

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID
(Ethics Commission Filers)
00080046

2 Total pages filed:
41

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR FIRST MI
The Honorable Jay

NICKNAME LAST SUFFIX
Dean

OFFICE USE ONLY

Date Received
ELECTRONICALLY FILED
01/16/2024

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE
3822 Holly Ridge

Change of Address

Longview, TX 75605

Date Hand-delivered or Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

5 CAMPAIGN
TREASURER
NAME

MS / MRS / MR FIRST MI
Greg R.

NICKNAME LAST SUFFIX
Peeler

6 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
3822 Holly Ridge

(Residence or Business)

Longview, TX 75605

7 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(903) 720-8460

8 REPORT
TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer
appointment (officeholder only)
 July 15 8th day before election Exceeded modified
reporting limit Final Report (Attach C/OH-FR)

9 PERIOD
COVERED

Month Day Year THROUGH Month Day Year
07/01/2023 12/31/2023

10 ELECTION

ELECTION DATE
Month Day Year
03/05/2024

ELECTION TYPE
 Primary Runoff Other
 General Special

11 OFFICE

OFFICE HELD (if any)
State Representative District 7

12 OFFICE SOUGHT (if known)

State Representative District 7

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2 of 41

| | |
|---|---|
| 13 C / OH NAME Dean, Jay (The Honorable) | 14 Filer ID (Ethics Commission Filers) 00080046 |
|---|---|

| | | |
|---|--|---|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | |
| | COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE NAME |
| | | COMMITTEE ADDRESS |
| | | COMMITTEE CAMPAIGN TREASURER NAME |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS |

| | | |
|--------------------------------|---|---------------|
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 112,698.64 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 380.33 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 111,591.94 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 114,224.63 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

 The Honorable Jay Dean
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

3 of 41

| | |
|---|---|
| 18 FILER NAME Dean, Jay (The Honorable) | 19 Filer ID (Ethics Commission Filers) 00080046 |
|---|---|

| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | SUBTOTAL AMOUNT |
|---|-----------------|
| 1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 89,970.00 |
| 2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 22,728.64 |
| 3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 85,138.33 |
| 6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ 26,453.61 |
| 7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ |
| 10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/14 Rpt: 4/41 |
| 2 FILER NAME Dean, Jay (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 12/01/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abernathy, Mark <hr/> 6 Contributor address; City; State; Zip Code Gladewater, TX 75693 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/13/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akin, Gordon <hr/> Contributor address; City; State; Zip Code Longview, TX 75605 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/13/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Barbara <hr/> Contributor address; City; State; Zip Code Longview, TX 75605 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 08/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen Boone Humphries Robinson LLP <hr/> Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/27/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen Boone Humphries Robinson LLP <hr/> Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/14 Rpt: 5/41 |
| 2 FILER NAME Dean, Jay (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 08/03/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ancira Strategic Partners LLP | 7 Amount of Contribution (\$) \$400.00 |
| 6 Contributor address; City; State; Zip Code Austin, TX 78701 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 12/08/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Fire Fighters PAC | Amount of Contribution (\$) \$3,000.00 |
| Contributor address; City; State; Zip Code Austin, TX 78752 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/30/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Craig | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Mount Pleasant, TX 75455 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boon, Mark | Amount of Contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code Longview, TX 75604 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/08/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Myrna | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Avinger, TX 75630 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/14 Rpt: 6/41 |
| 2 FILER NAME Dean, Jay (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 11/03/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bufkin, Thomas <hr/> 6 Contributor address; City; State; Zip Code Longview, TX 75604 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) Owner | | 9 Employer (See Instructions) Longview Truck Center |
| Date 12/26/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cammack, R. Blake <hr/> Contributor address; City; State; Zip Code Longview, TX 75605 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Funeral Director | | Employer (See Instructions) Self |
| Date 11/16/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CenterPoint Energy, Inc. Political Action Committee <hr/> Contributor address; City; State; Zip Code Houston, TX 77210 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/01/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clements, Mike <hr/> Contributor address; City; State; Zip Code White Oak, TX 75693 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) President | | Employer (See Instructions) Energy Weldfab |
| Date 09/24/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Congress Avenue Partners <hr/> Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/14 Rpt: 7/41 |
| 2 FILER NAME Dean, Jay (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 11/13/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crossland, Mike <hr/> 6 Contributor address; City; State; Zip Code Longview, TX 75604 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 10/13/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darby, John <hr/> Contributor address; City; State; Zip Code Longview , TX 75603 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/03/2023 | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00340455) Essential Utilities Inc PAC <hr/> Contributor address; City; State; Zip Code Bryn Mawr, PA 19010 | Amount of Contribution (\$) \$1,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/15/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, Charles <hr/> Contributor address; City; State; Zip Code Longview, TX 75605 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/01/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Folzenlogen, Paul <hr/> Contributor address; City; State; Zip Code Longview, TX 75605 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/14 Rpt: 8/41 |
| 2 FILER NAME Dean, Jay (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 11/03/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gary, Debbie 6 Contributor address; City; State; Zip Code Karnack, TX 75661 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/13/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gor, Henry Contributor address; City; State; Zip Code Longview, TX 75605 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/13/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guillory, Michael Contributor address; City; State; Zip Code Longview, TX 75601 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/08/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Jim (Dr.) Contributor address; City; State; Zip Code Marshall, TX 75672 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/13/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, David Contributor address; City; State; Zip Code Longview, TX 75605 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/14 Rpt: 9/41 |
| 2 FILER NAME Dean, Jay (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 12/01/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horaney, Betty <hr/> 6 Contributor address; City; State; Zip Code Longview, TX 75605 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/13/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston, David <hr/> Contributor address; City; State; Zip Code Longview, TX 75606 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/13/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurst, James <hr/> Contributor address; City; State; Zip Code Longview, TX 75601 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Pegues - Hurst Ford |
