	
	φουσ.σσ	1407 Chapartal Crossing	
		Langua Cit. TV 77570	
		League City, TX 77573	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Galaries, Wages, Corni act East.	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense
			Labor for Campaign Services
			, , , , , , , , , , , , , , , , , , ,
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
Ĭ	expenditure to benefit C/OI		Sinde Hold
	Date	Davisa nama	
	12/08/2023	Payee name Ferguson, Beverly	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	1407 Chaparral Crossing	
		League City, TX 77573	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/ Wages/Cortifact Eabor	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense
			_abor for Campaign Services
			, , , , , , , , , , , , , , , , , , ,
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	07/27/2023	Ferguson, Beverly	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$397.72	1407 Chaparral Crossing	
	Ψ331.12	1407 Chapartal Clossing	
		Lagrage City, TV 77572	
		League City, TX 77573	
	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Description	l avel outside of Texas. Complete Schedule T.
	EXPENDITURE		ustin, TX, officeholder living expense
			Reimbursement for Campaign Travel
			. 3
	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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 17/54 Rpt: 25/69	2 FILER NAME Middleton II, David M. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00081727
4	Date 07/27/2023	5 Payee name Ferguson, Beverly
6	Amount (\$) \$431.19	7 Payee address; City; State; Zip Code 1407 Chaparral Crossing
8	PURPOSE OF EXPENDITURE	League City, TX 77573  (a) Category (See Categories listed at the top of this schedule) Travel In District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage Reimbursement for Campaign Travel
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date 08/14/2023 Amount (\$)	Payee name Ferguson, Beverly Payee address; City; State; Zip Code
	\$199.05	1407 Chaparral Crossing  League City, TX 77573
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Mileage Reimbursement for Campaign Travel
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 09/25/2023	Payee name Ferguson, Beverly
	Amount (\$) \$407.02	Payee address; City; State; Zip Code 1407 Chaparral Crossing
		League City, TX 77573
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Mileage Reimbursement for Campaign Travel
	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 -Candidate/Officeholder/Political Com

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal 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: 18/54 Rpt: 26/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	11/07/2023	Ferguson, Beverly
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$529.50	1407 Chaparral Crossing
L		League City, TX 77573
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Mileage Reimbursement for Campaign Travel
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	12/08/2023	Ferguson, Beverly
	Amount (\$)	Payee address; City; State; Zip Code
	\$372.93	1407 Chaparral Crossing
		League City, TX 77573
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Mileage Reimbursement for Campaign Travel
		Willedge Neimburgement for Gampaign Haven
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	12/08/2023	Ferguson, Beverly
	Amount (\$)	Payee address; City; State; Zip Code
	\$354.88	1407 Chaparral Crossing
	Ψ034.00	1407 Chaparta Crossing
		League City, TX 77573
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Mileage Reimbursement
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$		
l		

#### SCHEDULE F1

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica		Travel Out of District OTHER (enter a category not listed above)
	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: 19/54 Rpt: 27/69	Middleton II, David M. (The Honorable)	00081727
4	Date	5 Payee name	
	12/31/2023	Ferguson, Beverly	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$306.95	1407 Chaparral Crossing	
		League City, TX 77573	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Traver in District	utside of Texas. Complete Schedule T.
		Mileage Reim	TX, officeholder living expense
		Willeage Neilli	bulsement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
•	expenditure to benefit C/OI		
	Date	Payee name	
	08/21/2023	Friends of Dr. Greg Bonnen	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$210.00	PO Box 1183	
		Friendswood, TX 77549	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Continuations/Bonations wade by	utside of Texas. Complete Schedule T.
			TX, officeholder living expense I from Campaign
		23.1880.135	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	09/28/2023	Galveston Republican Women	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$50.00	908 Layfair Place	
		Friendswood, TX 77546	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense	utside of Texas. Complete Schedule T.
		Campaign Eve	TX, officeholder living expense
		Sampaign Ev	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	-	

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political 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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 20/54 Rpt: 28/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	11/01/2023	Galveston Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$30.00	908 Layfair Place
		Friendswood, TX 77546
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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Event Ticket
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experientare to benefit 6/61	<u>'</u>
	Date	Payee name
	10/24/2023	Galveston Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.00	908 Layfair Place
		Friendswood, TX 77546
	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  Campaign Event Ticket
		Campaign Event Ticket
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	08/21/2023	Galveston Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$80.00	908 Layfair Place
		Friendswood, TX 77546
	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
		Campaign Event Ticket
	Complete ONU V Station	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 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 C Credit Card Payment			mmittee	Gift/Awards/Memoria Legal Services	•		ages	s/Contract Labor		Travel Out of Di OTHER (enter a		ted above)
	·	_		The Instruction	Guide explains	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAMI	E					3	Filer ID	(Ethics Com	mission Filers)
	Sch: 21/54 Rpt: 29/69		Middleton I	I, David M. (Th	e Honorable	<u>:)</u>				00081727		
4	Date	5	Payee name									
	11/07/2023		Galveston I	Republican Wo	men							
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de					
	\$1,000.00		908 Layfair									
	<b>+=</b> ,000.00											
			Friendswoo	od, TX 77546								
8	PURPOSE	(a)	Category (s	ee Categories listed a	t the ten of this set	hodulo)	(b)	Description				
	OF	l`	Advertising		t tric top or triis scr	nedule)	. ,	_ `	outsio	de of Texas. Com	plete Schedule	Т.
	EXPENDITURE			,				Check if Austin,	, TX,	officeholder living	g expense	
								Campaign Ev	ent/	t Sponsorsh	ıip	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	(	Office sou	ght			Office h	eld	
	Date	Π	Payee name									
	10/04/2023		Google									
	Amount (\$)	⊢	Payee addre	ess; City;	State	; Zip Co	da					
	\$63.24		•			:, Δip Co	ue					
	Φ03.24		1000 Ampi	nitheatre Parkw	ay							
			Mountain V	iew, CA 77546	i							
	PURPOSE	(a)	Category (S	ee Categories listed a	t the ton of this sch	hedule)	(b)	Description				
	OF			head/Rental E		ouu.o,		_	outsio	de of Texas. Com	plete Schedule	Г.
	EXPENDITURE							Check if Austin,	, TX,	officeholder living	g expense	
								Campaign Du	ıes	& Subscrip	tions	
	Complete ONLY if direct		Candidate/Off	iceholder name	(	Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name	1								
	10/28/2023		Google									
		H		occ: City:	Ctoto	· Zin Co	do					
	Amount (\$)		Payee addre			e; Zip Co	ue					
	\$63.24		1600 Ampi	nitheatre Parkw	ay							
			Mountain V	iew, CA 94303								
	PURPOSE	(a)	Category (S	see Categories listed a	t the top of this sch	hedule)	(b)	Description				
	OF EXPENDITURE		Office Over	head/Rental E	xpense			<b></b>		de of Texas. Com		Г.
	EXPENDITORE									officeholder living		
								Campaign Du	ıes	& Subscrip	tions	
		L										
	Complete ONLY if direct		Candidate/Off	iceholder name	(	Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										

