

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

|   |  |   |   |  |                              |
|---|--|---|---|--|------------------------------|
| <b>The C/OH Instruction Guide explains how to complete this form.</b>                               |  | <b>1 Filer ID</b><br>(Ethics Commission Filers)<br>00069502 | <b>2 Total pages filed:</b><br>44   |  |                              |
| <b>3 CANDIDATE / OFFICEHOLDER NAME</b>  | MS / MRS / MR<br>The Honorable   | FIRST<br>Dennis R.  | MI  | <b>OFFICE USE ONLY</b><br>Date Received<br><b>ELECTRONICALLY FILED</b><br>01/16/2024 |                              |
|   | NICKNAME   | LAST<br>Paul  | SUFFIX  |  |                              |
| <b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b><br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY;<br>626 1/2 Barringer Ln., Ste. E<br><br>Webster, TX 77598   |   | ZIP CODE  | Date Hand-delivered or Date Postmarked   |                              |
|   |  |   | Receipt #   | Amount   |                              |
|   |  |   | Date Processed  |  |                              |
|   |  |   | Date Imaged   |  |                              |
| <b>5 CAMPAIGN TREASURER NAME</b>  | MS / MRS / MR<br>Mr.   | FIRST<br>Larry M.   | MI  |  |                              |
|   | NICKNAME   | LAST<br>Hicks   | SUFFIX  |  |                              |
| <b>6 CAMPAIGN TREASURER ADDRESS</b><br><br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE);<br>10500 Northwest Freeway, Ste. 212<br><br>Houston, TX 77092   |   | APT / SUITE #;  | CITY; STATE; ZIP CODE  |                              |
|   |  |   | AREA CODE   | PHONE NUMBER EXTENSION<br>(713) 785-5515   |                              |
| <b>8 REPORT TYPE</b>  | <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)<br><input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR) |   |   |  |                              |
|   | <b>9 PERIOD COVERED</b><br>Month Day Year<br>07/01/2023  |   | THROUGH   |  | Month Day Year<br>12/31/2023 |
| <b>10 ELECTION</b>  | ELECTION DATE<br>Month Day Year  |   | ELECTION TYPE<br><input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |  |                              |
|   |  |   |   |  |                              |
| <b>11 OFFICE</b>  | OFFICE HELD (if any)<br>State Representative District 129  |   | <b>12 OFFICE SOUGHT (if known)</b><br>State Representative District 129   |  |                              |

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

2 of 44

**13 C / OH NAME** Paul, Dennis R. (The Honorable) **14 Filer ID** (Ethics Commission Filers)  
00069502

**15 NOTICE FROM POLITICAL COMMITTEE(S)**  
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

|   |                |                                      |
|---|----------------|--------------------------------------|
| <input type="checkbox"/> GENERAL<br><br><input type="checkbox"/> SPECIFIC | COMMITTEE TYPE | COMMITTEE NAME                       |
|   |                | COMMITTEE ADDRESS                    |
|   |                | COMMITTEE CAMPAIGN TREASURER NAME    |
|   |                | COMMITTEE CAMPAIGN TREASURER ADDRESS |

|                               |   |    |           |
|-------------------------------|---|----|-----------|
| <b>16 CONTRIBUTION TOTALS</b> | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00      |
|                               | 2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)   | \$ | 65,711.66 |
| EXPENDITURE TOTALS            | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES  | \$ | 0.00      |
|                               | 4. <b>TOTAL POLITICAL EXPENDITURES</b>  | \$ | 49,111.70 |
| CONTRIBUTION BALANCE          | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  | \$ | 20,739.78 |
| OUTSTANDING LOAN TOTALS       | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$ | 40,000.00 |

**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 Dennis R. Paul  
\_\_\_\_\_  
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**