| Date 07/11/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Independent Bankers Association of Texas PAC (IBAT) <hr/> Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ishihara, Roy <hr/> Contributor address; City; State; Zip Code Longview, TX 75601 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/14 Rpt: 10/41 |
| 2 FILER NAME Dean, Jay (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 11/03/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyce, Joe <hr/> 6 Contributor address; City; State; Zip Code Longview, TX 75607 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) Owner | | 9 Employer (See Instructions) Joyce Crane, Inc |
| Date 11/13/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurenka, Ron <hr/> Contributor address; City; State; Zip Code Longview, TX 75605 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/13/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirk, John <hr/> Contributor address; City; State; Zip Code Longview, TX 75605 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) Self |
| Date 12/27/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LTW Services GP, LLC <hr/> Contributor address; City; State; Zip Code Kilgore, TX 75663 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Tommy <hr/> Contributor address; City; State; Zip Code Longview, TX 75606 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/14 Rpt: 11/41 |
| 2 FILER NAME Dean, Jay (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 11/03/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxey, Debbie <hr/> 6 Contributor address; City; State; Zip Code Longview, TX 75604 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Principal occupation / Job title (See Instructions) Owner | | 9 Employer (See Instructions) Jucy's |
| Date 11/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCaleb, Joe <hr/> Contributor address; City; State; Zip Code Longview, TX 75605 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/15/2023 | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00225342) McGuireWoods Federal PAC Fund <hr/> Contributor address; City; State; Zip Code Richmond, VA 23219 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morchat, Arthur <hr/> Contributor address; City; State; Zip Code Gladewater , TX 75647 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Stephen <hr/> Contributor address; City; State; Zip Code Longview, TX 75605 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/14 Rpt: 12/41 |
| 2 FILER NAME Dean, Jay (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 11/03/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moseley, Sam <hr/> 6 Contributor address; City; State; Zip Code Marshall, TX 75672 | 7 Amount of Contribution (\$) \$150.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newkirk, Charles <hr/> Contributor address; City; State; Zip Code Longview, TX 75606 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noblit, Roy <hr/> Contributor address; City; State; Zip Code Longview, TX 75605 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrymore, William <hr/> Contributor address; City; State; Zip Code Longview, TX 75604 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/18/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pope, Clay <hr/> Contributor address; City; State; Zip Code Austin, TX 78703 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/14 Rpt: 13/41 |
| 2 FILER NAME Dean, Jay (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 11/03/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Jack | 7 Amount of Contribution (\$) \$100.00 |
| 6 Contributor address; City; State; Zip Code Longview, TX 75601 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 08/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlueter Group | Amount of Contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code Austin, TX 78701 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/16/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherman, Carroll | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Longview, TX 75605 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/12/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Mickey | Amount of Contribution (\$) \$300.00 |
| Contributor address; City; State; Zip Code Kilgore, TX 75663 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/27/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Squier, John | Amount of Contribution (\$) \$20.00 |
| Contributor address; City; State; Zip Code Longview, TX 75605 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/14 Rpt: 14/41 |
| 2 FILER NAME Dean, Jay (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 12/08/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swofford, Donald | 7 Amount of Contribution (\$) \$50.00 |
| 6 Contributor address; City; State; Zip Code Marshall, TX 75672 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Thomas | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Longview, TX 75605 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 08/21/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC | Amount of Contribution (\$) \$40,000.00 |
| Contributor address; City; State; Zip Code Austin, TX 78701 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/27/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Building Branch - Associated General Contractors PAC | Amount of Contribution (\$) \$1,000.00 |
| Contributor address; City; State; Zip Code Austin, TX 78701 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/08/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Land Title Assoc PAC | Amount of Contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code Austin, TX 78703 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/14 Rpt: 15/41 |
| 2 FILER NAME Dean, Jay (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 12/26/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas REALTORS PAC (TREPAC) | 7 Amount of Contribution (\$) \$2,500.00 |
| | 6 Contributor address; City; State; Zip Code Austin, TX 78768 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 10/13/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Charles Butt Public Education PAC | Amount of Contribution (\$) \$10,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/13/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Linda | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Longview, TX 75605 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/01/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker III, William Rusty | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Longview, TX 75605 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) United Services Automobile Association Employee PAC | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78288 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 13/14 Rpt: 16/41 |