### 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: 22/54 Rpt: 30/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	10/24/2023	Google
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$63.24	1600 Amphitheatre Parkway
L		Mountain View, CA 94303
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  Campaign Dues & Subscriptions
		Campaign Dues & Subscriptions
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
F	Date	Payee name
	07/19/2023	Google
H	Amount (\$)	Payee address; City; State; Zip Code
	\$63.24	1600 Amphitheatre Parkway
		Mountain View, CA 94303
	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  Campaign Dues & Subscriptions
		Campaign Dues & Subscriptions
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	09/28/2023	Google
	Amount (\$)	Payee address; City; State; Zip Code
	\$63.24	1600 Amphitheatre Parkway
	Ψ03.24	1000 Amphilineane Farkway
		Mountain View, CA 94303
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Dues & Subscriptions
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	
1		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Opnations 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		Travel Out of District OTHER (enter a category not listed above)
┰	Total pages Schedule F1:	2 FILED NAME	2 Filer ID (Ethios Commission Filers)
	Sch: 23/54 Rpt: 31/69	Middleton II, David M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081727
┝	Data		
4	Date	5 Payee name	
l	11/01/2023	Google	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$63.24	1600 Amphitheatre Parkway	
l	+00.2		
l			
		Mountain View, CA 94303	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		outside of Texas. Complete Schedule T.
l	EXPENDITURE	Onice overneda/rental Expense	, TX, officeholder living expense
l			ues & Subscriptions
l			,
Ļ			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experiulture to beliefit C/O	1	
	Date	Payee name	
	10/18/2023	HEB	
_			
	Amount (\$)	Payee address; City; State; Zip Code	
	\$57.75	6430 Garth Rd	
l			
l		Baytown, TX 77521	
L		<del>-</del>	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	EXPENDITURE	1 000/Deverage Expense	outside of Texas. Complete Schedule T.
l			, TX, officeholder living expense
		Campaign Of	ffice Ribbon Cutting Refreshments
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
H	Data	David Same	
	Date	Payee name	
	10/23/2023	HEB	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$32.40	1000 E 41st	
		A	
L		Austin, TX 78751	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF	Office Overhead/Rental Expense	outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin	, TX, officeholder living expense
		Campaign Of	ffice Supplies
一	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Cindo Hold
$ldsymbol{ldsymbol{ldsymbol{eta}}}$			
ı			

### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 24/54 Rpt: 32/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	07/10/2023	Herrell, Andrew
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1912 Whitaker Dr
		Austin, TX 78754
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Contract Labor for Campaign Services
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiditure to beliefit C/O	'
	Date	Payee name
	08/08/2023	Herrell, Andrew
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1912 Whitaker Dr
		Austin, TX 78754
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	10/18/2023	Herrell, Andrew
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1912 Whitaker Dr
		Austin, TX 78754
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Contract Labor for Campaign Services
		Contract Labor for Campaign Services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

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

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

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		
1	Total pages Schedule F1:	
	Sch: 25/54 Rpt: 33/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	10/24/2023	Herrell, Andrew
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1912 Whitaker Dr
		Austin, TX 78754
L		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
		Solution 2005 for Campaign Solution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	Complete ONLY if direct expenditure to benefit C/OI	
┕	·	
	Date	Payee name
	11/02/2023	Herrell, Andrew
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1912 Whitaker Dr
		Austin, TX 78754
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
F	Date	Payee name
	12/05/2023	Herrell, Andrew
L		
	Amount (\$) \$500.00	Payee address; City; State; Zip Code  1912 Whitaker Dr
	φ500.00	1912 Williakei Di
		Austin, TX 78754
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
$\vdash$	Complete ONLY if allowed	Condidate/Officeholder name Office county
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L		

### SCHEDULE F1

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

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

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

	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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 26/54 Rpt: 34/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	08/08/2023	Herrell, Andrew
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$288.86	1912 Whitaker Dr
		Austin, TX 78754
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Mileage Reimbursement for Campaign Travel
		I mouge romanes non earpaign navel
9	Complete ONLY if direct expenditure to benefit C/O	L L Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	10/28/2023	Hyatt Regency
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.00	1200 Lousiana St
		Houston, TX 77002
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T.  Expense Check if Austin, TX, officeholder living expense
		Expense
		Sampaga = Sam amag
	Complete ONLY if direct expenditure to benefit C/O	L L Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	10/12/2023	Irving Convention Center at Los Colinas
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.00	500 W Las Colinas Blvd
		Irving, TX 75039
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense
		TFRW Convention Parking
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office country Office hold
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
<u> </u>		

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 27/54 Rpt: 35/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	10/13/2023	Irving Convention Center at Los Colinas
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.00	500 W Las Colinas Blvd
		Irving, TX 75039
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T.  Expense Check if Austin, TX, officeholder living expense
		Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	<del>1</del>
_	Date	Payee name
	10/14/2023	Irving Convention Center at Los Colinas
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.00	500 W Las Colinas Blvd
		Irving, TX 75039
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T.  Expense Check if Austin, TX, officeholder living expense
		Expense Check if Austin, TX, officeholder living expense TFRW Convention Parking
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	10/24/2023	JW Marriott
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.00	806 Main St
		Houston, TX 77002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T.
	_	Expense
		Campaign Evener anding
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>y</b>

### 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

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

	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: 28/54 Rpt: 36/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	07/24/2023	Jones, Ryan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	6001 S Congress Ave
		Apt #2313
		Austin, TX 78745
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
Ļ	Computate ONLY if dispost	Condidate/Office holder name Office sought Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_		
	Date	Payee name
	08/07/2023	Jones, Ryan
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	6001 S Congress Ave
		Apt #2313
		Austin, TX 78745
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
		Contract Last ion Campaign Contract
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/08/2023	Jones, Ryan
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	6001 S Congress Ave
		Apt #2313
		Austin, TX 78745
	PURPOSE	I and
	OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1 