|   |  |   |
|---|--|---|
| <b>18 FILER NAME</b><br>Paul, Dennis R. (The Honorable) |  | <b>19 Filer ID</b> (Ethics Commission Filers)<br>00069502 |
| <b>20 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE        |  | SUBTOTAL AMOUNT   |
| 1.  | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                      | \$ 65,711.66  |
| 2.  | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                                   | \$  |
| 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                   | \$ 49,111.70  |
| 6.  | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  | \$  |
| 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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 100.00   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>                |   | <b>1</b> Total pages Schedule A1:<br>Sch: 1/23 Rpt: 4/44 |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                          |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502 |
| <b>4</b> Date<br>10/30/2023   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Keffer, James L<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Eastland, TX 76448 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>EBAA Iron Sales |   | <b>9</b> Employer (See Instructions)<br>President        |
| Date<br>10/30/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Scanlon, Elisabeth<br><hr/> Contributor address; City; State; Zip Code<br><br>Kemah, TX 77565                   | Amount of Contribution (\$)<br><br>\$1,000.00            |
| Principal occupation / Job title (See Instructions)<br>Requested                |   | Employer (See Instructions)<br>Requested                 |
| Date<br>08/07/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bakko, Kevin<br><hr/> Contributor address; City; State; Zip Code<br><br>League City, TX 77573                   | Amount of Contribution (\$)<br><br>\$30.00               |
| Principal occupation / Job title (See Instructions)<br>Writer/Producer          |   | Employer (See Instructions)<br>Self                      |
| Date<br>08/07/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bakko, Sally<br><hr/> Contributor address; City; State; Zip Code<br><br>League City, TX 77573                   | Amount of Contribution (\$)<br><br>\$30.00               |
| Principal occupation / Job title (See Instructions)<br>Dir of Govt Relations    |   | Employer (See Instructions)<br>City of Galveston         |
| Date<br>09/05/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Beer Alliance of Texas<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701              | Amount of Contribution (\$)<br><br>\$1,000.00            |
| Principal occupation / Job title (See Instructions)                             |   | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>       |   | 1 Total pages Schedule A1:<br>Sch: 2/23 Rpt: 5/44 |
| 2 FILER NAME<br>Paul, Dennis R. (The Honorable)                        |   | 3 Filer ID (Ethics Commission Filers)<br>00069502 |
| 4 Date<br>07/05/2023   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bowen, Scott                          | 7 Amount of Contribution (\$)<br>\$250.00         |
|  | 6 Contributor address; City; State; Zip Code<br><br>Webster, TX 77598   |   |
| 8 Principal occupation / Job title (See Instructions)                  |   | 9 Employer (See Instructions)                     |
| Date<br>09/05/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Briggs, Mark                            | Amount of Contribution (\$)<br>\$5,000.00         |
|  | Contributor address; City; State; Zip Code<br><br>El Lago, TX 77586   |   |
| Principal occupation / Job title (See Instructions)<br>HPP Corporation |   | Employer (See Instructions)<br>General Manager    |
| Date<br>11/27/2023   | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00035675 )<br>Bristol Myers Squibb PAC | Amount of Contribution (\$)<br>\$500.00           |
|  | Contributor address; City; State; Zip Code<br><br>Washington, DC 20004  |   |
| Principal occupation / Job title (See Instructions)                    |   | Employer (See Instructions)                       |
| Date<br>10/23/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>CAMARATA, Joseph                        | Amount of Contribution (\$)<br>\$250.00           |
|  | Contributor address; City; State; Zip Code<br><br>LEAGUE CITY, TX 77573   |   |
| Principal occupation / Job title (See Instructions)<br>NA              |   | Employer (See Instructions)<br>NA                 |
| Date<br>11/27/2023   | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00384818 )<br>CVS Health PAC           | Amount of Contribution (\$)<br>\$1,500.00         |
|  | Contributor address; City; State; Zip Code<br><br>Waxhington, DC 20004  |   |
| Principal occupation / Job title (See Instructions)                    |   | Employer (See Instructions)                       |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>      |   | <b>1</b> Total pages Schedule A1:<br>Sch: 3/23 Rpt: 6/44 |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502 |
| <b>4</b> Date<br>12/06/2023   | <b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00384818 )<br>CVS Health PAC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Washington, DC 20004 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,500.00   |
| <b>8</b> Principal occupation / Job title (See Instructions)          |   | <b>9</b> Employer (See Instructions)                     |
| Date<br>09/06/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ching, Lina<br><hr/> Contributor address; City; State; Zip Code<br><br>katy, TX 77450   | Amount of Contribution (\$)<br><br>\$500.00              |
| Principal occupation / Job title (See Instructions)<br>Rheumatologist |   | Employer (See Instructions)<br>Lina M. Ching, MDPA       |
| Date<br>10/30/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cobb Fendley PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77040                                   | Amount of Contribution (\$)<br><br>\$1,000.00            |
| Principal occupation / Job title (See Instructions)                   |   | Employer (See Instructions)                              |
| Date<br>10/12/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cook, Ann and Kent<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77062                                 | Amount of Contribution (\$)<br><br>\$1,000.00            |
| Principal occupation / Job title (See Instructions)<br>Retired        |   | Employer (See Instructions)<br>Retired                   |
| Date<br>10/30/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>DEC PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77046  | Amount of Contribution (\$)<br><br>\$1,000.00            |
| Principal occupation / Job title (See Instructions)                   |   | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |   |
|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>      |  | <b>1</b> Total pages Schedule A1:<br>Sch: 4/23 Rpt: 7/44      |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502      |
| <b>4</b> Date<br>07/05/2023   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Denman, Mark<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Nassau Bay, TX 77058 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00           |
| <b>8</b> Principal occupation / Job title (See Instructions)          |  | <b>9</b> Employer (See Instructions)                          |
| Date<br>10/24/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Diegelamn, Thomas<br><hr/> Contributor address; City; State; Zip Code<br><br>Seabrook, TX 77586                | Amount of Contribution (\$)<br><br>\$300.00                   |
| Principal occupation / Job title (See Instructions)<br>Vice President |  | Employer (See Instructions)<br>Overhead Cameras Chapter, POCI |
| Date<br>10/24/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Duncavage, Thomas<br><hr/> Contributor address; City; State; Zip Code<br><br>League City, TX 77573             | Amount of Contribution (\$)<br><br>\$250.00                   |
| Principal occupation / Job title (See Instructions)<br>Commissioner   |  | Employer (See Instructions)<br>Office of the Governor         |
| Date<br>10/30/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>EHRA Engineering PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77042              | Amount of Contribution (\$)<br><br>\$500.00                   |
| Principal occupation / Job title (See Instructions)                   |  | Employer (See Instructions)                                   |
| Date<br>12/18/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Eli Lilly and Company PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Longmont, CO 80504        | Amount of Contribution (\$)<br><br>\$1,000.00                 |
| Principal occupation / Job title (See Instructions)                   |  | Employer (See Instructions)                                   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>     |  | <b>1</b> Total pages Schedule A1:<br>Sch: 5/23 Rpt: 8/44 |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)               |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502 |
| <b>4</b> Date<br>10/30/2023  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Employees of Ratheon Technologies Corporation PAC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Washington , DC 20004 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00   |
| <b>8</b> Principal occupation / Job title (See Instructions)         |  | <b>9</b> Employer (See Instructions)                     |
| Date<br>10/19/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Flanagin, John<br><hr/> Contributor address; City; State; Zip Code<br><br>Friendswood, TX 77546  | Amount of Contribution (\$)<br><br>\$150.00              |