| 2 FILER NAME Dean, Jay (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 11/13/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderwal, Jan <hr/> 6 Contributor address; City; State; Zip Code Longview, TX 75605 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 10/24/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waste Management Employees Better Government Fund <hr/> Contributor address; City; State; Zip Code Washington, DC 20004 | Amount of Contribution (\$) \$2,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/08/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler M.D., Robert <hr/> Contributor address; City; State; Zip Code Longview, TX 75604 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/15/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whiteside, CH <hr/> Contributor address; City; State; Zip Code Kilgore, TX 75662 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 08/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wholesale Beer Distributors of Texas PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 14/14 Rpt: 17/41 |
| 2 FILER NAME Dean, Jay (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 11/03/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Matthew | 7 Amount of Contribution (\$) \$100.00 |
| 6 Contributor address; City; State; Zip Code Longview, TX 75604 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Paul | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Longview, TX 75605 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worley, Thomas | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Longview, TX 75608 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/13/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zeitlow, Terry | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code Longview, TX 75604 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|---|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 1/2 Rpt: 18/41 | |
| 2 FILER NAME Dean, Jay (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080046 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 10/31/2023 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Republicans of Texas Campaign Fund | 8 Amount of contribution (\$) \$3,054.39 | 9 In-kind contribution description Campaign Text Messaging |
| | 7 Contributor address; City; State; Zip Code Austin, TX 78701 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | 11 Employer (FOR NON-JUDICIAL) (See instructions) | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| Date 09/12/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Republicans of Texas Campaign Fund | Amount of contribution (\$) \$2,424.25 | In-kind contribution description Campaign Digital Advertising |
| | Contributor address; City; State; Zip Code Austin, TX 78701 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | Employer (FOR NON-JUDICIAL) (See instructions) | |
| Contributor's principal occupation (FOR JUDICIAL) | | Contributor's job title (FOR JUDICIAL) (See instructions) | |
| Contributor's employer/law firm (FOR JUDICIAL) | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| Date 10/03/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Republicans of Texas Campaign Fund | Amount of contribution (\$) \$2,000.00 | In-kind contribution description Campaign Digital Advertising |
| | Contributor address; City; State; Zip Code Austin, TX 78701 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | Employer (FOR NON-JUDICIAL) (See instructions) | |
| Contributor's principal occupation (FOR JUDICIAL) | | Contributor's job title (FOR JUDICIAL) (See instructions) | |
| Contributor's employer/law firm (FOR JUDICIAL) | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|---|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 2/2 Rpt: 19/41 | |
| 2 FILER NAME Dean, Jay (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00080046 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 12/13/2023 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC | 8 Amount of contribution (\$) \$15,250.00 | 9 In-kind contribution description Campaign Polling |
| | 7 Contributor address; City; State; Zip Code Austin, TX 78701 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | 11 Employer (FOR NON-JUDICIAL) (See instructions) | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 1/21 Rpt: 20/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 10/10/2023 | 5 Payee name AT&T | |
| 6 Amount (\$) \$164.71 | 7 Payee address; City; State; Zip Code 208 S Akard St Dallas, TX 75202 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense for Officeholder Austin Housing |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/02/2023 | Payee name AT&T | |
| Amount (\$) \$163.27 | Payee address; City; State; Zip Code 208 S Akard St Dallas, TX 75202 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense for Officeholder Austin Housing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/04/2023 | Payee name AT&T | |
| Amount (\$) \$55.53 | Payee address; City; State; Zip Code 208 S Akard St Dallas, TX 75202 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense for Officeholder Austin Housing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 2/21 Rpt: 21/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
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| 4 Date 10/18/2023 | 5 Payee name Anedot, Inc. |
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| 6 Amount (\$) \$64.68 | 7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 Baton Rouge, LA 70112 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees for Online Campaign Contributions: Oct 18 - Dec 27 |
|---------------------------------|---|---|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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| Date 10/17/2023 | Payee name Bamko |
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|---------------------------|---|
| Amount (\$) \$1,753.65 | Payee address; City; State; Zip Code 11620 Wilshire Blvd., Suite #610 Los Angeles, CA 90025 |
|---------------------------|---|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Production of Campaign Promotional Items |
|-------------------------------|--|--|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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| Date 08/02/2023 | Payee name Bardwell Ink, LLC |
|--------------------|---------------------------------|