### SCHEDULE F1

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

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

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

Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 29/54 Rpt: 37/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	10/18/2023	Jones, Ryan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	6001 S Congress Ave
		Apt #2313
		Austin, TX 78745
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Contract Labor for Campaign Services
		Contract Labor for Campaign Scrivices
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	11/02/2023	Jones, Ryan
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	6001 S Congress Ave
		Apt #2313
		Austin, TX 78745
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Contract Labor for Campaign Services
		Contract Lasor for Campaign Convices
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	12/06/2023	Jones, Ryan
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	6001 S Congress Ave
		Apt #2313
		Austin, TX 78745
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	-	Contract Labor for Campaign Sorvices
		Contract Labor for Campaign Services
H	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	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: 30/54 Rpt: 38/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	10/27/2023	Jones, Ryan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$425.60	6001 S Congress Ave
		Apt #2313
		Austin, TX 78745
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Mileage Reimbursement for Campaign Travel
		whicage Neimbursement for Campaign Travel
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
H	Date	Payee name
	08/21/2023	La Escondida
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$0.00	400 W Parkwood Ave
	Ψ0.00	#124
		Friendswood, TX 77546
	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
		Campaign Event Dinner
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
H	Date	Payee name
	11/17/2023	Larry M. Hicks, CPA
H	Amount (\$)	Payee address; City; State; Zip Code
	\$1,718.00	10500 Northwest Freeway
	Ψ1,710.00	·
		Suite 212
		Houston, TX 77092
	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
		Campaign Accounting & Compliance Services
		Campaign roccanning a compliance control
$\vdash$	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 Committe

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/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: 31/54 Rpt: 39/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	07/12/2023	Lyrock, Josh
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	8006 Dogwood Court
		Mont Belvieu, TX 77523
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>
	Date	Payee name
	08/09/2023	Lyrock, Josh
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	8006 Dogwood Court
		Mont Belvieu, TX 77523
	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
		Contract Easts for Gampaign Services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>y</b>
	Date	Payee name
	09/14/2023	Lyrock, Josh
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	8006 Dogwood Court
		Mont Belvieu, TX 77523
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	

### 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: 32/54 Rpt: 40/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	10/06/2023	Lyrock, Josh
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	8006 Dogwood Court
		Mont Belvieu, TX 77523
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	- CAPCHARGIC TO DONOR GIVE	
	Date	Payee name
	11/03/2023	Lyrock, Josh
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	8006 Dogwood Court
		Mont Belvieu, TX 77523
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
_	D :	
	Date	Payee name
	12/06/2023	Lyrock, Josh
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	8006 Dogwood Court
		Mont Belvieu, TX 77523
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Contract Labor for Campaign Services
		Contract Labor for Campaign Services
	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 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		Legal Services  The Instruction Guide ex	Salaries/V	Wages	/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAMI					3	Filer ID	(Ethics Commission F	-ilers)
	Sch: 33/54 Rpt: 41/69	l	I, David M. (The Hond	orable)				00081727	`	•
4	Date	5 Payee name								
	11/28/2023	Lyrock, Jos	h							
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode					
	\$35.91	8006 Dogw	ood Court							
		Mont Belvie	eu, TX 77523							
8	PURPOSE OF		ee Categories listed at the top o	f this schedule)	(b)	Description				
	EXPENDITURE	Travel In D	istrict			<b>=</b>		de of Texas. Com officeholder living		
						_			Campaign Travel	
						·····ougo · ·o···			- Campaign mare	
9	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office sou	<u>l</u> ıght			Office he	eld	
_	Date	Payee name								
	12/06/2023	Lyrock, Jos								
	Amount (\$)	Payee addre		State; Zip Co	nde					
	\$85.12	8006 Dogw	•	Otate, Zip Ot	Juc					
	Ψ03.12	BOOO DOGW	ood Court							
		Mont Belvie	eu, TX 77523							
	PURPOSE	(a) Category (S	ee Categories listed at the top o	f this schedule)	(b)	Description				
	OF EXPENDITURE	Travel In D	istrict			<b>=</b>		de of Texas. Com		
						_		officeholder living	Campaign Travel	
						willeage rein	ibu	i sement for	Campaign maver	
	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office sou	<u>l</u> ıght			Office he	eld	
_	Date	Payee name								
	12/05/2023	MailChimp								
		·	oo: City	State; Zip Co	nd o					
	Amount (\$) \$394.42	Payee addre		State, Zip Ct	Jue					
	Φ394.42	1600 Ampi	iitheatre Parkway							
		Mountain V	iew, GA 94303							
	PURPOSE	(a) Category (S	ee Categories listed at the top o	f this schedule)	(b)	Description				
	OF EXPENDITURE	Office Over	head/Rental Expense	<b>:</b>				de of Texas. Com		
								officeholder living		
						Campaign Du	JC 5	a Subscribi	(1 IUI.	
	Complete ONLY !! -!!	Condidate /C"	iooboldor vaavaa	Office -	100 pr			O#:!	NA .	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		iceholder name	Office sou	ignt			Office he	eiu	

#### SCHEDULE F1

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

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

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

	Candidate/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: 34/54 Rpt: 42/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	10/12/2023	MailChimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$394.42	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	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign Dues & Subscriptions
		Campaign Buss a substriptions
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
Г	Date	Payee name
	10/13/2023	MailChimp
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$394.42	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	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign Dues & Subscriptions
		Campaign Buss a substriptions
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	10/14/2023	MailChimp
H	Amount (\$)	Payee address; City; State; Zip Code
	\$394.42	675 Ponce de Leon Ave NE
		Atlanta, GA 30308
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign Dues & Subscriptions
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		
I		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 35/54 Rpt: 43/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	10/24/2023	MailChimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$394.42	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 EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign Dues & Subscriptions
		Campaign Buss a substitution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	12/12/2023	MailChimp
H	Amount (\$)	Payee address; City; State; Zip Code
	\$437.06	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	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign Dues & Subscriptions
		Campaign Dues a Subscriptions
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	07/11/2023	Moore, Mikel
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	7900 Crystalbrook W
		Austin, TX 78724
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Contract Labor for Campaign Services
		Contract Labor for Campaign Services
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H		
ı		