| Principal occupation / Job title (See Instructions)<br>Retired       |  | Employer (See Instructions)<br>Retired                   |
| Date<br>10/30/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Flickenger, Fred<br><hr/> Contributor address; City; State; Zip Code<br><br>Kingwood , TX 77345  | Amount of Contribution (\$)<br><br>\$250.00              |
| Principal occupation / Job title (See Instructions)                  |  | Employer (See Instructions)                              |
| Date<br>08/26/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Flickinger, Fred<br><hr/> Contributor address; City; State; Zip Code<br><br>Kingwood, TX 77345   | Amount of Contribution (\$)<br><br>\$30.00               |
| Principal occupation / Job title (See Instructions)<br>Self Employed |  | Employer (See Instructions)<br>Flickinger Machine LLC    |
| Date<br>07/21/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Flynn, Josh<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77243   | Amount of Contribution (\$)<br><br>\$100.00              |
| Principal occupation / Job title (See Instructions)<br>Accounting    |  | Employer (See Instructions)<br>Associated Services       |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |   |
|--|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>           |  | <b>1</b> Total pages Schedule A1:<br>Sch: 6/23 Rpt: 9/44    |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                     |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502    |
| <b>4</b> Date<br>08/24/2023  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Flynn, Josh<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77243 | <b>7</b> Amount of Contribution (\$)<br><br>\$30.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Accounting |  | <b>9</b> Employer (See Instructions)<br>Associated Services |
| Date<br>10/06/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Germania Farm Mutual PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Brenham, TX 77834      | Amount of Contribution (\$)<br><br>\$1,000.00               |
| Principal occupation / Job title (See Instructions)                        |  | Employer (See Instructions)                                 |
| Date<br>10/30/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Goodman, Susan<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78732                 | Amount of Contribution (\$)<br><br>\$500.00                 |
| Principal occupation / Job title (See Instructions)                        |  | Employer (See Instructions)                                 |
| Date<br>10/30/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Gordon, Scott<br><hr/> Contributor address; City; State; Zip Code<br><br>Friendswood, TX 77549             | Amount of Contribution (\$)<br><br>\$750.00                 |
| Principal occupation / Job title (See Instructions)                        |  | Employer (See Instructions)                                 |
| Date<br>10/06/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Guitian, Deborah<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77059              | Amount of Contribution (\$)<br><br>\$250.00                 |
| Principal occupation / Job title (See Instructions)                        |  | Employer (See Instructions)                                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |   |
|--|--|---|
| <b>The Instruction Guide explains how to complete this form.</b> |  | <b>1</b> Total pages Schedule A1:<br>Sch: 7/23 Rpt: 10/44 |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)           |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502  |
| <b>4</b> Date<br>10/30/2023                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>HNTB Holdings Ltd PAC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Kansas City, MO 64105 | <b>7</b> Amount of Contribution (\$)<br><br>\$500.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)     |  | <b>9</b> Employer (See Instructions)                      |
| Date<br>10/30/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>HOME-PAC Texas Association of Builders<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701       | Amount of Contribution (\$)<br><br>\$1,000.00             |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                               |
| Date<br>10/30/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hamilton, David<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77024                             | Amount of Contribution (\$)<br><br>\$500.00               |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                               |
| Date<br>10/23/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hesse, Mark E<br><hr/> Contributor address; City; State; Zip Code<br><br>Nassau Bay, TX 77058                            | Amount of Contribution (\$)<br><br>\$100.00               |
| Principal occupation / Job title (See Instructions)<br>CPA       |  | Employer (See Instructions)<br>Mark E Hesse CPA           |
| Date<br>07/05/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hodges, Gary<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78414                         | Amount of Contribution (\$)<br><br>\$100.00               |
| Principal occupation / Job title (See Instructions)              |  | Employer (See Instructions)                               |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |   |
|--|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 8/23 Rpt: 11/44 |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                       |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502  |
| <b>4</b> Date<br>07/05/2023  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Holland, Edelmira                 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00      |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77034 |  |   |
| <b>8</b> Principal occupation / Job title (See Instructions)                 |  | <b>9</b> Employer (See Instructions)                      |
| Date<br>10/06/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Holland, Edelmira                          | Amount of Contribution (\$)<br><br>\$120.00               |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77034          |  |   |
| Principal occupation / Job title (See Instructions)                          |  | Employer (See Instructions)                               |
| Date<br>10/30/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hoover Slovacek LLP                        | Amount of Contribution (\$)<br><br>\$500.00               |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77210          |  |   |
| Principal occupation / Job title (See Instructions)                          |  | Employer (See Instructions)                               |
| Date<br>10/30/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Houston Associated General Contractors PAC | Amount of Contribution (\$)<br><br>\$1,500.00             |
| Contributor address; City; State; Zip Code<br><br>Houston , TX 77092         |  |   |
| Principal occupation / Job title (See Instructions)                          |  | Employer (See Instructions)                               |
| Date<br>10/06/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Houston Pilots PAC                         | Amount of Contribution (\$)<br><br>\$500.00               |
| Contributor address; City; State; Zip Code<br><br>Deer Park, TX 77536        |  |   |
| Principal occupation / Job title (See Instructions)                          |  | Employer (See Instructions)                               |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 9/23 Rpt: 12/44 |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502  |
| <b>4</b> Date<br>10/30/2023   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hu, Shouting<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Bellaire, TX 77401 | <b>7</b> Amount of Contribution (\$)<br><br>\$500.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)              |  | <b>9</b> Employer (See Instructions)                      |
| Date<br>09/16/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hucker, Rebecca<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584                | Amount of Contribution (\$)<br><br>\$30.00                |
| Principal occupation / Job title (See Instructions)<br>Outreach Associate |  | Employer (See Instructions)<br>Steinhauser Strategies     |
| Date<br>10/30/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>IDS Engineering Group PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77092       | Amount of Contribution (\$)<br><br>\$250.00               |
| Principal occupation / Job title (See Instructions)                       |  | Employer (See Instructions)                               |
| Date<br>10/30/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Janak, Larry F<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77094                  | Amount of Contribution (\$)<br><br>\$1,000.00             |
| Principal occupation / Job title (See Instructions)<br>President & CEO    |  | Employer (See Instructions)<br>IDCUS, Inc                 |
| Date<br>10/19/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Johnson, Don<br><hr/> Contributor address; City; State; Zip Code<br><br>Friendswood, TX 77546                | Amount of Contribution (\$)<br><br>\$60.00                |
| Principal occupation / Job title (See Instructions)<br>Retired            |  | Employer (See Instructions)<br>Retired                    |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                   |   | <b>1</b> Total pages Schedule A1:<br>Sch: 10/23 Rpt: 13/44 |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                             |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502   |