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| Amount (\$) \$260.25 | Payee address; City; State; Zip Code 211 N Main St Gladewater, TX 75647 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Newspaper Advertisements |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 3/21 Rpt: 22/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 10/12/2023 | 5 Payee name Bardwell Ink, LLC | |
| 6 Amount (\$) \$260.25 | 7 Payee address; City; State; Zip Code 211 N Main St Gladewater, TX 75647 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Newspaper Advertisements |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/15/2023 | Payee name Boys & Girls Club of the Big Pines | |
| Amount (\$) \$1,000.00 | Payee address; City; State; Zip Code 1500 Positive Place Marshall, TX 75670 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charitable Contribution |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/04/2023 | Payee name Burgess, Jake | |
| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 5005 Fountain Lane Longview, TX 75604 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staffing for COH Event |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 4/21 Rpt: 23/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 07/03/2023 | 5 Payee name City of Austin Utilities | |
| 6 Amount (\$) \$97.99 | 7 Payee address; City; State; Zip Code PO Box 2267 Austin, TX 78783 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense for Officeholder Austin Housing |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/01/2023 | Payee name City of Austin Utilities | |
| Amount (\$) \$81.88 | Payee address; City; State; Zip Code PO Box 2267 Austin, TX 78783 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense for Officeholder Austin Housing |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/01/2023 | Payee name City of Austin Utilities | |
| Amount (\$) \$106.46 | Payee address; City; State; Zip Code PO Box 2267 Austin, TX 78783 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense for Officeholder Austin Housing |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 5/21 Rpt: 24/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 10/03/2023 | 5 Payee name City of Austin Utilities | |
| 6 Amount (\$) \$105.18 | 7 Payee address; City; State; Zip Code PO Box 2267 Austin, TX 78783 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense for Officeholder Austin Housing |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/31/2023 | Payee name City of Austin Utilities | |
| Amount (\$) \$83.49 | Payee address; City; State; Zip Code PO Box 2267 Austin, TX 78783 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense for Officeholder Austin Housing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/01/2023 | Payee name City of Austin Utilities | |
| Amount (\$) \$82.39 | Payee address; City; State; Zip Code PO Box 2267 Austin, TX 78783 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utility Expense for Officeholder Austin Housing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 6/21 Rpt: 25/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 07/03/2023 | 5 Payee name City of Longview | |
| 6 Amount (\$) \$500.00 | 7 Payee address; City; State; Zip Code 300 W. Cotton St Longview, TX 75601 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship of 4th of July Fireworks Event |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/25/2023 | Payee name East Cotton St Church of Christ | |
| Amount (\$) \$100.00 | Payee address; City; State; Zip Code 2015 East Cotton St Longview, TX 75602 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship of Anniversary Program |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/23/2023 | Payee name East Texas Baptist University | |
| Amount (\$) \$250.00 | Payee address; City; State; Zip Code One Tiger Dr Marshall, TX 75670 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charitable Contribution |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 7/21 Rpt: 26/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
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| 4 Date 11/13/2023 | 5 Payee name East Texas Baptist University |
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| 6 Amount (\$) \$750.00 | 7 Payee address; City; State; Zip Code One Tiger Dr Marshall, TX 75670 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Room Rental Fee for COH Event |
|---------------------------------|--|---|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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| Date 07/03/2023 | Payee name Ely Properties Management Company |
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|---------------------------|--|
| Amount (\$) \$3,008.22 | Payee address; City; State; Zip Code 2813 Rio Grande St Austin, TX 78705 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rental Expense for Officeholder Austin Housing |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 08/03/2023 | Payee name Ely Properties Management Company |
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| Amount (\$) \$3,011.91 | Payee address; City; State; Zip Code 2813 Rio Grande St Austin, TX 78705 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rental Expense for Officeholder Austin Housing |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 8/21 Rpt: 27/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
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| 4 Date 09/05/2023 | 5 Payee name Ely Properties Management Company |
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| 6 Amount (\$) \$2,999.98 | 7 Payee address; City; State; Zip Code 2813 Rio Grande St Austin, TX 78705 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rental Expense for Officeholder Austin Housing |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 10/03/2023 | Payee name Ely Properties Management Company |
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| Amount (\$) \$3,002.18 | Payee address; City; State; Zip Code 2813 Rio Grande St Austin, TX 78705 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rental Expense for Officeholder Austin Housing |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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|--------------------|---|
| Date 11/03/2023 | Payee name Ely Properties Management Company |
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| Amount (\$) \$2,981.34 | Payee address; City; State; Zip Code 2813 Rio Grande St Austin, TX 78705 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rental Expense for Officeholder Austin Housing |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 9/21 Rpt: 28/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
|---|--|--|

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| 4 Date 12/04/2023 | 5 Payee name Ely Properties Management Company |
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| 6 Amount (\$) \$2,982.29 | 7 Payee address; City; State; Zip Code 2813 Rio Grande St Austin, TX 78705 |
|------------------------------------|---|

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rental Expense for Officeholder Austin Housing |
|---------------------------------|---|---|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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|--------------------|-------------------------------|
| Date 09/21/2023 | Payee name Green Ad Agency |
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|-------------------------|---|
| Amount (\$) \$750.00 | Payee address; City; State; Zip Code PO Box 3644 Longview, TX 75606 |
|-------------------------|---|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design and Production of Campaign Advertisements |
|-------------------------------|--|--|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

| | |
|--------------------|-------------------------------|
| Date 11/03/2023 | Payee name Green Ad Agency |
|--------------------|-------------------------------|

| | |
|---------------------------|---|
| Amount (\$) \$2,284.56 | Payee address; City; State; Zip Code PO Box 3644 Longview, TX 75606 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design and Production of Campaign Advertisements |
|-------------------------------|--|--|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 10/21 Rpt: 29/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 12/19/2023 | 5 Payee name Harrison County Republican Women | |
| 6 Amount (\$) \$1,000.00 | 7 Payee address; City; State; Zip Code PO Box 865 Marshall, TX 75671 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Republican Women's Group |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/08/2023 | Payee name Hightower Clean | |
| Amount (\$) \$125.00 | Payee address; City; State; Zip Code 13201 Lamplight Village Ave Austin, TX 78727 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Cleaning Expense for Officeholder Austin Housing |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/16/2023 | Payee name Hightower Clean | |
| Amount (\$) \$125.00 | Payee address; City; State; Zip Code 13201 Lamplight Village Ave Austin, TX 78727 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Cleaning Expense for Officeholder Austin Housing |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 11/21 Rpt: 30/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 11/27/2023 | 5 Payee name Hightower Clean | |
| 6 Amount (\$) \$125.00 | 7 Payee address; City; State; Zip Code 13201 Lamplight Village Ave Austin, TX 78727 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Cleaning Expense for Officeholder Austin Housing |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/19/2023 | Payee name Hightower Clean | |
| Amount (\$) \$125.00 | Payee address; City; State; Zip Code 13201 Lamplight Village Ave Austin, TX 78727 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Cleaning Expense for Officeholder Austin Housing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/06/2023 | Payee name Hilton Garden Inn | |
| Amount (\$) \$1,340.81 | Payee address; City; State; Zip Code 905 E Hawkins Pkwy Longview, TX 75605 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Conference Room Rental Fee for COH Event |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 12/21 Rpt: 31/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 11/15/2023 | 5 Payee name Kilgore Area Chamber of Commerce | |
| 6 Amount (\$) \$150.00 | 7 Payee address; City; State; Zip Code 1108 North Kilgore St Kilgore, TX 75662 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH Chamber Membership Dues |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/03/2023 | Payee name Krewe of Hebe | |
| Amount (\$) \$1,000.00 | Payee address; City; State; Zip Code 308 Houston St Jefferson, TX 75657 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Sponsorship of 4th of July Event |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/15/2023 | Payee name Lamar Little League | |
| Amount (\$) \$1,000.00 | Payee address; City; State; Zip Code P.O. Box 1101 Richmond, TX 77469 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charitable Contribution |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 13/21 Rpt: 32/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 11/27/2023 | 5 Payee name Mpix | |
| 6 Amount (\$) \$544.10 | 7 Payee address; City; State; Zip Code 610 E Jefferson St Pittsburg, KS 66762 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of Campaign Materials |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/11/2023 | Payee name Mpix | |
| Amount (\$) \$59.61 | Payee address; City; State; Zip Code 610 E Jefferson St Pittsburg, KS 66762 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of Campaign Materials |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/27/2023 | Payee name Murphy Nasica & Associates | |
| Amount (\$) \$1,000.00 | Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: Sch: 14/21 Rpt: 33/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 08/30/2023 | 5 Payee name Murphy Nasica & Associates | |
| 6 Amount (\$) \$13,648.88 | 7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design, Data, Postage and Production for Campaign Mail Advertisements |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/31/2023 | Payee name Murphy Nasica & Associates | |
| Amount (\$) \$13,648.88 | Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design, Data, Postage and Production for Campaign Mail Advertisements |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/15/2023 | Payee name Murphy Nasica & Associates | |
| Amount (\$) \$343.59 | Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design and Production of Campaign Materials |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: Sch: 15/21 Rpt: 34/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 11/21/2023 | 5 Payee name Murphy Nasica & Associates | |
| 6 Amount (\$) \$4,330.00 | 7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Polling Expense |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/06/2023 | Payee name Murphy Nasica & Associates | |
| Amount (\$) \$5,000.00 | Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting and Research Expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/21/2023 | Payee name Murphy Nasica & Associates | |
| Amount (\$) \$1,832.24 | Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design and Production of Campaign Materials |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 16/21 Rpt: 35/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
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| | |
|-----------------------------|--|
| 4 Date 09/20/2023 | 5 Payee name National Write Your Congressman |
|-----------------------------|--|

| | |
|------------------------------------|---|
| 6 Amount (\$) \$1,110.00 | 7 Payee address; City; State; Zip Code 2435 N. Central Expressway, Ste. 300 Richardson, TX 75080 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH Subscription Expense |
|---------------------------------|---|--|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|--------------------------------------|
| Date 07/17/2023 | Payee name Ready Refresh - Nestle |
|--------------------|--------------------------------------|

| | |
|------------------------|---|
| Amount (\$) \$10.38 | Payee address; City; State; Zip Code PO Box 856680 Louisville, KY 40285 |
|------------------------|---|

| | | |
|-------------------------------|---|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Capitol Office |
|-------------------------------|---|---|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 08/16/2023 | Payee name Ready Refresh - Nestle |
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|------------------------|---|
| Amount (\$) \$10.38 | Payee address; City; State; Zip Code PO Box 856680 Louisville, KY 40285 |
|------------------------|---|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Capitol Office |
|-------------------------------|---|---|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 17/21 Rpt: 36/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 09/07/2023 | 5 Payee name Ready Refresh - Nestle | |
| 6 Amount (\$) \$65.63 | 7 Payee address; City; State; Zip Code PO Box 856680 Louisville, KY 40285 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Capitol Office |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/02/2023 | Payee name Ready Refresh - Nestle | |
| Amount (\$) \$186.40 | Payee address; City; State; Zip Code PO Box 856680 Louisville, KY 40285 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Capitol Office |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/06/2023 | Payee name Ready Refresh - Nestle | |
| Amount (\$) \$10.38 | Payee address; City; State; Zip Code PO Box 856680 Louisville, KY 40285 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Capitol Office |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 18/21 Rpt: 37/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 12/07/2023 | 5 Payee name Ready Refresh - Nestle | |
| 6 Amount (\$) \$10.38 | 7 Payee address; City; State; Zip Code PO Box 856680 Louisville, KY 40285 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Capitol Office |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/21/2023 | Payee name Republican Party of Texas | |
| Amount (\$) \$750.00 | Payee address; City; State; Zip Code PO Box 2206 Austin, TX 78768 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate Filing Fee for March 2024 Republican Primary |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/20/2023 | Payee name Republican Women of Gregg County | |
| Amount (\$) \$450.00 | Payee address; City; State; Zip Code PO Box 5 Longview, TX 75601 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Sponsorship of Veteran's Day Event |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 19/21 Rpt: 38/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
| 4 Date 11/24/2023 | 5 Payee name Sodexo | |
| 6 Amount (\$) \$2,499.69 | 7 Payee address; City; State; Zip Code 1 Tiger Dr Marshall, TX 75670 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Catering for COH Event |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/25/2023 | Payee name Texas Department of Transportation | |
| Amount (\$) \$2,077.44 | Payee address; City; State; Zip Code 10335 Golf Course Road Austin, TX 78719 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel Out of District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight to Attend to Officeholder Duties; Travel Within Texas |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/18/2023 | Payee name Texas Political Solutions, LLC | |
| Amount (\$) \$2,500.00 | Payee address; City; State; Zip Code PO Box 685201 Austin, TX 78768 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Legal Services | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Compliance Services |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 20/21 Rpt: 39/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
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|-----------------------------|--|
| 4 Date 08/11/2023 | 5 Payee name Texas Young Republicans |
|-----------------------------|--|

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| 6 Amount (\$) \$1,000.00 | 7 Payee address; City; State; Zip Code 2604 Bright Rock Ln Conroe, TX 77304 |
|------------------------------------|--|

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Sponsorship of YR Convention |
|---------------------------------|--|---|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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| Date 11/09/2023 | Payee name USPS |
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|------------------------|--|
| Amount (\$) \$99.00 | Payee address; City; State; Zip Code 201 E Methvin St Longview, TX 75601 |
|------------------------|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage for Campaign Mail |
|-------------------------------|---|---|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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|--------------------|--------------------|
| Date 11/30/2023 | Payee name USPS |
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| Amount (\$) \$330.00 | Payee address; City; State; Zip Code 201 E Methvin St Longview, TX 75601 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage for Campaign Mail |
|-------------------------------|---|---|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 21/21 Rpt: 40/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
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|-----------------------------|---|
| 4 Date 08/10/2023 | 5 Payee name UT Tyler Longview Center |
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|----------------------------------|--|
| 6 Amount (\$) \$350.00 | 7 Payee address; City; State; Zip Code 3201 N Eastman Rd Longview, TX 75605 |
|----------------------------------|--|

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Sponsorship of Fundraising Event |
|---------------------------------|--|---|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|----------------------------------|
| Date 12/22/2023 | Payee name Williamson, Sharon |
|--------------------|----------------------------------|

| | |
|-------------------------|---|
| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 3718 Bill Owens Parkway Longview, TX 75605 |
|-------------------------|---|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contract Labor |
|-------------------------------|--|---|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F2: Sch: 1/1 Rpt: 41/41 | 2 FILER NAME Dean, Jay (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00080046 |
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| 4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS | \$ |
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|-----------------------------|---|
| 5 Date 12/19/2023 | 6 Payee name Murphy Nasica & Associates |
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|------------------------------------|--|
| 7 Amount (\$) \$8,500.00 | 8 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767 |
|------------------------------------|--|

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| 9 TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political |
|------------------------------|--|

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| 10 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design and Placement of Digital Campaign Advertisements |
|----------------------------------|--|---|

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| 11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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|--------------------|--|
| Date 12/27/2023 | Payee name Murphy Nasica & Associates |
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|----------------------------|---|
| Amount (\$) \$17,953.61 | Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767 |
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| TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design, Data, Postage and Production for Campaign Mail Advertisements |
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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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