### SCHEDULE F1

Advertising Expense Event Expe Accounting/Banking Fees Consulting Expense Food/Bever Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Legal Servi

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1		2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 36/54 Rpt: 44/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	08/03/2023	Moore, Mikel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	7900 Crystalbrook W
		Austin, TX 78724
8	PURPOSE	
°	OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
Ļ		
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H
L	Dete	
	Date 09/08/2023	Payee name  Moore, Mikel
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 7900 Crystalbrook W
	Ψ300.00	7500 Grystalbrook W
		Austin, TX 78724
-	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	10/04/2023	Moore, Mikel
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	7900 Crystalbrook W
		Austin, TX 78724
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H

### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense 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: 37/54 Rpt: 45/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	11/02/2023	Moore, Mikel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	7900 Crystalbrook W
		Austin, TX 78724
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
		Solution 2007 for Campaign Solution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Douge name
	12/04/2023	Payee name  Moore, Mikel
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	7900 Crystalbrook W
		Austin, TX 78724
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
		Solution 2007 to Campaign Solution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>y</b>
_	Date	Payee name
	07/28/2023	Najvar Law Firm, PLLC
		•
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,553.33	2180 North Loop West
		Suite 255
		Houston, TX 77018
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign Consulting
		Campaign Concaming
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>y</b>

#### 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: 38/54 Rpt: 46/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	10/23/2023	Office Depot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$155.84	110 I-35
		Round Rock, TX 78681
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  Campaign Office Supplies
		Campaign Office Supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	the state of the s
F	Date	Payee name
	09/12/2023	Pasadena Livestock Show and Rodeo
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	7601 Red Bluff
	Ψ230.00	7001 Ned Bidii
		Pasadena, TX 77507
⊢	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
		Campaign Event Sponsorship
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	
	Date	Payee name
	07/11/2023	Patterson, Matt
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	7900 Tecoma Cir
		#12208
		Austin, TX 78735
T	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
$\vdash$		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling 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: 39/54 Rpt: 47/69	Middleton II, David M. (The Honorable)  00081727
4	Date	5 Payee name
	08/02/2023	Patterson, Matt
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	7900 Tecoma Cir
		#12208
		Austin, TX 78735
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)  (b) Description
ľ	OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/11/2023	Patterson, Matt
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	7900 Tecoma Cir
	4000.00	#12208
		Austin, TX 78735
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
		Contract Labor for Campaign Convices
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/06/2023	Patterson, Matt
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	7900 Tecoma Cir
		#12208
		Austin, TX 78735
	PURPOSE	
	OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-		

### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services 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: 40/54 Rpt: 48/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	11/08/2023	Patterson, Matt
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	7900 Tecoma Cir
		#12208
		Austin, TX 78735
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Contract Labor for Campaign Services
_	0 1 0 0 1 1 1 1	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/06/2023	Patterson, Matt
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	7900 Tecoma Cir
		#12208
		Austin, TX 78735
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Contract Labor for Campaign Services
		Contract Easts for Gampaigh Convices
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	11/01/2023	Patterson, Matt
	Amount (\$)	Payee address; City; State; Zip Code
	\$329.18	7900 Tecoma Cir
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	#12208
		Austin, TX 78735
	PURPOSE	In.
	OF	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Mileage Reimbursement for Campaign Travel
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 41/54 Rpt: 49/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	10/19/2023	Pinehurst Mail & Ship
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$18.20	7714 N Hwy 146
		Baytown, TX 77523
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 Miscellaneous Campaign Shipping & Postage
		Wilderhaltedas Gampaight Shipping & Fostage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	12/05/2023	Payee name
		Pinehurst Mail & Ship
	Amount (\$)	Payee address; City; State; Zip Code
	\$18.20	7714 N Hwy 146
		Baytown, TX 77523
	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  Miscellaneous Campaign Shipping & Postage
		wilderlichte Gampaign Shipping & Fostage
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	07/03/2023	Payee name SP Plus
	Amount (\$)	Payee address; City; State; Zip Code
	\$340.00	2100 Market St
		Galveston, TX 80202
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign Dues & Subscriptions
		Sumpaign Dues & Subscriptions
$\vdash$	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 -

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: 42/54 Rpt: 50/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	08/03/2023	SP Plus
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$340.00	2100 Market St
		Galveston, TX 77550
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign Dues & Subscriptions
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	4
	Date	Payee name
	08/14/2023	Slack
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$9.22	1681 Chesnut Pl
		Denver, CO 30308
	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
		Campaign Dues & Subscriptions
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	07/14/2023	Slack
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$9.22	1681 Chesnut Pl
		Denver, CO 80202
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign Dues & Subscriptions
		Campaign Dues & Subscriptions
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	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 Commi

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: 43/54 Rpt: 51/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	09/13/2023	Slack
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$9.22	1681 Chesnut Pl
		Denver, CO 80202
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign Dues & Subscriptions
		Campaign Duce a cuses ipilone
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
Г	Date	Payee name
	10/16/2023	Slack
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$9.22	1681 Chesnut Pl
		Denver, CO 80202
	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  Campaign Dues & Subscriptions
		Campaign Duce a cuses ipilone
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	11/13/2023	Slack
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$9.22	1681 Chesnut Pl
		Denver, CO 80202
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Dues & Subscriptions
$\vdash$	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 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		nmittee Le	ft/Awards/Memorials I gal Services he Instruction Gu	·		ages.	/Contract Labor		Travel Out of Di OTHER (enter a	strict category not listed a	bove)
		_		ne mstruction ou	ide explains ii	IOW to coi	пріс	te tilis lollii.	_			
1	Total pages Schedule F1:	ı							3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 44/54 Rpt: 52/69	⊢		David M. (The	Honorable)					00081727		
4	Date	5	Payee name									
	12/13/2023		Slack									
6	Amount (\$)	7	Payee address	; City;	State;	Zip Co	de					
	\$9.22		1681 Chesnu	t Pl								
			Donver CO	0000								
<u>_</u>	DUDDOS-	⊢	Denver, CO 8			1	<i>(</i> 1. )					
8	PURPOSE OF			Categories listed at th		dule)	(b)	Description				
	EXPENDITURE		Office Overhe	ead/Rental Exp	ense			<b>=</b>			plete Schedule T.	
								_		officeholder living		
								Campaign Du	ues	a Subscrib	u0115	
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	holder name	Of	ffice sou	ght			Office h	eld	
	expenditure to benefit C/Of	17										
	Date		Payee name									
	11/15/2023		South Belt Ell	ington Leader								
	Amount (\$)		Payee address	; City;	State;	Zip Co	de					
	\$1,800.00		11555 Beame	er								
	•											
			Houston, TX	77080								
_	DUDD06-	├				Т	<i>a</i> :					
	PURPOSE OF			Categories listed at th	e top of this sche	dule)	(b)	Description		J4T -		
	EXPENDITURE		Advertising E	xpense				ш			plete Schedule T.	
								Campaign Ac		officeholder living	a evhelize	
								Campaign At	ave.	111301110111		
_	Complete ONLY if direct	<u></u>	Condidate /Off:	holder name		ffice servi	ab+			Office	old.	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	noluer name	Oi	ffice sou	ynt			Office h	eiu	
L		_										
	Date		Payee name									
L	07/21/2023		Tanner, Step	nanie								
	Amount (\$)		Payee address	; City;	State;	Zip Co	de					
	\$500.00		3101 Patricia	Lane								
			Pearland, TX	77581								
	PURPOSE	(a)	Category (See	Categories listed at th	e top of this sche	dule)	(b)	Description				
	OF			es/Contract La		,			outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE				-			ш		officeholder living	- '	
								Contract Lab	or f	or Campaig	n Services	
	Complete ONLY if direct		Candidate/Office	holder name	Ot	ffice sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										