| <b>4</b> Date<br>10/30/2023  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Johnson, Gabriel | <b>7</b> Amount of Contribution (\$)<br>\$2,500.00         |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77095       |   |  |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Engineer/Principal |   | <b>9</b> Employer (See Instructions)<br>AIG Technologies   |
| Date<br>10/06/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Joiner, Carl              | Amount of Contribution (\$)<br>\$500.00                    |
| Contributor address; City; State; Zip Code<br><br>Kemah, TX 77565                  |   |  |
| Principal occupation / Job title (See Instructions)<br>Architect                   |   | Employer (See Instructions)<br>Joiner Architects           |
| Date<br>07/05/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Jones, Stephen            | Amount of Contribution (\$)<br>\$1,000.00                  |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77062                |   |  |
| Principal occupation / Job title (See Instructions)                                |   | Employer (See Instructions)                                |
| Date<br>10/24/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Kish, Jan                 | Amount of Contribution (\$)<br>\$145.00                    |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77059                |   |  |
| Principal occupation / Job title (See Instructions)<br>Realtor                     |   | Employer (See Instructions)<br>Tiger Realty                |
| Date<br>10/30/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>LANPAC                    | Amount of Contribution (\$)<br>\$1,000.00                  |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77042                |   |  |
| Principal occupation / Job title (See Instructions)                                |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 11/23 Rpt: 14/44 |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502   |
| <b>4</b> Date<br>10/24/2023   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lambert, Brian<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77089 | <b>7</b> Amount of Contribution (\$)<br><br>\$675.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Imports |   | <b>9</b> Employer (See Instructions)<br>Craine Worldwide   |
| Date<br>10/04/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lauzon, Elizabeth<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77062                | Amount of Contribution (\$)<br><br>\$60.00                 |
| Principal occupation / Job title (See Instructions)<br>Office Manager   |   | Employer (See Instructions)<br>PPI LLC                     |
| Date<br>10/24/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lauzon, Peter<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77062                    | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>VP               |   | Employer (See Instructions)<br>PPI LLC                     |
| Date<br>10/19/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lauzon, Peter<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77062                    | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>VP               |   | Employer (See Instructions)<br>PPI LLC                     |
| Date<br>10/30/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Liberty, Diana<br><hr/> Contributor address; City; State; Zip Code<br><br>El Lago, TX 77586                   | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)                     |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>         |  | <b>1</b> Total pages Schedule A1:<br>Sch: 12/23 Rpt: 15/44 |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502   |
| <b>4</b> Date<br>10/06/2023  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Locke Lord LLP<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75201 | <b>7</b> Amount of Contribution (\$)<br><br>\$500.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)             |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>08/25/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Mahroum, Eric<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77062                   | Amount of Contribution (\$)<br><br>\$500.00                |
| Principal occupation / Job title (See Instructions)<br>President         |  | Employer (See Instructions)<br>Mahroum Communications, LLC |
| Date<br>09/21/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Masters, Daniel<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77059                 | Amount of Contribution (\$)<br><br>\$30.00                 |
| Principal occupation / Job title (See Instructions)<br>Patent Agent      |  | Employer (See Instructions)<br>C. Tumey Law Group          |
| Date<br>10/18/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>McDonald, Dawn<br><hr/> Contributor address; City; State; Zip Code<br><br>houston, TX 77089                  | Amount of Contribution (\$)<br><br>\$30.00                 |
| Principal occupation / Job title (See Instructions)<br>District Director |  | Employer (See Instructions)<br>Dennis Paul                 |
| Date<br>10/24/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>McDonald, Dawn<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77089                  | Amount of Contribution (\$)<br><br>\$160.00                |
| Principal occupation / Job title (See Instructions)<br>District Director |  | Employer (See Instructions)<br>State of Texas              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                       |  | <b>1</b> Total pages Schedule A1:<br>Sch: 13/23 Rpt: 16/44    |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                                 |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502      |
| <b>4</b> Date<br>09/22/2023  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>McDonough, Ranney | <b>7</b> Amount of Contribution (\$) \$500.00                 |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Bellaire, TX 77401          |  |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>civil engineer         |  | <b>9</b> Employer (See Instructions)<br>McDonough Engineering |
| Date<br>08/31/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Mcdonald, Dawn             | Amount of Contribution (\$) \$500.00                          |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77089                    |  |   |
| Principal occupation / Job title (See Instructions)<br>Administrative / Office Support |  | Employer (See Instructions)<br>TX HD 129                      |
| Date<br>11/27/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Miller, D.F.               | Amount of Contribution (\$) \$441.66                          |
| Contributor address; City; State; Zip Code<br><br>Sugarland, TX 77479                  |  |   |
| Principal occupation / Job title (See Instructions)                                    |  | Employer (See Instructions)                                   |
| Date<br>10/02/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Miller, Mike               | Amount of Contribution (\$) \$500.00                          |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77059                    |  |   |
| Principal occupation / Job title (See Instructions)<br>Insurance                       |  | Employer (See Instructions)<br>State Farm                     |
| Date<br>10/04/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Moore, Ken                 | Amount of Contribution (\$) \$30.00                           |
| Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                   |  |   |
| Principal occupation / Job title (See Instructions)<br>retired                         |  | Employer (See Instructions)<br>n/a                            |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 14/23 Rpt: 17/44    |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502      |
| <b>4</b> Date<br>10/24/2023   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Moore, Kenneth<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581 | <b>7</b> Amount of Contribution (\$)<br><br>\$60.00           |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired |  | <b>9</b> Employer (See Instructions)<br>Retired               |
| Date<br>10/30/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>NRG Energy PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Princeton, NJ 18540                  | Amount of Contribution (\$)<br><br>\$1,000.00                 |
| Principal occupation / Job title (See Instructions)                     |  | Employer (See Instructions)                                   |
| Date<br>10/06/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Neih, Chiu<br><hr/> Contributor address; City; State; Zip Code<br><br>Seabrook, TX 77586                       | Amount of Contribution (\$)<br><br>\$500.00                   |
| Principal occupation / Job title (See Instructions)                     |  | Employer (See Instructions)                                   |
| Date<br>10/30/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Nylin, Roger E<br><hr/> Contributor address; City; State; Zip Code<br><br>El Lago, TX 77586                    | Amount of Contribution (\$)<br><br>\$100.00                   |
| Principal occupation / Job title (See Instructions)                     |  | Employer (See Instructions)                                   |
| Date<br>08/24/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Oldigs, Roger<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77059                     | Amount of Contribution (\$)<br><br>\$500.00                   |
| Principal occupation / Job title (See Instructions)<br>CFO              |  | Employer (See Instructions)<br>Freedom CNG & NOVUS Wood Group |

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**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>          |   | <b>1</b> Total pages Schedule A1:<br>Sch: 15/23 Rpt: 18/44 |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502   |
| <b>4</b> Date<br>09/08/2023   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Othon, Charles<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77041 | <b>7</b> Amount of Contribution (\$)<br><br>\$2,500.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>President |   | <b>9</b> Employer (See Instructions)<br>OTHON, Inc.        |
| Date<br>10/24/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Painter, Dale<br><hr/> Contributor address; City; State; Zip Code<br><br>Seabrook, TX 77586                   | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)<br>Retired            |   | Employer (See Instructions)<br>Retired                     |
| Date<br>10/12/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Painter, David<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77058                   | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired            |   | Employer (See Instructions)<br>Self                        |
| Date<br>10/30/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Pecan Spring Consulting LLC<br><hr/> Contributor address; City; State; Zip Code<br><br>Georgetown, TX 78628   | Amount of Contribution (\$)<br><br>\$250.00                |
| Principal occupation / Job title (See Instructions)                       |   | Employer (See Instructions)                                |
| Date<br>10/30/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Phelps, Kenneth<br><hr/> Contributor address; City; State; Zip Code<br><br>Pasadena, TX 77504                 | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>Requested          |   | Employer (See Instructions)<br>Requested                   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                     |   | <b>1</b> Total pages Schedule A1:<br>Sch: 16/23 Rpt: 19/44 |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                               |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502   |
| <b>4</b> Date<br>10/23/2023  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Phelps, Steve<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Pasadena, TX 77505 | <b>7</b> Amount of Contribution (\$)<br><br>\$300.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Attorney/Real Estate |   | <b>9</b> Employer (See Instructions)<br>Self Employed      |
| <b>Date</b><br>11/27/2023  | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Plante, Karen<br><hr/> <b>Contributor address; City; State; Zip Code</b><br><br>Houston, TX 77059      | <b>Amount of Contribution (\$)</b><br><br>\$30.00          |
| <b>Principal occupation / Job title (See Instructions)</b><br>                       |   | <b>Employer (See Instructions)</b><br>                     |
| <b>Date</b><br>09/14/2023  | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Plunkett, J.J.<br><hr/> <b>Contributor address; City; State; Zip Code</b><br><br>friendswood, TX 77546 | <b>Amount of Contribution (\$)</b><br><br>\$30.00          |
| <b>Principal occupation / Job title (See Instructions)</b><br>port agent             |   | <b>Employer (See Instructions)</b><br>houston pilots       |
| <b>Date</b><br>10/18/2023  | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Reams, Larry<br><hr/> <b>Contributor address; City; State; Zip Code</b><br><br>Houston, TX 77059       | <b>Amount of Contribution (\$)</b><br><br>\$60.00          |
| <b>Principal occupation / Job title (See Instructions)</b><br>Retired                |   | <b>Employer (See Instructions)</b><br>NA                   |
| <b>Date</b><br>10/30/2023  | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Reddish, Harold<br><hr/> <b>Contributor address; City; State; Zip Code</b><br><br>Sugarland, TX 77479  | <b>Amount of Contribution (\$)</b><br><br>\$500.00         |
| <b>Principal occupation / Job title (See Instructions)</b><br>Engineer               |   | <b>Employer (See Instructions)</b><br>Binkley and Barfield |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                    |  | <b>1</b> Total pages Schedule A1:<br>Sch: 17/23 Rpt: 20/44         |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                              |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502           |
| <b>4</b> Date<br>08/24/2023   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Risinger, Debra<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77059 | <b>7</b> Amount of Contribution (\$)<br><br>\$250.00               |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Fight Test Engineer |  | <b>9</b> Employer (See Instructions)<br>Cimarron Software Services |
| Date<br>07/23/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Robb, Marie and Chris<br><hr/> Contributor address; City; State; Zip Code<br><br>Galveston, TX 77554           | Amount of Contribution (\$)<br><br>\$250.00                        |
| Principal occupation / Job title (See Instructions)<br>Owner                        |  | Employer (See Instructions)<br>Retired                             |
| Date<br>07/05/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rodriguez, Victor<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77089                 | Amount of Contribution (\$)<br><br>\$100.00                        |
| Principal occupation / Job title (See Instructions)                                 |  | Employer (See Instructions)  |
| Date<br>10/18/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Royal, Glenn<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77058                      | Amount of Contribution (\$)<br><br>\$250.00                        |
| Principal occupation / Job title (See Instructions)<br>Investment Advisor           |  | Employer (See Instructions)<br>Royal Harbor Partners, LLC          |
| Date<br>10/30/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>San Jacinto Conservatives<br><hr/> Contributor address; City; State; Zip Code<br><br>Pasadena , TX 77505       | Amount of Contribution (\$)<br><br>\$250.00                        |
| Principal occupation / Job title (See Instructions)                                 |  | Employer (See Instructions)  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 18/23 Rpt: 21/44 |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502   |
| <b>4</b> Date<br>10/30/2023   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sass, Walter    | <b>7</b> Amount of Contribution (\$) \$250.00              |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Katy, TX 77450 |  |  |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Engineer  |  | <b>9</b> Employer (See Instructions)<br>Weisser            |
| Date<br>10/03/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Schnautz, Danny & Rhonda | Amount of Contribution (\$) \$1,000.00                     |
| Contributor address; City; State; Zip Code<br><br>PASADENA, TX 77508      |  |  |
| Principal occupation / Job title (See Instructions)<br>Manager            |  | Employer (See Instructions)<br>Clark                       |
| Date<br>08/24/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Schneider, Marc          | Amount of Contribution (\$) \$500.00                       |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77058       |  |  |
| Principal occupation / Job title (See Instructions)<br>Attorney           |  | Employer (See Instructions)<br>Waldron & Schneider         |
| Date<br>08/24/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sun, Adrienne            | Amount of Contribution (\$) \$250.00                       |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77058       |  |  |
| Principal occupation / Job title (See Instructions)<br>District Director  |  | Employer (See Instructions)<br>State Rep. Briscoe Cain     |
| Date<br>10/24/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Tacquard, Phyllis        | Amount of Contribution (\$) \$30.00                        |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77058       |  |  |
| Principal occupation / Job title (See Instructions)<br>Retired            |  | Employer (See Instructions)<br>Retired                     |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |  |
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| <b>The Instruction Guide explains how to complete this form.</b>                          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 19/23 Rpt: 22/44 |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502   |
| <b>4</b> Date<br>10/19/2023   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Tacquard, Phyllis<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77058   | <b>7</b> Amount of Contribution (\$)<br><br>\$30.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired                   |  | <b>9</b> Employer (See Instructions)<br>Retired            |
| Date<br>10/18/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Talton, Robert<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                       | Amount of Contribution (\$)<br><br>\$500.00                |
| Principal occupation / Job title (See Instructions)<br>Attorney                           |  | Employer (See Instructions)<br>Self                        |
| Date<br>07/05/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Teixeira, Charles<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77062                     | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)                                       |  | Employer (See Instructions)                                |
| Date<br>10/06/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Teter, Rex<br><hr/> Contributor address; City; State; Zip Code<br><br>Pasadena, TX 77503                           | Amount of Contribution (\$)<br><br>\$250.00                |
| Principal occupation / Job title (See Instructions)<br>First Christian Church of LaMarque |  | Employer (See Instructions)<br>Minister                    |
| Date<br>12/18/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas Association of Realtors PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78768-2246 | Amount of Contribution (\$)<br><br>\$2,500.00              |
| Principal occupation / Job title (See Instructions)                                       |  | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>            |   | <b>1</b> Total pages Schedule A1:<br>Sch: 20/23 Rpt: 23/44 |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                      |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502   |
| <b>4</b> Date<br>10/30/2023   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas Building Branch AGC PAC    | <b>7</b> Amount of Contribution (\$)<br>\$1,000.00         |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701 |   |  |
| <b>8</b> Principal occupation / Job title (See Instructions)                |   | <b>9</b> Employer (See Instructions)                       |
| Date<br>10/06/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas Construction Association PAC        | Amount of Contribution (\$)<br>\$500.00                    |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78701          |   |  |
| Principal occupation / Job title (See Instructions)                         |   | Employer (See Instructions)                                |
| Date<br>11/27/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas Cornerstone Credit Union League PAC | Amount of Contribution (\$)<br>\$1,000.00                  |
| Contributor address; City; State; Zip Code<br><br>Dallas, TX 75265          |   |  |
| Principal occupation / Job title (See Instructions)                         |   | Employer (See Instructions)                                |
| Date<br>10/06/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas State Farm Agents PAC               | Amount of Contribution (\$)<br>\$2,000.00                  |
| Contributor address; City; State; Zip Code<br><br>Lakeway , TX 78734        |   |  |
| Principal occupation / Job title (See Instructions)                         |   | Employer (See Instructions)                                |
| Date<br>11/27/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas State Farm Agents PAC               | Amount of Contribution (\$)<br>\$2,000.00                  |
| Contributor address; City; State; Zip Code<br><br>Lakeway , TX 78734        |   |  |
| Principal occupation / Job title (See Instructions)                         |   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>               |  | <b>1</b> Total pages Schedule A1:<br>Sch: 21/23 Rpt: 24/44 |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                         |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502   |
| <b>4</b> Date<br>10/06/2023  | <b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00142711 )<br>The Boeing Company PAC | <b>7</b> Amount of Contribution (\$) \$1,000.00            |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Arlington, VA 22202 |  |  |
| <b>8</b> Principal occupation / Job title (See Instructions)                   |  | <b>9</b> Employer (See Instructions)                       |
| Date<br>10/30/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Thurber , William Todd                         | Amount of Contribution (\$) \$500.00                       |
| Contributor address; City; State; Zip Code<br><br>Bellaire, TX 77401           |  |  |
| Principal occupation / Job title (See Instructions)                            |  | Employer (See Instructions)                                |
| Date<br>10/30/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Tiger Team Realty / DBA Jan Kish               | Amount of Contribution (\$) \$500.00                       |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77289            |  |  |
| Principal occupation / Job title (See Instructions)                            |  | Employer (See Instructions)                                |
| Date<br>07/21/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Tomlinson, Richard                             | Amount of Contribution (\$) \$1,000.00                     |
| Contributor address; City; State; Zip Code<br><br>Seabrook, TX 77586           |  |  |
| Principal occupation / Job title (See Instructions)<br>Engineer                |  | Employer (See Instructions)<br>Gulf Project Solutions      |
| Date<br>12/28/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>United Health Group                            | Amount of Contribution (\$) \$1,000.00                     |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78701             |  |  |
| Principal occupation / Job title (See Instructions)                            |  | Employer (See Instructions)                                |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 22/23 Rpt: 25/44                    |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502                      |
| <b>4</b> Date<br>07/20/2023   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Vanderbrink, Dawnell<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>La Porte, TX 77571 | <b>7</b> Amount of Contribution (\$) <span style="float:right">\$30.00</span> |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired |  | <b>9</b> Employer (See Instructions)<br>retired                               |
| Date<br>08/24/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Vanderbrink, Dawnell<br><hr/> Contributor address; City; State; Zip Code<br><br>La Porte, TX 77571                   | Amount of Contribution (\$) <span style="float:right">\$30.00</span>          |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)<br>N/A  |
| Date<br>07/20/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Vanderbrink, William<br><hr/> Contributor address; City; State; Zip Code<br><br>La Porte, TX 77571                   | Amount of Contribution (\$) <span style="float:right">\$30.00</span>          |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)<br>retired  |
| Date<br>08/24/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Vanderbrink, William<br><hr/> Contributor address; City; State; Zip Code<br><br>La Porte, TX 77571                   | Amount of Contribution (\$) <span style="float:right">\$30.00</span>          |
| Principal occupation / Job title (See Instructions)<br>retired          |  | Employer (See Instructions)<br>N/A  |
| Date<br>07/05/2023  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Waligura, Charles<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77581                      | Amount of Contribution (\$) <span style="float:right">\$50.00</span>          |
| Principal occupation / Job title (See Instructions)                     |  | Employer (See Instructions)   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                     |  | <b>1</b> Total pages Schedule A1:<br>Sch: 23/23 Rpt: 26/44 |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                               |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502   |
| <b>4</b> Date<br>10/18/2023  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Williamson, Danny<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77258 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Chiropractor         |  | <b>9</b> Employer (See Instructions)<br>Self               |
| Date<br>07/05/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Wilson, Andrea<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77058                      | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)                                  |  | Employer (See Instructions)                                |
| Date<br>09/22/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Winkler, Dennis<br><hr/> Contributor address; City; State; Zip Code<br><br>Spring, TX 77379                      | Amount of Contribution (\$)<br><br>\$250.00                |
| Principal occupation / Job title (See Instructions)<br>Public Relations Professional |  | Employer (See Instructions)<br>Self employed -Winkler      |
| Date<br>09/05/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Wong, Daniel<br><hr/> Contributor address; City; State; Zip Code<br><br>Missouri, TX 77459                       | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>President & CEO               |  | Employer (See Instructions)<br>Tolunay-Wong Engineers      |
| Date<br>09/10/2023   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Zeve, Matt<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77008                          | Amount of Contribution (\$)<br><br>\$500.00                |
| Principal occupation / Job title (See Instructions)<br>Civil Engineer                |  | Employer (See Instructions)<br>Gauge Engineering           |

# 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.

|          |  |   |  |               |   |
|----------|--|---|--|---------------|---|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 1/17 Rpt: 27/44 | <b>2</b>  | FILER NAME<br>Paul, Dennis R. (The Honorable)  | <b>3</b>      | Filer ID (Ethics Commission Filers)<br>00069502 |
| <b>4</b> | Date<br>08/30/2023                               | <b>5</b>  | Payee name<br>Abe's Cajun Market   |               |   |
| <b>6</b> | Amount (\$)<br>\$32.12                           | <b>7</b>  | Payee address; City; State; Zip Code<br>1080 Clear Lake Blvd<br><br>Houston, TX 77062  |               |   |
| <b>8</b> | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Meal            |               |   |
| <b>9</b> |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought | Office held                                     |
|          | Date<br>08/10/2023                               |   | Payee name<br>BARWPAC  |               |   |
|          | Amount (\$)<br>\$1,200.00                        |   | Payee address; City; State; Zip Code<br>C/O Debbie Roan<br>4106 Pine Blossom Trail<br>Houston, TX 77059  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>General Advertising      |               |   |
|          |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought | Office held                                     |
|          | Date<br>09/27/2023                               |   | Payee name<br>Bay Area Houston Economic Partnership  |               |   |
|          | Amount (\$)<br>\$300.00                          |   | Payee address; City; State; Zip Code<br>P.O. Box 58724<br>18045 Saturn Lane<br>Houston, TX 77258-8724  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Organization Sponsorship |               |   |
|          |  | 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.

|   |  |  |
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| <b>1</b> Total pages Schedule F1:<br>Sch: 2/17 Rpt: 28/44 | <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable) | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502 |
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|                             |  |
|-----------------------------|--|
| <b>4</b> Date<br>10/18/2023 | <b>5</b> Payee name<br>Bentch, Gregory |
|-----------------------------|--|

|                                    |   |
|------------------------------------|---|
| <b>6</b> Amount (\$)<br>\$1,134.68 | <b>7</b> Payee address; City; State; Zip Code<br>5809 Gloucester Ln<br><br>Austin, TX 78723 |
|------------------------------------|---|

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

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

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|--------------------|-------------------------------|
| Date<br>10/18/2023 | Payee name<br>Bentch, Gregory |
|--------------------|-------------------------------|

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| Amount (\$)<br>\$1,000.00 | Payee address; City; State; Zip Code<br>5809 Gloucester Ln<br><br>Austin, TX 78723 |
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| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outside Contract Services |
|-------------------------------|--|---|

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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<br>12/07/2023 | Payee name<br>Chick Fil A |
|--------------------|---------------------------|

|                        |  |
|------------------------|--|
| Amount (\$)<br>\$10.49 | Payee address; City; State; Zip Code<br>503 W Martin Luther King<br><br>Austin, TX 78701 |
|------------------------|--|

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

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| 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.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 3/17 Rpt: 29/44    | <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502   |
| <b>4</b> Date<br>07/27/2023                                  | <b>5</b> Payee name<br>Clear Lake Area Chamber of Commerce                                       |  |
| <b>6</b> Amount (\$)<br>\$350.00                             | <b>7</b> Payee address; City; State; Zip Code<br>1201 NASA Parkway<br><br>Houston, TX 77058      |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Organization Sponsorship     |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>09/27/2023   | Payee name<br>Clear Lake Area Chamber of Commerce  |  |
| Amount (\$)<br>\$289.00                                      | Payee address; City; State; Zip Code<br>1201 NASA Parkway<br><br>Houston, TX 77058               |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Organization Membership Dues |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>10/27/2023   | Payee name<br>Clear Lake Area Chamber of Commerce  |  |
| Amount (\$)<br>\$35.00                                       | Payee address; City; State; Zip Code<br>1201 NASA Parkway<br><br>Houston, TX 77058               |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meals & Entertainment        |
| 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.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 4/17 Rpt: 30/44 | <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable) | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502 |
|---|--|--|

|                             |  |
|-----------------------------|--|
| <b>4</b> Date<br>11/01/2023 | <b>5</b> Payee name<br>Clear Lake Area Chamber of Commerce |
|-----------------------------|--|

|                                 |   |
|---------------------------------|---|
| <b>6</b> Amount (\$)<br>\$70.00 | <b>7</b> Payee address; City; State; Zip Code<br>1201 NASA Parkway<br><br>Houston, TX 77058 |
|---------------------------------|---|

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

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

|                    |                                |
|--------------------|--------------------------------|
| Date<br>08/18/2023 | Payee name<br>Constant Contact |
|--------------------|--------------------------------|

|                         |  |
|-------------------------|--|
| Amount (\$)<br>\$234.52 | Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 12451 |
|-------------------------|--|

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

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

|                    |                                |
|--------------------|--------------------------------|
| Date<br>09/18/2023 | Payee name<br>Constant Contact |
|--------------------|--------------------------------|

|                         |  |
|-------------------------|--|
| Amount (\$)<br>\$117.26 | Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 12451 |
|-------------------------|--|

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

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| 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.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 5/17 Rpt: 31/44           | <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502  |
| <b>4</b> Date<br>10/18/2023   | <b>5</b> Payee name<br>Constant Contact  |   |
| <b>6</b> Amount (\$)<br>\$117.26                                    | <b>7</b> Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 12451    |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>E-Mail Service          |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>11/22/2023  | Payee name<br>Constant Contact   |   |
| Amount (\$)<br>\$117.26   | Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 12451             |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign E-Mail Service |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>12/22/2023  | Payee name<br>Constant Contact   |   |
| Amount (\$)<br>\$117.26   | Payee address; City; State; Zip Code<br>1601 Trapelo Road<br><br>Waltham, MA 12451             |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign E-Mail Service |
| 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.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 6/17 Rpt: 32/44           | <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502   |
| <b>4</b> Date<br>11/11/2023   | <b>5</b> Payee name<br>Harris County Republican Primary   |  |
| <b>6</b> Amount (\$)<br>\$750.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>8588 Katy Freeway Suite 445<br><br>Houston, TX 77024 |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                       | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Filing Fees               |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>07/27/2023  | Payee name<br>La Porte - Bayshore Chamber of Commerce   |  |
| Amount (\$)<br>\$250.00   | Payee address; City; State; Zip Code<br>P.O. Box 996<br><br>La Porte, TX 77572-0996                   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense        | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Organization Sponsorship           |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>07/08/2023  | Payee name<br>Larry M. Hicks CPA  |  |
| Amount (\$)<br>\$1,315.50   | Payee address; City; State; Zip Code<br>10500 Northwest Freeway, Suite 212<br><br>Houston, TX 77092   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking         | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Accounting and Compliance Services |
| 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.