### 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

l	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 45/54 Rpt: 53/69	Middleton II, David M. (The Honorable)	00081727
4	Date	5 Payee name	
	08/15/2023	Tanner, Stephanie	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	3101 Patricia Lane	
		Pearland, TX 77581	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense
			Contract Labor for Campaign Services
	Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
9	expenditure to benefit C/O		d Office field
_			
	Date	Payee name	
	09/28/2023	Tanner, Stephanie	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	3101 Patricia Lane	
		Pearland, TX 77581	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
	LAF LINDITORL ,		
	LAPENDITORE		Check if Austin, TX, officeholder living expense
	LAPENDITORE		Contract Labor for Campaign Services
		Candidate/Officeholder name Office sough	Contract Labor for Campaign Services
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sough	Contract Labor for Campaign Services
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	1	Contract Labor for Campaign Services
	Complete ONLY if direct expenditure to benefit C/OlDate	Payee name	Contract Labor for Campaign Services
	Complete ONLY if direct expenditure to benefit C/OhDate 10/27/2023	Payee name Tanner, Stephanie	Contract Labor for Campaign Services  t Office held
	Complete ONLY if direct expenditure to benefit C/OhDate 10/27/2023 Amount (\$)	Payee name Tanner, Stephanie Payee address; City; State; Zip Code	Contract Labor for Campaign Services  t Office held
_	Complete ONLY if direct expenditure to benefit C/OhDate 10/27/2023	Payee name Tanner, Stephanie	Contract Labor for Campaign Services  t Office held
_	Complete ONLY if direct expenditure to benefit C/OhDate 10/27/2023 Amount (\$)	Payee name Tanner, Stephanie Payee address; City; State; Zip Code 3101 Patricia Lane	Contract Labor for Campaign Services  t Office held
	Complete ONLY if direct expenditure to benefit C/Oh  Date 10/27/2023  Amount (\$)  \$500.00	Payee name Tanner, Stephanie  Payee address; City; State; Zip Code 3101 Patricia Lane  Pearland, TX 77581	Contract Labor for Campaign Services  t Office held
	Complete ONLY if direct expenditure to benefit C/Oh  Date 10/27/2023  Amount (\$)  \$500.00	Payee name Tanner, Stephanie  Payee address; City; State; Zip Code 3101 Patricia Lane  Pearland, TX 77581  (a) Category (See Categories listed at the top of this schedule)	Contract Labor for Campaign Services  t Office held  Description
	Complete ONLY if direct expenditure to benefit C/Oh  Date 10/27/2023  Amount (\$)  \$500.00	Payee name Tanner, Stephanie  Payee address; City; State; Zip Code 3101 Patricia Lane  Pearland, TX 77581	Contract Labor for Campaign Services  t Office held  ) Description  Check if travel outside of Texas. Complete Schedule T.
	Complete ONLY if direct expenditure to benefit C/OFDate 10/27/2023  Amount (\$)  PURPOSE OF	Payee name Tanner, Stephanie  Payee address; City; State; Zip Code 3101 Patricia Lane  Pearland, TX 77581  (a) Category (See Categories listed at the top of this schedule)	Contract Labor for Campaign Services  t Office held  Description
	Complete ONLY if direct expenditure to benefit C/OFDate 10/27/2023  Amount (\$)  PURPOSE OF	Payee name Tanner, Stephanie  Payee address; City; State; Zip Code 3101 Patricia Lane  Pearland, TX 77581  (a) Category (See Categories listed at the top of this schedule)	Contract Labor for Campaign Services  t Office held  Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/Onterest Date 10/27/2023  Amount (\$) \$500.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Payee name Tanner, Stephanie  Payee address; City; State; Zip Code 3101 Patricia Lane  Pearland, TX 77581  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate/Officeholder name  Office sough	Contract Labor for Campaign Services  t Office held  Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor for Campaign Services
	Complete ONLY if direct expenditure to benefit C/On Date 10/27/2023  Amount (\$) \$500.00  PURPOSE OF EXPENDITURE	Payee name Tanner, Stephanie  Payee address; City; State; Zip Code 3101 Patricia Lane  Pearland, TX 77581  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate/Officeholder name  Office sough	Contract Labor for Campaign Services  t Office held  Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor for Campaign Services
	Complete ONLY if direct expenditure to benefit C/Onterest Date 10/27/2023  Amount (\$) \$500.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Payee name Tanner, Stephanie  Payee address; City; State; Zip Code 3101 Patricia Lane  Pearland, TX 77581  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate/Officeholder name  Office sough	Contract Labor for Campaign Services  t Office held  Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor for Campaign Services
	Complete ONLY if direct expenditure to benefit C/Onterest Date 10/27/2023  Amount (\$) \$500.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Payee name Tanner, Stephanie  Payee address; City; State; Zip Code 3101 Patricia Lane  Pearland, TX 77581  (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate/Officeholder name  Office sough	Contract Labor for Campaign Services  t Office held  Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor for Campaign Services

### 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	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 46/54 Rpt: 54/69	Middleton II, David M. (The Honorable)		00081727
4	Date	5 Payee name		-
	12/06/2023	Tanner, Stephanie		
6	Amount (\$)	<b>7</b> Payee address; City; State; Zip Co	de	
	\$500.00	3101 Patricia Lane		
		Pearland, TX 77581		
8	PURPOSE		(h)	Description
Ŭ	OF	Salaries/Wages/Contract Labor	()	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		ı	Check if Austin, TX, officeholder living expense
			ı	Contract Labor for Campaign Services
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held
	experience to borionic Gro		_	
	Date	Payee name		
	12/15/2023	Tanner, Stephanie		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$500.00	3101 Patricia Lane		
		Pearland, TX 77581		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor	ı	Check if travel outside of Texas. Complete Schedule T.
			ı	Check if Austin, TX, officeholder living expense
			ı	Contract Labor for Campaign Services
	Complete ONLY if direct	Candidate/Officeholder name Office sour	aht	Office held
	expenditure to benefit C/O		giit	Office field
	Date	Payes name	_	
	07/24/2023	Payee name Tanner, Stephanie		
		·	<u></u>	
	Amount (\$) \$444.09	Payee address; City; State; Zip Co 3101 Patricia Lane	ue	
	Φ444.09	3101 Fatilicia Laile		
		Decided TV 77504		
		Pearland, TX 77581		
	PURPOSE OF	- (	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel In District	ı	Check if Austin, TX, officeholder living expense
			ı	Mileage Reimbursement for Campaign Travel
			ı	
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O	4		

### 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 complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 47/54 Rpt: 55/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	08/15/2023	Tanner, Stephanie
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$128.58	3101 Patricia Lane
		Pearland, TX 77581
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Mileage Reimbursement for Campaign Travel
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
F	Date	Payee name
	10/23/2023	Tanner, Stephanie
	Amount (\$)	Payee address; City; State; Zip Code
	\$746.11	3101 Patricia Lane
		Pearland, TX 77581
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Mileage Reimbursement for Campaign Travel
		wineage Reimbarsement for Campaign Haver
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	11/13/2023	Tanner, Stephanie
H	Amount (\$)	Payee address; City; State; Zip Code
	\$618.19	3101 Patricia Lane
		Pearland, TX 77581
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORE	Check if Austin, TX, officeholder living expense  Mileage Reimbursement for Campaign Travel
		Milleage Reimbursement for Campaign Travel
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H		

### SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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: 48/54 Rpt: 56/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	12/15/2023	Tanner, Stephanie
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$617.87	3101 Patricia Lane
		Pearland, TX 77581
Ļ	DUDDOCE	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Mileage Reimbursement for Campaign Travel
Ļ	0 1: 0:0:0:0:0:0:0:0:0:0:0:0:0:0:0:0:0:0	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
⊨	Data	
	Date 12/31/2023	Payee name Tanner, Stephanie
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$233.50	3101 Patricia Lane
	4200.00	
		Pearland, TX 77581
┝	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Mileage Reimbursement
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>y</b>
F	Date	Payee name
	09/28/2023	Target
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$10.22	6128 Broadway St
		Galveston, TX 77551
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign Office Supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

#### SCHEDULE F1

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)				
┝	Total pages Schedule F1:	2 FILED NAME	3 Filer ID (Ethics Commission Filers)				
ľ	Sch: 49/54 Rpt: 57/69	Middleton II, David M. (The Honorable)	00081727				
L	•		00001727				
4	Date	5 Payee name					
	10/04/2023	The Teaspoon					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$24.02	2500 TX-35					
	, -						
L		Alvin, TX 77511					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Tood/Beverage Expense	outside of Texas. Complete Schedule T.				
	LXI ENDITORE	l	TX, officeholder living expense				
		Campaign Ev	ent Planning Dinner				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/O	1					
F	Date	Payee name					
	09/05/2023	Tri-County Republican Women					
┝							
	Amount (\$)	Payee address; City; State; Zip Code					
	\$45.00	PO Box 1021					
		Pearland, TX 77550					
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF		outside of Texas. Complete Schedule T.				
	EXPENDITURE		TX, officeholder living expense				
		Campaign ev	ent ticket				
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/OH						
⊨	Data						
	Date	Payee name					
	11/29/2023	USPS					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$210.00	601 Tremont St					
		Galveston, TX 77588					
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF		outside of Texas. Complete Schedule T.				
	EXPENDITURE	Office Overflead/Nertial Expense	TX, officeholder living expense				
		l —	stage stamps				
			- •				
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/O		Silico ficia				
⊢							

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 50/54 Rpt: 58/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	09/28/2023	USPS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$66.00	601 Tremont St
		Galveston, TX 77550
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.
		Compaign postage stamps
		Campaign postage stamps
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	09/18/2023	VistaPrint
_	Amount (\$)	Payee address; City; State; Zip Code
	\$2,192.06	95 Hayden Ave
	<del>+</del> =,===.00	
		Lexington, MA 12421
	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
		Campaign Promotional Products
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>1</del>
	Date	Payee name
	12/29/2023	VistaPrint
	Amount (\$)	Payee address; City; State; Zip Code
	\$248.94	95 Hayden Ave
		Lexington, MA 12421
	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  Campaign Promotional Products
		Campaight folloadia i foudois
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 51/54 Rpt: 59/69	Middleton II, David M. (The Honorable) 00081727
4	Date	5 Payee name
	07/31/2023	Walmart Supercenter
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$330.36	6410 I-45
		La Marque, TX 77568
8	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.
		Candidate/Officeholder/Political Committee
		Bollation from Campaign for back to Concornems
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
_	Date	Davisa nama
	10/22/2023	Payee name Walmart Supercenter
		Walmart Supercenter
	Amount (\$)	Payee address; City; State; Zip Code
	\$13.00	3401 S 31st St
		Temple, TX 76502
	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.
		Campaign Office Supplies
		Campaigh Office Supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Davies same
	08/07/2023	Payee name West Pearland Republican Women
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	8325 Broadway, 202
		Pearland, TX 77581
	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 Event Sponsorship
		Campaign Event Sponsorship
_	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 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 Solarios (Contract Labor,