|          |  |   |   |               |   |
|----------|--|---|---|---------------|---|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 7/17 Rpt: 33/44 | <b>2</b>  | FILER NAME<br>Paul, Dennis R. (The Honorable)   | <b>3</b>      | Filer ID (Ethics Commission Filers)<br>00069502 |
| <b>4</b> | Date<br>10/09/2023                               | <b>5</b>  | Payee name<br>Larry M. Hicks CPA  |               |   |
| <b>6</b> | Amount (\$)<br>\$1,115.00                        | <b>7</b>  | Payee address; City; State; Zip Code<br>10500 Northwest Freeway, Suite 212<br><br>Houston, TX 77092   |               |   |
| <b>8</b> | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking             | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Accounting Fees                 |               |   |
| <b>9</b> |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>09/18/2023                               |   | Payee name<br>Little Rock Marriott  |               |   |
|          | Amount (\$)<br>\$667.76                          |   | Payee address; City; State; Zip Code<br>3 Statehouse Plaza<br><br>Little Rock, AR 72201   |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Conference, Convention, Meeting |               |   |
|          |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>10/26/2023                               |   | Payee name<br>PF Chang's  |               |   |
|          | Amount (\$)<br>\$33.69                           |   | Payee address; City; State; Zip Code<br>201 San Jacinto Blvd<br><br>Austin, TX 78701  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meals                           |               |   |
|          |  | 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.

|          |  |   |   |          |   |
|----------|--|---|---|----------|---|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 8/17 Rpt: 34/44 | <b>2</b>  | FILER NAME<br>Paul, Dennis R. (The Honorable)   | <b>3</b> | Filer ID (Ethics Commission Filers)<br>00069502 |
| <b>4</b> | Date<br>11/29/2023                               | <b>5</b>  | Payee name<br>PF Chang's  |          |   |
| <b>6</b> | Amount (\$)<br>\$78.25                           | <b>7</b>  | Payee address; City; State; Zip Code<br>201 San Jacinto Blvd<br><br>Austin, TX 78701  |          |   |
| <b>8</b> | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                      | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Meals  |          |   |
| <b>9</b> |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held   |   |          |   |
|          | Date<br>09/14/2023                               |   | Payee name<br>Parking   |          |   |
|          | Amount (\$)<br>\$10.60                           |   | Payee address; City; State; Zip Code<br>Requested<br><br>Little Rock, AR 72201  |          |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Transportation Equipment & Related Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Parking & Tolls |          |   |
|          |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held   |   |          |   |
|          | Date<br>09/18/2023                               |   | Payee name<br>Parking   |          |   |
|          | Amount (\$)<br>\$6.65                            |   | Payee address; City; State; Zip Code<br>Requested<br><br>Little Rock, AR 72201  |          |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                    | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Transportation Equipment & Related Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Parking & Tolls |          |   |
|          |  | Complete <u>ONLY</u> if direct expenditure to benefit C/OH<br>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.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 9/17 Rpt: 35/44           | <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)                                   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502   |
| <b>4</b> Date<br>10/20/2023   | <b>5</b> Payee name<br>Pearland Chamber of Commerce                                      |  |
| <b>6</b> Amount (\$)<br>\$450.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>6117 Broadway<br><br>Pearland, TX 77581 |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees          | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Organization Membership Dues         |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>07/05/2023  | Payee name<br>Piryx  |  |
| Amount (\$)<br>\$103.52   | Payee address; City; State; Zip Code<br>955 Market Street<br><br>San Francisco, CA 94103 |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees          | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Credit card processing fees          |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>07/25/2023  | Payee name<br>Piryx  |  |
| Amount (\$)<br>\$3.46   | Payee address; City; State; Zip Code<br>955 Market Street<br><br>San Francisco, CA 94103 |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees          | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Credit card processing fees |
| 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.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 10/17 Rpt: 36/44          | <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502   |
| <b>4</b> Date<br>07/26/2023   | <b>5</b> Payee name<br>Piryx  |  |
| <b>6</b> Amount (\$)<br>\$77.63                                     | <b>7</b> Payee address; City; State; Zip Code<br>955 Market Street<br><br>San Francisco, CA 94103 |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Credit card processing fees |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought                      Office held   |
| Date<br>08/11/2023  | Payee name<br>Piryx   |  |
| Amount (\$)<br>\$3.46   | Payee address; City; State; Zip Code<br>955 Market Street<br><br>San Francisco, CA 94103          |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Credit card processing fees          |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought                      Office held   |
| Date<br>08/31/2023  | Payee name<br>Piryx   |  |
| Amount (\$)<br>\$91.45  | Payee address; City; State; Zip Code<br>955 Market Street<br><br>San Francisco, CA 94103          |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Credit card processing fees          |
| 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.

|   |   |   |  |
|---|---|---|--|
| <b>1</b>  | Total pages Schedule F1:<br>Sch: 11/17 Rpt: 37/44 | <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502   |
| <b>4</b>  | Date<br>10/30/2023                                | <b>5</b> Payee name<br>Piryx  |  |
| <b>6</b>  | Amount (\$)<br>\$429.57                           | <b>7</b> Payee address; City; State; Zip Code<br>955 Market Street<br><br>San Francisco, CA 94103         |  |
| <b>8</b>  | <b>PURPOSE OF EXPENDITURE</b>                     | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Fees                           | <b>(b) Description</b><br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Credit card processing fees  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |   |  |
|   | Candidate/Officeholder name                       | Office sought   | Office held  |
| <b>4</b>  | Date<br>10/11/2023                                | <b>5</b> Payee name<br>Randy's Smokehouse   |  |
| <b>6</b>  | Amount (\$)<br>\$2,922.75                         | <b>7</b> Payee address; City; State; Zip Code<br>15104 Highway 3<br><br>Houston, TX 77598                 |  |
| <b>8</b>  | <b>PURPOSE OF EXPENDITURE</b>                     | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b) Description</b><br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Supplies                     |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |   |  |
|   | Candidate/Officeholder name                       | Office sought   | Office held  |
| <b>4</b>  | Date<br>08/02/2023                                | <b>5</b> Payee name<br>Rotary Club of Space   |  |
| <b>6</b>  | Amount (\$)<br>\$945.00                           | <b>7</b> Payee address; City; State; Zip Code<br>1218 Bob White Drive<br><br>Friendswood, TX 77546        |  |
| <b>8</b>  | <b>PURPOSE OF EXPENDITURE</b>                     | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Fees                           | <b>(b) Description</b><br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Organization Membership Dues |
| <b>9</b> 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.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 12/17 Rpt: 38/44 | <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable) | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502 |
|--|--|--|

|                             |                                       |
|-----------------------------|---------------------------------------|
| <b>4</b> Date<br>10/31/2023 | <b>5</b> Payee name<br>SGL Consulting |
|-----------------------------|---------------------------------------|

|                                    |   |
|------------------------------------|---|
| <b>6</b> Amount (\$)<br>\$6,155.00 | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 591015<br><br>Houston, TX 77259 |
|------------------------------------|---|

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

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

|                    |                              |
|--------------------|------------------------------|
| Date<br>10/31/2023 | Payee name<br>SGL Consulting |
|--------------------|------------------------------|

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| Amount (\$)<br>\$325.00 | Payee address; City; State; Zip Code<br>PO Box 591015<br><br>Houston, TX 77259 |
|-------------------------|--|

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

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

|                    |                              |
|--------------------|------------------------------|
| Date<br>10/31/2023 | Payee name<br>SGL Consulting |
|--------------------|------------------------------|

|                         |  |
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| Amount (\$)<br>\$474.11 | Payee address; City; State; Zip Code<br>PO Box 591015<br><br>Houston, TX 77259 |
|-------------------------|--|

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

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| 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.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 13/17 Rpt: 39/44 | <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable) | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502 |
|--|--|--|

|                             |   |
|-----------------------------|---|
| <b>4</b> Date<br>10/18/2023 | <b>5</b> Payee name<br>South Belt-Ellington Chamber of Commerce |
|-----------------------------|---|

|                                  |   |
|----------------------------------|---|
| <b>6</b> Amount (\$)<br>\$500.00 | <b>7</b> Payee address; City; State; Zip Code<br>10500 Scarsdale<br><br>Houston, TX 77089 |
|----------------------------------|---|

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

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

|                    |   |
|--------------------|---|
| Date<br>10/18/2023 | Payee name<br>South Belt-Ellington Leader |
|--------------------|---|

|                         |   |
|-------------------------|---|
| Amount (\$)<br>\$850.00 | Payee address; City; State; Zip Code<br>11555 Beamer<br><br>Houston, TX 77089 |
|-------------------------|---|

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

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

|                    |  |
|--------------------|--|
| Date<br>09/29/2023 | Payee name<br>TDCJ Manufacturing and Logistics |
|--------------------|--|

|                           |  |
|---------------------------|--|
| Amount (\$)<br>\$1,420.24 | Payee address; City; State; Zip Code<br>Attn: Employee Sales<br>P.O. Box 4013<br>Huntsville, TX 77342-4013 |
|---------------------------|--|

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

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 14/17 Rpt: 40/44   | <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502   |
| <b>4</b> Date<br>11/08/2023                                  | <b>5</b> Payee name<br>TDCJ Manufacturing and Logistics   |  |
| <b>6</b> Amount (\$)<br>\$90.45                              | <b>7</b> Payee address; City; State; Zip Code<br>Attn: Employee Sales<br>P.O. Box 4013<br>Huntsville, TX 77342-4013 |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense         | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Promotion Materials |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>11/18/2023   | Payee name<br>TDCJ Manufacturing and Logistics  |  |
| Amount (\$)<br>\$784.42                                      | Payee address; City; State; Zip Code<br>Attn: Employee Sales<br>P.O. Box 4013<br>Huntsville, TX 77342-4013          |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense         | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Auction Item        |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>11/22/2023   | Payee name<br>TDCJ Manufacturing and Logistics  |  |
| Amount (\$)<br>\$440.00                                      | Payee address; City; State; Zip Code<br>Attn: Employee Sales<br>P.O. Box 4013<br>Huntsville, TX 77342-4013          |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense         | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Auction Item        |
| 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.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 15/17 Rpt: 41/44 | <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable) | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502 |
|--|--|--|

|                             |   |
|-----------------------------|---|
| <b>4</b> Date<br>08/15/2023 | <b>5</b> Payee name<br>Texas Federation of Republican Women |
|-----------------------------|---|

|                                  |   |
|----------------------------------|---|
| <b>6</b> Amount (\$)<br>\$925.00 | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 171146<br><br>Austin, TX 78717-0041 |
|----------------------------------|---|

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

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

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|--------------------|----------------------------------|
| Date<br>08/10/2023 | Payee name<br>The Energy Council |
|--------------------|----------------------------------|

|                         |   |
|-------------------------|---|
| Amount (\$)<br>\$395.00 | Payee address; City; State; Zip Code<br>13760 Noel Road, Suite 1160<br><br>Dallas, TX 75240 |
|-------------------------|---|

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

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

|                    |                                |
|--------------------|--------------------------------|
| Date<br>11/03/2023 | Payee name<br>The Roaring Fork |
|--------------------|--------------------------------|

|                         |  |
|-------------------------|--|
| Amount (\$)<br>\$139.08 | Payee address; City; State; Zip Code<br>701 Congress<br><br>Austin, TX 78701 |
|-------------------------|--|

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

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| 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                        | 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 -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

|  |  |   |
|--|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 16/17 Rpt: 42/44   | <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502  |
| <b>4</b> Date<br>08/15/2023                                  | <b>5</b> Payee name<br>The Yates Company   |   |
| <b>6</b> Amount (\$)<br>\$2,000.00                           | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 75190<br><br>Houston, TX 77234         |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Consulting |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/31/2023   | Payee name<br>The Yates Company  |   |
| Amount (\$)<br>\$3,000.00                                    | Payee address; City; State; Zip Code<br>PO Box 75190<br><br>Houston, TX 77234                  |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Consulting |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>12/08/2023   | Payee name<br>The Yates Company  |   |
| Amount (\$)<br>\$14,851.09                                   | Payee address; City; State; Zip Code<br>PO Box 75190<br><br>Houston, TX 77234                  |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>General Advertising |
| 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.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 17/17 Rpt: 43/44 | <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable) | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502 |
|--|--|--|

|                             |  |
|-----------------------------|--|
| <b>4</b> Date<br>12/08/2023 | <b>5</b> Payee name<br>The Yates Company |
|-----------------------------|--|

|                                    |  |
|------------------------------------|--|
| <b>6</b> Amount (\$)<br>\$1,000.00 | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 75190<br><br>Houston, TX 77234 |
|------------------------------------|--|

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

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

|                    |                                 |
|--------------------|---------------------------------|
| Date<br>12/29/2023 | Payee name<br>US Postal Service |
|--------------------|---------------------------------|

|                        |  |
|------------------------|--|
| Amount (\$)<br>\$66.00 | Payee address; City; State; Zip Code<br>17077 N Texas Ave<br><br>Webster, TX 77598 |
|------------------------|--|

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

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

|                    |                                 |
|--------------------|---------------------------------|
| Date<br>12/04/2023 | Payee name<br>Westin Scottsdale |
|--------------------|---------------------------------|

|                           |   |
|---------------------------|---|
| Amount (\$)<br>\$1,317.17 | Payee address; City; State; Zip Code<br>6902 E Greenway Parkway<br><br>Scottsdale, AZ 85254 |
|---------------------------|---|

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

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

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

SCHEDULE K

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b> |   | <b>1</b> Total pages Schedule K:<br>Sch: 1/1 Rpt: 44/44                    |
| <b>2</b> FILER NAME<br>Paul, Dennis R. (The Honorable)           |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00069502                   |
| <b>4</b> Date<br>12/06/2023                                      | <b>5</b> Name of person from whom amount is received<br>City of Webster                                 | <b>8</b> Amount (\$)<br>\$100.00   |
|  | <b>6</b> Address of person from whom amount is received; City; State; Zip Code<br><br>Webster, TX 77598 |  |
|  | <b>7</b> Purpose for which amount is received<br>Deposit Refund   | <input type="checkbox"/> Check if political contribution returned to filer |