	Credit Card Payment	The Instruction Guide explains how to co	-	ete this form.		
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
	Sch: 52/54 Rpt: 60/69	Middleton II, David M. (The Honorable)		00081727		
4	Date	5 Payee name		•		
	07/14/2023	Winred				
6	Amount (\$)	7 Payee address; City; State; Zip Co	de			
	\$337.74	1776 Wilson Blvd				
		Arlington, VA 22209				
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.		
	EXPENDITORE			Check if Austin, TX, officeholder living expense		
				Campaign Credit Card Processing Fees July 14, 2023 - December 27, 2023		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held		
	Date	Payee name				
	07/10/2023	Xero				
	Amount (\$)	Payee address; City; State; Zip Co	de			
	\$37.00	1615 Platte St				
		Denver, CO 77550				
	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.		
	ZA ZADITORZ			Check if Austin, TX, officeholder living expense		
				Campaign Dues & Subscriptions		
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held		
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH					
	<u> </u>					
	Date 08/10/2023	Payee name				
		Xero				
	Amount (\$)	Payee address; City; State; Zip Co	de			
	\$37.00	1615 Platte St				
		Denver, CO 80202				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
				Campaign Dues & Subscriptions		
				, 0		
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held		
	expenditure to benefit C/OI		J	- · · · · · · · · · · · · · · · · · · ·		

#### 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

	Contributions/ Donations Made By Candidate/Officeholder/Politica		Travel Out of District OTHER (enter a category not listed above)		
	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: 53/54 Rpt: 61/69	Middleton II, David M. (The Honorable)	00081727		
4	Date	5 Payee name			
	09/11/2023	Xero			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$37.00	1615 Platte St			
		Denver, CO 80202			
8	PURPOSE				
0	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	outside of Texas. Complete Schedule T.		
	EXPENDITURE	emice everneda// tentar Expense	TX, officeholder living expense		
		Campaign Du	es & Subscriptions		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OI	1			
	Date	Payee name			
	10/10/2023	Xero			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$37.00	1615 Platte St			
	Ψ01.00	1010 Fidule Of			
		Denver, CO 80202			
	DUDD 005	Tu.			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel of	outside of Texas. Complete Schedule T.		
EXPENDITURE		Onice Overneau/Nerital Expense	TX, officeholder living expense		
		Campaign Du	es & Subscriptions		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OI	1			
	Date	Payee name			
	11/09/2023	Xero			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$42.00	1615 Platte St			
	Ψ12.00	1010 1 10110 01			
		Denver, CO 80202			
	DUDD 005				
	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule)  (b) Description  Check if travel of	outside of Texas. Complete Schedule T.		
	EXPENDITURE	Onice Overhead/Nerital Expense	TX, officeholder living expense		
			es & Subscriptions		
			·		
	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

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Commit Credit Card Payment			mmittee	Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services		Polling Expense Printing Expens Salaries/Wages	se s/Contract Labor		Travel in District Travel Out of Dis		
L				The Instruction Guid	le explains h	now to comple	ete this form.				
1	Total pages Schedule F1:	2						3	Filer ID	(Ethics Commission Filers)	
l	Sch: 54/54 Rpt: 62/69		Middleton I	I, David M. (The H	onorable)				00081727		
4	Date	5	Payee name	1				_			┪
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ľ	Amount (\$)	'	Payee addre		State,	Zip Code					
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8	PURPOSE	(a)	Category (s	See Categories listed at the	ton of this scho	odulo) (b)	Description				┪
l	OF	<u> </u> `		rhead/Rental Expe		duic)	_	outsi	ide of Texas. Com	plete Schedule T.	
	EXPENDITURE	l					Check if Austin	ı, TX	, officeholder living	j expense	
		l					Campaign Du	ues	& Subscrip	tions	
9	Complete ONLY if direct		Candidate/Off	iceholder name	0	ffice sought			Office he	eld	٦
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#### SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/7 Rpt: 63/69 Middleton II, David M. (The Honorable) 00081727 Date Payee name 10/04/2023 Boy Scouts of America Bay Area Council Payee address; Amount (\$) City; State; Zip Code 3020 53rd St \$1,000.00 Reimbursement from political contributions Х intended Galveston, TX 77551 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Event Sponsorship** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/14/2023 Brazoria County Hispanic Chamber of Commerce Amount (\$) Payee address; City; State; Zip Code \$40.00 200 West 2nd St Suite 333 Reimbursement from political contributions Χ Freeport, TX 77541 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE Event Ticket** Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 09/07/2023 Clear Lake Area Chamber of Commerce City; State; Zip Code Amount (\$) Payee address: \$1,000.00 1201 E NASA Parkway Reimbursement from Χ political contributions intended Houston, TX 77058 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Event Sponsorship**

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit

C/OH

Office sought

Office held

#### SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/7 Rpt: 64/69 Middleton II, David M. (The Honorable) 00081727 Date Payee name 09/26/2023 Clear Lake Area Chamber of Commerce Payee address; Amount (\$) City: State; Zip Code \$35.00 1201 E NASA Parkway Reimbursement from political contributions Х intended Houston, TX 77058 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Fees **EXPENDITURE Event Ticket** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/02/2023 Clear Lake Area Chamber of Commerce Amount (\$) Payee address; City; State; Zip Code \$700.00 1201 E NASA Parkway Reimbursement from political contributions Χ Houston, TX 77058 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Event Sponsorship** Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 10/18/2023 Clear Lake Area Chamber of Commerce City; State; Zip Code Amount (\$) Payee address: \$235.00 1201 E NASA Parkway Reimbursement from Χ political contributions intended Houston, TX 77058 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Event Sponsorship**

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit

C/OH

Office sought

Office held

# SCHEDULE G

Advertising Expense Accounting/Banking

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Lab			Travel in District Travel Out of District or OTHER (enter a category not listed above)				
The Instruction Guide explains how to complete this form.										
1	Total pages Schedule G:	2 FILER NAM	E			3 F	Filer ID	(Ethics Commission	Filers)	
	Sch: 3/7 Rpt: 65/69	Middleton	II, David M. (The Honorable)	)			000817	27		
4	Date	5 Payee name	<del></del>							
	11/13/2023	Clear Lake	e Area Chamber of Commerc	e						
6	Amount (\$)	7 Payee addre	ess; City; State;	Zip Co	ode					
	\$35.00	1201 E NA	1201 E NASA Parkway							
	Reimbursement from political contributions intended	Houston, T	TX 77058							
8	PURPOSE		See Categories listed at the top of this sche	edule)	(b) Description	Che	ck if travel	outside of Texas. Complete 9	Schedule T.	
	OF	Event Exp		suuic)		_		n, TX, officeholder living exper		
	EXPENDITURE		<i>3</i> 1100		Event Ticket					
9	Complete ONLY if direct expenditure to benefit C/OH	L Candidate/Office	holder name		Office sought			Office held		
	Date	Payee name	<del></del> е							
	11/13/2023	Economic	Development Alliance for Bra	azoria C	County					
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	ode					
	\$50.00	4005 Tech	inology Drive							
	Reimbursement from	0.11.4040								
	x political contributions intended	Angleton,								
_	PURPOSE	<u> </u>	See Categories listed at the top of this sche	adula)	Description	☐ Che	ock if travel	outside of Texas. Complete S	Schedule T.	
	OF	Event Exp	,	edule)		=		n, TX, officeholder living exper		
	EXPENDITURE	LVCIII EAP	5113C		Event Ticket					
	Complete ONLY if direct	L Candidate/Office	eholder name		Office sought			Office held		
	expenditure to benefit C/OH				· ·					
	Date	Payee name	9							
	07/24/2023	Family Ser	rvice Center of Galveston							
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	ode					
	\$250.00	2200 Mark	et St							
	Reimbursement from	Suite 600								
X political contributions intended		Galveston, TX 77550								
	PURPOSE	Category (	See Categories listed at the top of this sche	edule)	Description	Che	ck if travel	outside of Texas. Complete S	Schedule T.	
	OF	Advertising	g Expense	-		Che	ck if Austin	n, TX, officeholder living exper	nse	
	EXPENDITURE		•	Event Sponsorsh	ship					
	Complete ONLY if direct expenditure to benefit	Candidate/Office	eholder name		Office sought			Office held		
	C/OH									

#### SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 4/7 Rpt: 66/69 Middleton II, David M. (The Honorable) 00081727 Date Payee name 08/10/2023 Friendswood ISD Education Foundation Payee address; Amount (\$) City; State; Zip Code \$50.00 302 Laurel Dr Reimbursement from political contributions Х intended Friendswood, TX 77546 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE Event Ticket** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/21/2023 Galveston Regional Chamber of Commerce Amount (\$) Payee address; City; State; Zip Code \$1,500.00 2228 Mechanic St Suite 101 Reimbursement from political contributions Χ Galveston, TX 77550 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Event Sponsorship** Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 11/13/2023 Greater Angleton Chamber of Commerce Payee address: City; State; Zip Code Amount (\$) \$785.00 222 North Velasco Reimbursement from Χ political contributions intended Angleton, TX 77515 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Event Sponsorship** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 5/7 Rpt: 67/69 Middleton II, David M. (The Honorable) 00081727 Date Payee name 12/05/2023 Greater Angleton Chamber of Commerce Amount (\$) Payee address; City; State; Zip Code \$200.00 222 North Velasco Reimbursement from political contributions Х intended Angleton, TX 77515 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Event Sponsorship** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/25/2023 Greater Houston Council of Federated Republican Women Amount (\$) Payee address; City; State; Zip Code \$1,000.00 7941 Katy Freeway #272 Reimbursement from political contributions Χ Houston, TX 77024 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Event Sponsorship** Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 09/19/2023 La Porte Bayshore Chamber of Commerce Payee address; City; State; Zip Code Amount (\$) \$185.00 100 W Main Reimbursement from Χ political contributions intended La Porte, TX 77571 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Event Sponsorship** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE G

#### **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 Salaries/Mange/Control Labor

	Candidate/Officeholder/Politica Credit Card Payment	al Committee	Legal Services  The Instruction Guide explain		vages/Contract Labor mplete this form.		OTHER (enter a	a category not listed abov	ve)
1	Total pages Schedule G:	2 FILER NAM	E			3	Filer ID (E	Ethics Commission	Filers)
	Sch: 6/7 Rpt: 68/69	Middleton	II, David M. (The Honorabl	e)			00081727		
4	Date	5 Payee name	9						
	11/21/2023	Pasadena	Chamber of Commerce						
6	Amount (\$)	<b>7</b> Payee addre	ess; City; Sta	te; Zip Co	ode				
	\$360.00	4334 Fairn	nont Parkway						
	Reimbursement from								
	X political contributions intended	Pasadena,	TX 77504						
8	PURPOSE OF		See Categories listed at the top of this s	schedule)	(b) Description	=		side of Texas. Complete	
	EXPENDITURE	Advertising	j Expense		Check if Austin, TX, officeholder living expense				
					Event Sponsorsh	hip			
9	Complete ONLY if direct	L Candidate/Office	eholder name		Office sought		(	Office held	
	expenditure to benefit				· ·				
	C/OH								
	Date	Payee name	9						
	08/23/2023	Pearland C	Chamber of Commerce						
	Amount (\$)	Payee addre	ess; City; Sta	te; Zip Co	ode				
	\$500.00	6117 Broa	dway St						
	Reimbursement from								
	X political contributions intended	Pearland, <sup>-</sup>	TX 77581						
	PURPOSE	Category (	See Categories listed at the top of this s	chedule)	Description	Ch	eck if travel outs	side of Texas. Complete	Schedule T.
OF EXPENDITURE		Advertising	j Expense			Ch	eck if Austin, TX	(, officeholder living expe	nse
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		Candidate/Office	eholder name		Office sought		(	Office held	
	expenditure to benefit C/OH								
	Date	Davisa name							
	08/26/2023	Payee name	eand Parenting Support Co	enter					
_	Amount (\$)	Payee addre			udo.				
	\$10,000.00	714 7th Av	•	te; Zip Co	oue				
		/14 / til Av	e IV						
	X Reimbursement from political contributions intended	Texas City	, TX 77592						
	PURPOSE	Category (	See Categories listed at the top of this s	schedule)	Description	_		side of Texas. Complete	
	OF EXPENDITURE	Advertising	j Expense			Ch	eck if Austin, TX	K, officeholder living expe	nse
					Event Sponsorsh	hip			
		Candidate/Office	eholder name		Office sought			Office held	
	expenditure to benefit C/OH								
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#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 7/7 Rpt: 69/69 Middleton II, David M. (The Honorable) 00081727 Date Payee name 08/08/2023 **Unbound Now Houston** 6 Amount (\$) Payee address; City; State; Zip Code 4300 W Waco Dr \$1,554.72 Ste 2 Bldg B-244 Reimbursement from political contributions intended Х Waco, TX 76710 (a) Category (See Categories listed at the top of this schedule) **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Event Sponsorship** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH