CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple	ete this form.	1 Filer ID (Ethics Commi 00067818		2 Total pages fil	led: 25
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE (USE ONLY
OFFICEHOLDER NAME	The Honorable	Travis P.			Date Received ELECTRONIC	ALLY FILED
	NICKNAME	LAST Clardy		SUFFIX	01/16/2024	
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered o	r Date Postmarked
OFFICEHOLDER MAILING ADDRESS	209 E. Main St.				Receipt #	Amount
Change of Address	Nacogdoches, TX 75961					
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	-	
TREASURER NAME	Mr.	James D.				
	NICKNAME	LAST		SUFFIX		
	Jimmy	Mize				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP ⁻	r / SUITE #; CITY	r; STA	ATE; ZIP CODE
TREASURER ADDRESS	820 Texas Street	,				
(Residence or Business)	Nacogdoches, TX 75961					
7 CAMPAIGN TREASURER PHONE	AREA CODE PHON (936) 645-1220	E NUMBER E	EXTENSION			
8 REPORT TYPE	X January 15	30th day before	election	Runoff	15th day after ca appointment (offi	
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Atta	ach C/OH-FR)
9 PERIOD COVERED	Month Day Year			Month Day		
COVERED	07/01/2023	TH	IROUGH	12/31/20)23	
10 ELECTION	ELECTION DATE			ELECTION TYPE	П ан	
	Month Day Year 03/05/2024	XIP	rimary	Runoff	Other	
	03/03/2024	G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGH	IT (if known)	
	State Representative Distr	ict 11		State Represer	ntative District 11	
	•			•		
		GO Т	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 125

13 C / OH NAME	14 Filer ID (E 00067818	Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without in difficeholders are required to report this information	the candidate's or officel	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Texas Alliance for Life PAC		
		COMMITTEE ADDRESS		
	SPECIFIC	8000 Centre Park Drive Suite 380		
		Austin, TX 78754		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Shaw, James		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
		4505 Corazon CV		
		Round Rock, TX 78681		
16 CONTRIBUTION TOTALS	N PLEDGES, LOANS, CTRONICALLY)	\$ 0.00		
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 134,670.52
EXPENDITURE TOTALS		\$ 845.08		
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 113,673.73
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 138,063.21
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		The Hono	orable Travis P. Clardy	J.
			Candidate or Officehold	
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to co	ertify which, witness my hand and seal of office.		
Signature of offi	cer administering	Printed name of officer administering	Title of officer	administering oath
2.9	9		3. 3301	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

3 of 125

					0 01 120
18 FIL	ER NAN	1E	19 Filer ID	(Eth	ics Commission Filers)
Cla	ardy, Tr	avis P. (The Honorable)	00067818		
I		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	134,420.52
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	250.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	90,956.27
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	22,717.46
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/33 Rpt: 4/125	
2	FILER NAME Clardy, Travi	s P. (The Honorable)		3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 12/15/2023	 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$500.00
Ω	Principal occu	Austin, TX 76731 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Fillicipal occu	Sation 7 300 title (See Instructions)	Employer (See instructions	')		
	Date 10/06/2023	Full name of contributor out-of-state PAC (ID#: Abbott, Judy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
		Nacogdoches, TX 75965	5 1 (0 1 : "	Ĺ		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
		Nacogdoches, TX 75961				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	·)		
	Date 09/15/2023	Full name of contributor out-of-state PAC (ID#:_Allen Boone Humphries Robinson LLP Contributor address; City; State; Zip Code Houston, TX 77027			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2023	Full name of contributor out-of-state PAC (ID#:_Ashcraft, Charlotte Gibson Contributor address; City; State; Zip Code Nacogdoches, TX 75963			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	NC	IS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to complete this t	or	m.	1	Total pages Schedule A1: Sch: 2/33 Rpt: 5/125	
2	FILER NAME Clardy, Travi	s P. (The Honorable)			3	Filer ID (Ethics Commission 00067818	on Filers)
4		 Full name of contributor out-of-state PAC (ID#: Badders, Jeffery & Mariko Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$750.00
8	Principal occur	Nacogdoches, TX 75964 pation / Job title (See Instructions)	۱۵	Employer (See Instructions	·/-		
0	Attorney	pation / Job title (See Instructions)	9	Badders Law Firm	·)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (ID#:_ Bartlett, Steven or Cheryl Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
	Deinainal assu	Nacogdoches, TX 75964	_	Franksian (Caa kastuustians	<u></u>		
	City Enginee	pation / Job title (See Instructions) r		Employer (See Instructions City of Nacogdoches	5)		
	Date 12/15/2023	Full name of contributor out-of-state PAC (ID#: Beer Alliance of Texas PAC Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701	_				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 09/15/2023	Full name of contributor out-of-state PAC (ID#: Beer Alliance of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/15/2023	Full name of contributor out-of-state PAC (ID#:_Bennett, Joey Contributor address; City; State; Zip Code Austin, TX 78738				Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIB	UTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete	e this for	m.	1	Total pages Schedule A1: Sch: 3/33 Rpt: 6/125	
2	FILER NAME Clardy, Trav	s P. (The Honorable)			3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 09/22/2023	 Full name of contributor out-of-state P. Bentley, Farrar Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$200.00
0	Dringing aggr	Nacogdoches, TX 75965	ام	Employer (See Instructions			
0	Pilicipai occu	pation / Job title (See Instructions)	l ⁹	Employer (See Instructions	')		
	Date 09/22/2023	Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$250.00
	Principal occu	Nacogdoches, TX 75964 pation / Job title (See Instructions)		Employer (See Instructions	<u>)</u>		
		,			,		
	Date 11/21/2023	Full name of contributor out-of-state P. Blackshear, Roy Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$1,000.00
		Center, TX 75935					
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions IHLO Sales & Import Co			
	Date 12/15/2023	Full name of contributor out-of-state P. Cain, Randy Contributor address; City; State; Zip Code Austin, TX 78763				Amount of Contribution (\$)	\$250.00
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 09/22/2023	Full name of contributor out-of-state P. Cannaday, Rodney Contributor address; City; State; Zip Code Nacogdoches, TX 75965)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/33 Rpt: 7/125	
2	FILER NAME Clardy, Travi	s P. (The Honorable)		3	Filer ID (Ethics Commission 00067818	n Filers)
4	Date 12/15/2023	 Full name of contributor	_	7	Amount of Contribution (\$)	\$250.00
0	Principal occu	Pflugerville, TX 78660 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Fillicipal occu	oation / Job title (See instructions)	Employer (See instructions	5)		
	Date 09/29/2023	Full name of contributor out-of-state PAC (ID#:_ Cervenka, Melanie Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$200.00
	Delicalization	Nacogdoches, TX 75963	Fourtheast (October State of			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 11/03/2023	Full name of contributor out-of-state PAC (ID#:_ Chadwick, Caroline Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Center, TX 75935				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/03/2023	Full name of contributor out-of-state PAC (ID#:_ Chadwick, David Contributor address; City; State; Zip Code Center, TX 75935		-	Amount of Contribution (\$)	\$500.00
	Principal occu Bank Preside	oation / Job title (See Instructions) ent	Employer (See Instructions Farmers State Bank in 0		nter	
	Date 09/15/2023	Full name of contributor out-of-state PAC (ID#:_ Charles Butt Public Education PAC Contributor address; City; State; Zip Code San Antonio, TX 78209			Amount of Contribution (\$) \$	10,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CO	ONTRIBUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to	o complete this for	n.	1	Total pages Schedule A1: Sch: 5/33 Rpt: 8/125	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Clardy, Trav	is P. (The Honorable)				00067818	
4	Date 09/29/2023	5 Full name of contributor Childs, Gary & Kimberly6 Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code)	7	Amount of Contribution (\$)	\$200.00
		Nacogdoches, TX 75965					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/03/2023	Cline, Mark & Becky					\$500.00
		Contributor address; City; State	e; Zip Code				
		Nacogdoches, TX 75965					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Physician			Cline Family Practice			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/22/2023	Collins, Ron & Nancy	_				\$500.00
		Contributor address; City; State	e; Zip Code				
		Nacogdoches, TX 75965					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	President			Regions Financial Corpo	ora	tion	
	Date	Full name of contributor x	out-of-state PAC (ID#: C00)248716)		Amount of Contribution (\$)	
	09/15/2023	Comcast Corporation & NBC					\$500.00
		Contributor address; City; State					
		Philadelphia, PA 19103					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)	
	10/27/2023	Copelin, Rayford or Alease	_				\$100.00
		Contributor address; City; State	e; Zip Code				
		Center, TX 75935					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>L</u> 5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/33 Rpt: 9/125	
2	FILER NAME Clardy, Trav	s P. (The Honorable)		3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 09/22/2023	 Full name of contributor)	7	Amount of Contribution (\$)	\$200.00
8	Principal occu	Nacogdoches, TX 75961 pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (ID#:_ Cox , Campbell & Jennifer Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	Nacogdoches, TX 75965 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (ID#:_ Cox, Donna Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Nacogdoches, TX 75965 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (ID#:_ Curtis, Rankin Contributor address; City; State; Zip Code Nacogdoches, TX 75965			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (ID#:_ Davis, Lud or Charlotte Contributor address; City; State; Zip Code Nacogdoches, TX 75964			Amount of Contribution (\$)	\$1,000.00
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions LUDCO Inc.)		

	MONET	ARY POLITICAL COI	NTRIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to	complete this forr	n.	1	Total pages Schedule A1: Sch: 7/33 Rpt: 10/125	
2	FILER NAME Clardy, Travi	is P. (The Honorable)			3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 10/27/2023	Davis, Neilson	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$500.00
	Dringing Loon	Shelbyville, TX 75973	lo.	Employer (Coo Instructions			
0	Executive Vi	pation / Job title (See Instructions) ce President	9	Employer (See Instructions Farmers State Bank)		
	Date 09/22/2023	Full name of contributor)		Amount of Contribution (\$)	\$100.00
	Principal occu	Lufkin, TX 75904 pation / Job title (See Instructions)		Employer (See Instructions)		
	,	(,		
	Date 12/15/2023	Deloitte PAC Contributor address; City; State; 2	out-of-state PAC (ID#: <u>C00</u> Zip Code	211318)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Washington , DC 20044 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/15/2023	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/22/2023	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Deppisch Law Firm)		
			l				

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	is form.		otal pages Schedule A1: ch: 8/33 Rpt: 11/125	
2	FILER NAME Clardy, Travi	s P. (The Honorable)		1	ler ID (Ethics Commission 0067818	n Filers)
4	Date 09/22/2023	 Full name of contributor		7 Ar	mount of Contribution (\$)	\$100.00
Ω	Principal occu	Nacogdoches, TX 75964 pation / Job title (See Instructions)	9 Employer (See Instructions) 		
Ü	r inicipal occu	valion / 300 title (See instructions)	5 Employer (See Instructions	13)		
	Date 12/15/2023	Full name of contributor out-of-state PAC (I Erben and Yarbrough Contributor address; City; State; Zip Code	D#:)		mount of Contribution (\$)	\$500.00
		Austin, TX 78701	1			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	is)		
	Date 10/06/2023	Full name of contributor out-of-state PAC (I Evans, Josh & Emily Contributor address; City; State; Zip Code	D#:)	Ar	mount of Contribution (\$)	\$250.00
		Nacogdoches, TX 75965				
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 09/29/2023	Full name of contributor out-of-state PAC (I Ferren, Edwin & Jane Contributor address; City; State; Zip Code Nacogdoches, TX 75965	D#:)	Ar	mount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (I Finley, Donna (Ms.) Contributor address; City; State; Zip Code Nacogdoches, TX 75963	D#:)	Aı	mount of Contribution (\$)	\$300.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
			1			

	MONET	ARY POLITICAL CONT	RIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to con	nplete this fo	orm.	1	Total pages Schedule A1: Sch: 9/33 Rpt: 12/125	
2	FILER NAME Clardy, Trav	s P. (The Honorable)			3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 12/15/2023	 5 Full name of contributor out-of o	-state PAC (ID#:_		7	Amount of Contribution (\$)	\$2,500.00
8	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		9 Employer (See Instructions)		
	Date	Full name of contributor out-of	-state PAC (ID#:_		_	Amount of Contribution (\$)	ΦF 000 00
	09/15/2023	Focused Advocacy PAC Contributor address; City; State; Zip C	code				\$5,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions)		
					,		
	Date 12/22/2023	Full name of contributor out-of Franks, Ginger Contributor address; City; State; Zip C	-state PAC (ID#:_ ode			Amount of Contribution (\$)	\$104.10
		Woden, TX 75978					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/21/2023	Goff, AJ	-state PAC (ID#:_			Amount of Contribution (\$)	\$520.51
	Principal occu	Lufkin, TX 75904 pation / Job title (See Instructions)		Employer (See Instructions East Texas Electric Coo		rative	
	Date 11/03/2023	Golden, Dixon or Melody Contributor address; City; State; Zip C	-state PAC (ID#:_			Amount of Contribution (\$)	\$500.00
	Principal occu	Center, TX 75935 pation / Job title (See Instructions)		Employer (See Instructions)		
	Therapeutic	Optometrist		Golden Eye Clinic			

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 10/33 Rpt: 13/125	
2	FILER NAME Clardy, Travi	s P. (The Honorable)		3	Filer ID (Ethics Commission 00067818	n Filers)
4	Date 09/22/2023	 Full name of contributor out-of-state PAC (ID# Goodrich, Scott or Robbie Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$300.00
_		Nacogdoches, TX 75964	1	Ĺ		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 11/03/2023	Full name of contributor out-of-state PAC (ID# Grant, Derek Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$500.00
	Delicalization	Center, TX 75935	Tourism (Octobration	<u></u>		
	Veterinarian	pation / Job title (See Instructions)	Employer (See Instructions Ward Animal Hospital	5)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (ID# Green, Joe Max & Jane Contributor address; City; State; Zip Code	:)	•	Amount of Contribution (\$)	\$500.00
		Nacogdoches, TX 75965				
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions Joe Max Green/ Insurar	•	Concepts	
	Date 09/22/2023	Full name of contributor out-of-state PAC (ID# Greer, Pattye Contributor address; City; State; Zip Code Nacogdoches, TX 75965	:)	•	Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/15/2023	Full name of contributor out-of-state PAC (ID# HCA Texas Good Government Fund Contributor address; City; State; Zip Code Irving, TX 75039-2478	:)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 11/33 Rpt: 14/125	
2	FILER NAME Clardy, Trav	s P. (The Honorable)			3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 09/15/2023	5 Full name of contributor [HILLCO PAC6 Contributor address; City; Sta)	7	Amount of Contribution (\$)	\$1,000.00
	Driverine	Austin, TX 78701	1,	. Faralas a (Carlos tratas tinas			
8	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/15/2023	Full name of contributor [HOMEPAC of Texas-Texas Contributor address; City; Sta)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	1	Employer (See Instructions	<u>s)</u>		
	i ilicipai occu	pation / 300 title (See Instructions)		Employer (See Instructions	3)		
	Date 11/03/2023	Full name of contributor [Haney, Ronald (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$10,000.00
		Lufkin, TX 75901					
	Principal occu Co-Founder	pation / Job title (See Instructions) Partner		Employer (See Instructions Cascade Health Service		LC	
	Date 11/03/2023	Full name of contributor [Harkness, Wayne or Shirle Contributor address; City; Sta Center, TX 75935				Amount of Contribution (\$)	\$1,000.00
	Principal occu Director	pation / Job title (See Instructions)		Employer (See Instructions W & S Harkness Farms		_C	
	Date 12/12/2023	Full name of contributor Harris Jr., Robert Contributor address; City; Sta Hemphill, TX 75948	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.41
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CO	SCHEDULE A1				
	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/33 Rpt: 15/125	
2	FILER NAME Clardy, Trav	is P. (The Honorable)			3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 09/21/2023	5 Full name of contributor Hayden, J Jolly6 Contributor address; City; State;	out-of-state PAC (ID#: Zip Code)	7	Amount of Contribution (\$)	\$104.10
8	Principal occu	Nacogdoches, TX 75965 pation / Job title (See Instructions)		Employer (See Instructions			
_	Date		out-of-state PAC (ID#:)	,	Amount of Contribution (\$)	
	09/22/2023	Head, Ryan & Rachel Contributor address; City; State;				Amount of Continuation (c)	\$500.00
	Delicational	Nacogdoches, TX 75965		Frankrija (Cara Instruction			
	Principal occu Pediatrician	pation / Job title (See Instructions)		Employer (See Instructions Head Pediatrics)		
	Date 09/22/2023	Full name of contributor Hinze, Garth & Holly Contributor address; City; State;	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Nacogdoches, TX 75965 pation / Job title (See Instructions)		Employer (See Instructions			
	President	pation / oob title (occ monactions)		Ark Pharmacies Inc			
	12/13/2023 Holland, Karen		out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$52.05
	Principal occu	Henderson, TX 75654 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/22/2023	Holmes, Robert Contributor address; City; State;	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Nacogdoches, TX 75965 pation / Job title (See Instructions)		Employer (See Instructions)		
	Partner			Fredonia Brewery			

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 13/33 Rpt: 16/125	
2	FILER NAME Clardy, Travi	is P. (The Honorable)		3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 12/21/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$75.00
_		Nacogdoches, TX 75964				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 11/03/2023	Full name of contributor out-of-state PAC (ID#:_ Howard, William & Pamela Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Dringing agg	Center, TX 75935	Employer (See Instructions	_		
	Owner	pation / Job title (See Instructions)	East TX Poultry Supply	')		
	Date 09/15/2023	Full name of contributor out-of-state PAC (ID#:_ IBAT PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 12/15/2023	Full name of contributor X out-of-state PAC (ID#: C Invenergy Investment Company LLC Contributor address; City; State; Zip Code Chicago, IL 60606	00366559		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 09/15/2023	Full name of contributor out-of-state PAC (ID#:_ Jackson Walker LLP PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
		l				

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUL	E A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/33 Rpt: 17/125	
2	FILER NAME Clardy, Trav	is P. (The Honorable)		3	Filer ID (Ethics Commission 00067818	n Filers)
4	Date 09/22/2023	5 Full name of contributor out-of-state PAC (ID#: Johnson, Eric & Patti 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00
_	<u> </u>	Nacogdoches, TX 75965				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 10/06/2023	Full name of contributor out-of-state PAC (ID#:_ Karen G Gantt PC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	McKinney, TX 75070 pation / Job title (See Instructions)	Employer (See Instructions)		
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Date 09/15/2023	Full name of contributor out-of-state PAC (ID#:_ Keffer, James Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		Eastland, TX 76448				
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions EBAA Iron Sales, INC)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (ID#:_Kiritsy, Olivia Contributor address; City; State; Zip Code Nacogdoches, TX 75965			Amount of Contribution (\$)	\$500.00
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions Loblolly Properties)		
	Date 10/06/2023	Full name of contributor out-of-state PAC (ID#:_Klein, Michelle Contributor address; City; State; Zip Code Nacogdoches, TX 75963)		Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CO		SCHEDULE A			
	The Instru	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 15/33 Rpt: 18/125	
2	FILER NAME Clardy, Travi	s P. (The Honorable)			3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 11/03/2023	Koonce, David & Angela	out-of-state PAC (ID#: Zip Code)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Center, TX 75935 pation / Job title (See Instructions)	9	Employer (See Instructions)		
	President /C	EO		General Shelters of Tex	as		
	Date 09/22/2023	Krenek Jr., Bryant Contributor address; City; State; 2	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
		MT Enterprise, TX 75681					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/15/2023	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/22/2023	Full name of contributor Contributor Contributor address; City; State; 2	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$260.25
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/22/2023	Full name of contributor				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CONTR		SCHEDUI	_E A1		
	The Instru	ction Guide explains how to com	plete this form	n.	1	Total pages Schedule A1: Sch: 16/33 Rpt: 19/125	
2	FILER NAME Clardy, Travi	is P. (The Honorable)			3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 12/15/2023	 Full name of contributor			7	Amount of Contribution (\$)	\$500.00
_		Austin, TX 78701			<u> </u>		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 11/03/2023	Full name of contributor out-of-s Lucas, Will & Kelly Contributor address; City; State; Zip Co				Amount of Contribution (\$)	\$1,000.00
		Center, TX 75935					
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions Double K Glass, LLC	5)		
	Date 09/22/2023	Full name of contributor	state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Dringing agg	Nacogdoches, TX 75965 pation / Job title (See Instructions)		Employer (See Instructions	·/-		
	Vice Preside			Citizen's 1st Bank	•)		
	Date 09/15/2023	Full name of contributor MCGUIREWOODS PAC Contributor address; City; State; Zip Co	state PAC (ID#: <u>C00</u> ode	248716)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
_	Date 11/03/2023	Full name of contributor out-of-s Mackey, Jeffrey & Carmen Contributor address; City; State; Zip Co	state PAC (ID#:			Amount of Contribution (\$)	\$2,000.00
	Principal occu Therapeutic	pation / Job title (See Instructions) Optometrist		Employer (See Instructions Golden Eye Clinic	5)		
	,	·		, -			

	MONET	ARY POLITICAL C		LE A1			
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 17/33 Rpt: 20/125	
2	FILER NAME Clardy, Trav	is P. (The Honorable)			3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 12/15/2023	5 Full name of contributor [Management & Training Co6 Contributor address; City; Sta		00208322)	7	Amount of Contribution (\$)	\$1,000.00
		Centerville, UT 84014	+				
8	Principal occu	pation / Job title (See Instructions)	!	9 Employer (See Instructions	s)		
	Date 12/08/2023	Full name of contributor [Markham, Douglas Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Dringinal occu	Houston, TX 77219		Employer (See Instructions	·/		
	Pilitipai occu	pation / Job title (See Instructions)		Employer (See Instructions	·)		
	Date 09/22/2023	Full name of contributor Martin, John Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Longview , TX 75601					
	Principal occu Principal	pation / Job title (See Instructions)		Employer (See Instructions Hallsville ISD	5)		
	Date 09/29/2023	Full name of contributor Mast III, A.T. Contributor address; City; Sta Nacogdoches, TX 75963)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 11/03/2023	Full name of contributor McAdams, Billy & Lisa Contributor address; City; Sta Center, TX 75935	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Owners	pation / Job title (See Instructions)		Employer (See Instructions McAdams Propane Con		ıny	
			I				

	MONET	ARY POLITICAL CONT	TRIBUTION	S		SCHEDUI	LE A1
	The Instruc	ction Guide explains how to co	mplete this forn	n.	1	Total pages Schedule A1: Sch: 18/33 Rpt: 21/125	
2	FILER NAME Clardy, Travi	s P. (The Honorable)			3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 11/03/2023	 Full name of contributor out-out-out-out-out-out-out-out-out-out-)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occur	Center, TX 75935 pation / Job title (See Instructions)	la la	Employer (See Instructions			
0	Vice Preside			McAdams Propane Com		ıny	
	Date 12/15/2023	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
		Austin, TX 78746					
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions HCSC BCBSTX)		
	Date 12/15/2023	Full name of contributor out- Medford, Philip & Len Contributor address; City; State; Zip	of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
		Lufkin, TX 75904					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/15/2023	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:			Amount of Contribution (\$)	\$2,500.00
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions Orange Pharmacy LLC)		
	Date 11/03/2023	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Ketih E. Miller M.D.)		
			I				

	MONET	ARY POLITICAL CONTRIBUT		SCHEDULE		
	The Instru	ction Guide explains how to complete thi	s form.		tal pages Schedule A1: h: 19/33 Rpt: 22/125	
2	FILER NAME Clardy, Trav	s P. (The Honorable)			er ID (Ethics Commission 067818	on Filers)
4	Date 12/15/2023	 Full name of contributor			nount of Contribution (\$)	\$500.00
_	Deinsinal assu	Austin, TX 76746	O Familia va (Con Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (III Mocnicak, Mary Contributor address; City; State; Zip Code	D#:)	Am	nount of Contribution (\$)	\$25.00
	Principal occu	Nacogdoches, TX 75965 pation / Job title (See Instructions)	Employer (See Instructions	6)		
	r illicipai occu	pation 7 300 title (See Instructions)	Employer (See instructions	3)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (IE Moehring, Rick Contributor address; City; State; Zip Code	D#:)	Am 	nount of Contribution (\$)	\$100.00
		Nacogdoches, TX 75965				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/03/2023	Full name of contributor out-of-state PAC (IE Monroe, C.D. Contributor address; City; State; Zip Code Center, TX 75935	D#:)	Am	nount of Contribution (\$)	\$1,000.00
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions Monco Motor Co.	s)		
	Date 11/03/2023	Full name of contributor out-of-state PAC (IE Montagne, James or Janet Contributor address; City; State; Zip Code Beaumont, TX 77706	D#:)		nount of Contribution (\$)	\$1,500.00
	Principal occu General Mar	pation / Job title (See Instructions)	Employer (See Instructions Sabine River Authority of		ne.	
	General Mai		Sabine River Authority (

	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDULE A1
	The Instruc	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 20/33 Rpt: 23/125
2	FILER NAME Clardy, Travi	is P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067818
4	Date 10/27/2023	 Full name of contributor)	7	Amount of Contribution (\$) \$250.00
		Center, TX 75935				
8	Principal occu CEO	pation / Job title (See Instructions)	9	Employer (See Instructions Farmers State Bank of 0		nter
	Date 09/22/2023	Full name of contributor out-of-state PAC (ID#:_ Mounger, Danny Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$1,500.00
	Principal occu	Nacogdoches, TX 75964 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)	
	Owner/ Fune			Laird Funeral Home	,	
	Date 12/15/2023	Full name of contributor X out-of-state PAC (ID#: NRG Energy PAC Contributor address; City; State; Zip Code	000)		Amount of Contribution (\$) \$3,000.00
		Princeton, NJ 08540-6213				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Date 09/22/2023	Full name of contributor out-of-state PAC (ID#:_ Nelson, Jack Contributor address; City; State; Zip Code Nacogdoches, TX 75965)		Amount of Contribution (\$) \$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Date 09/15/2023	Full name of contributor x out-of-state PAC (ID#: Gild One Gas Inc Political Action Committee Contributor address; City; State; Zip Code Tulsa, OK 74103	000	0554444)		Amount of Contribution (\$) \$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	

	MONET	ARY POLITICAL CONTRIBU		SCHEDULE A1			
	The Instruc	ction Guide explains how to complete t	his for	m.	1	Total pages Schedule A1: Sch: 21/33 Rpt: 24/125	
2	FILER NAME Clardy, Travi	is P. (The Honorable)			3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 12/17/2023	 5 Full name of contributor out-of-state PAC Oswald, Brian 6 Contributor address; City; State; Zip Code 	`)	7	Amount of Contribution (\$)	\$104.10
_	Dringing age	Nacogdoches, TX 75965	lo.	Employer (Coo Instructions	<u></u>		
8	Pilicipai occu	pation / Job title (See Instructions)	9	Employer (See Instructions	o)		
	Date 09/29/2023	Full name of contributor out-of-state PAC Patterson, Jeffrey Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		Nacogdoches, TX 75965			L		
	Chief Execut	pation / Job title (See Instructions) tive Officer		Employer (See Instructions Nacogdoches Medical C		ter	
	Date 09/22/2023	Full name of contributor out-of-state PAC Patterson, Suzanne Contributor address; City; State; Zip Code	(ID#:		•	Amount of Contribution (\$)	\$500.00
		Nacogdoches, TX 75965					
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions Cal-Tex Lumber	5)		
	Date 09/29/2023	Full name of contributor out-of-state PAC Perkins, James Contributor address; City; State; Zip Code Tyler, TX 75711)		Amount of Contribution (\$)	\$5,000.00
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions Citizens 1st Bank	5)		
	Date 09/22/2023	Full name of contributor out-of-state PAC Perry, Hunter & Rachael Contributor address; City; State; Zip Code Nacogdoches, TX 75963	(ID#:)	•	Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			ı				

	MONEI	ARY POLITICAL (CONTRIBUTION	15		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 22/33 Rpt: 25/125	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Clardy, Travis P. (The Honorable)			00067818			
4	Date 09/22/2023	5 Full name of contributorPool Jr., Charles6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$500.00
		Nacogdoches, TX 75965					
8	Principal occu	pation / Job title (See Instructions	9	Employer (See Instructions	s)		
	Owner			Charles Pool Real Estat	te I	nc	
	Date 11/03/2023	Full name of contributor Price, John Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code			Amount of Contribution (\$)	\$500.00
		Center, TX 75935					
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	5)		
	Attorney			Fairchild, Price, Haley &	ն Sr	nith	
	Date 12/08/2023	Full name of contributor Prince, Derek & Donna Contributor address; City; Si	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5,000.00
		Dallas, TX 75208					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>. </u>		
	President an	d CEO		Health Care LLC			
	Date 11/03/2023	Full name of contributor Raymond, J.B. Contributor address; City; St Center, TX 75935	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu Owner	pation / Job title (See Instructions	5)	Employer (See Instructions Raymond Construction	s)		
	Date 11/03/2023	Full name of contributor Raymond, James E. Contributor address; City; St Shelbyville, TX 75973	out-of-state PAC (ID#:)	-	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Owner			J & J Raymond Constru	ctic	n, LLC	

	MONET	ARY POLITICAL CONTRIBI	UTION	IS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 23/33 Rpt: 26/125	
2	FILER NAME Clardy, Travi	is P. (The Honorable)			3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 11/17/2023	 5 Full name of contributor out-of-state PARedfield, Jana 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$100.00
_	Deinainal assu	Nacogdoches, TX 75963	lo.	Frankrijer (Cookrativistiana	<u></u>		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 12/15/2023	Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 09/22/2023	Full name of contributor out-of-state PARuckel, John (Mr.) Contributor address; City; State; Zip Code Nacogdoches, TX 75965	AC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu Owner/Presi	pation / Job title (See Instructions) dent		Employer (See Instructions Ruckel Insurance and F		ncial Advisors	
	Date 12/15/2023	Full name of contributor out-of-state PAR Rural Friends of Texas Electric Cooperat Contributor address; City; State; Zip Code Austin, TX 78701	ives			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 09/15/2023	Full name of contributor out-of-state PAR Rural Friends of Texas Electric Cooperat Contributor address; City; State; Zip Code Austin, TX 78701	ives			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CON	NTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to c	complete this form	n.	1	Total pages Schedule A1: Sch: 24/33 Rpt: 27/125	
2	FILER NAME Clardy, Travi	s P. (The Honorable)			3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 09/22/2023	 Full name of contributor o Rust III, Raymond H. (Mr.) Contributor address; City; State; Z)	7	Amount of Contribution (\$)	\$500.00
0	Dringing coou	Nacogdoches, TX 75965	lo.	Employer (See Instructions			
8	CEO	pation / Job title (See Instructions)		Commercial Bank of Tex		, NA	
	Date 12/15/2023	Full name of contributor of campson Public Affairs Contributor address; City; State; Z	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions	.)		
	i illoipai ooda	pation, cop tale (eee meadone)		Zimpioyer (eee meadoaene	,		
	Date 09/15/2023	Full name of contributor of contributor of contributor address; City; State; Z	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 11/03/2023	Full name of contributor o o Scarber, Brett & Erin Contributor address; City; State; Z)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Vice Preside	pation / Job title (See Instructions) nt		Employer (See Instructions Spartan Structures LLC)		
	Date 09/15/2023	Shinn, Betty (Mrs.)				Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
			· · · · · · · · · · · · · · · · · · ·				

	MONET	ARY POLITICAL CONTRIBUT	ΓIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 25/33 Rpt: 28/125	
2	FILER NAME Clardy, Travi	s P. (The Honorable)		3	Filer ID (Ethics Commissio 00067818	n Filers)
4	Date 09/22/2023	 Full name of contributor out-of-state PAC (Sisco, Stan Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$200.00
Ω	Dringinal occur	Nacogdoches, TX 75961 pation / Job title (See Instructions)	9 Employer (See Instructions	e)		
Ü	i illicipai occu	pation 7 300 tale (See mail actions)	2 Employer (See Instructions	3)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (Sitton, Bob Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$25.00
	Dringing Lagor	Nacogdoches, TX 75965	Familia de la Constitución de la charaction de la constitución de la c			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (Smith, Ted Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$500.00
		Nacogdoches, TX 75961				
	Principal occu Insurance Aç	pation / Job title (See Instructions) gent	Employer (See Instructions State Farm Insurance	s)		
	Date 11/03/2023	Full name of contributor out-of-state PAC (Snider, John Contributor address; City; State; Zip Code Center, TX 75935	ID#:)		Amount of Contribution (\$)	\$750.00
	Principal occu Vice Chairma	pation / Job title (See Instructions)	Employer (See Instructions Silicon Valley Bank	s)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (Spruiell, Francis or Allan Contributor address; City; State; Zip Code Nacogdoches, TX 75963	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUT	ΓΙΟΙ	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	is foi	rm.	1	Total pages Schedule A1: Sch: 26/33 Rpt: 29/125	
2	FILER NAME Clardy, Travi	is P. (The Honorable)			3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 09/22/2023	 Full name of contributor			7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Nacogdoches, TX 75965 pation / Job title (See Instructions)	9	Employer (See Instructions	<u>;)</u>		
	i illoipai oooa	pation / cos tale (coe mondonolo)		Employer (ede met deterne	-,		
	Date 09/22/2023	Full name of contributor out-of-state PAC (I Still, Rick Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$150.00
	Dringinal occu	Nacogdoches, TX 75965 pation / Job title (See Instructions)		Employer (See Instructions	·/_		
	Fillicipal occu	pation / Job title (See Instructions)		Employer (See instructions	·)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (I Stockman Jr., James (Mr.) Contributor address; City; State; Zip Code	ID#:)		Amount of Contribution (\$)	\$1,000.00
		Nacogdoches , TX 75965			Ĺ		
	Principal occu Nurse Anest	pation / Job title (See Instructions) hesiology		Employer (See Instructions Grasshopper Anesthesi			
	Date 09/22/2023	Full name of contributor out-of-state PAC (I Sutton, Kurt Contributor address; City; State; Zip Code Nacogdoches, TX 75961				Amount of Contribution (\$)	\$500.00
	Principal occu Chief Execut	pation / Job title (See Instructions) tive Officer		Employer (See Instructions G&S Lumber Co. Inc	5)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (I Swearingen, John & Sally Ann Contributor address; City; State; Zip Code Nacogdoches, TX 75963	ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDU	LE A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 27/33 Rpt: 30/125	
2	FILER NAME Clardy, Travi	s P. (The Honorable)		3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 09/22/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$250.00
Ω	Principal occu	Nacogdoches, TX 75963 pation / Job title (See Instructions)	Employer (See Instructions	·)		
0	r inicipal occu	pation / Job title (See matractions)	2 Employer (See Instructions	,		
	Date 10/27/2023	Full name of contributor			Amount of Contribution (\$)	\$2,000.00
	Deinsinal assu	Austin, TX 78759	Franksian (Cook Instructions	<u></u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/13/2023	Full name of contributor out-of-state PAC (ID#: TREPAC/ Texas Association of Realtors PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
		Austin, TX 78768				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/20/2023	Full name of contributor out-of-state PAC (ID#:_ Texas Apartment Association PAC Contributor address; City; State; Zip Code Austin, TX 78701-1951)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/21/2023	Full name of contributor out-of-state PAC (ID#:_ Texas Association of Realtors PAC Contributor address; City; State; Zip Code Austin, TX 78768)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	- 5)		
		l				

	MONET	ARY POLITICAL CONTRIBUTI	ION	S		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this	form	n.	1	Total pages Schedule A1: Sch: 28/33 Rpt: 31/125	
2	FILER NAME Clardy, Trav	s P. (The Honorable)			3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 09/15/2023	 Full name of contributor			7	Amount of Contribution (\$)	\$1,000.00
_	<u> </u>	Austin, TX 78726	اء				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 12/15/2023	Full name of contributor out-of-state PAC (ID# Texas Poultry PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$300.00
		Round Rock, TX 78681	_				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/15/2023	Full name of contributor out-of-state PAC (ID# Texas Society of Architects Committee Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$1,500.00
		Austin, TX 78702					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/08/2023	Full name of contributor out-of-state PAC (ID# Texas State Farm Agents PAC Contributor address; City; State; Zip Code Lakeway, TX 78734)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/15/2023	Full name of contributor out-of-state PAC (ID# Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code Austin, TX 78767-0788)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 29/33 Rpt: 32/125	
2	FILER NAME Clardy, Trav	is P. (The Honorable)		3	Filer ID (Ethics Commission 00067818	on Filers)
4	Date 12/15/2023	Full name of contributor	PAC	7	Amount of Contribution (\$)	\$1,000.00
_	Delicalis al access	Whitehouse, TX 75791				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 12/15/2023	Full name of contributor out-of-state PAC (ID#:_ The Independent Insurance Agents of Texas PA Contributor address; City; State; Zip Code Austin, TX 78768			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2023	Full name of contributor out-of-state PAC (ID#:_ The Independent Insurance Agents of Texas PA Contributor address; City; State; Zip Code	,C		Amount of Contribution (\$)	\$250.00
	Dringing oggu	Austin, TX 78768 upation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation 7 sob title (See Instructions)	Employer (See Instructions	,		
	Date 10/27/2023	Full name of contributor out-of-state PAC (ID#:_ Thompson, Benjamin Contributor address; City; State; Zip Code Nacogdoches, TX 75765)		Amount of Contribution (\$)	\$500.00
		ipation / Job title (See Instructions) Gynecologist	Employer (See Instructions Self- Employed)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (ID#:_ Thompson, Charles Contributor address; City; State; Zip Code Nacogdoches, TX 75765)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 30/33 Rpt: 33/125	
2	FILER NAME Clardy, Trav	s P. (The Honorable)		3	Filer ID (Ethics Commissio 00067818	n Filers)
4	Date 09/15/2023	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Nacogdoches, TX 75961 pation / Job title (See Instructions)	Employer (See Instructions			
0	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/15/2023	Full name of contributor X out-of-state PAC (ID#:_ Tyson Foods PAC Contributor address; City; State; Zip Code Springdale, AR 72765-2020	C00169821)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/15/2023	Full name of contributor out-of-state PAC (ID#:_ UA Plumbers & Pipefitters Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
	Principal occu	Austin, TX 78702 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (ID#:_ Underwood, Rachel Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
	Principal occu	Nacogdoches, TX 75965 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/15/2023	Full name of contributor out-of-state PAC (ID#:_ Vistra Employee State PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUT	TONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete thi	is form.	1 Total pages Schedule A1: Sch: 31/33 Rpt: 34/125
2	FILER NAME Clardy, Travi	s P. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067818
4	Date 10/27/2023	 Full name of contributor		7 Amount of Contribution (\$) \$100.00
0	Principal occu	Nacogdoches, TX 75965	Employer /See Instruction	
0	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction:	15)
	Date 10/27/2023	Full name of contributor out-of-state PAC (II Watson, Fannie Contributor address; City; State; Zip Code	D#:)	Amount of Contribution (\$) \$100.00
		Tenaha, TX 75974	1	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)
	Date 11/03/2023	Full name of contributor out-of-state PAC (II Whitney, Donna Contributor address; City; State; Zip Code	D#:)	Amount of Contribution (\$) \$25.00
		Center, TX 75935		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction:	ns)
	Date 11/03/2023	Full name of contributor out-of-state PAC (II Wilkins, Dan Contributor address; City; State; Zip Code Center, TX 75935	D#:)	Amount of Contribution (\$) \$300.00
	•	pation / Job title (See Instructions) family Therapist	Employer (See Instruction: Self Employed	ns)
	Date 11/03/2023	Full name of contributor out-of-state PAC (II Williams, Travis or Pamela Contributor address; City; State; Zip Code Bridge City, TX 77611	D#:)	Amount of Contribution (\$) \$1,000.00
		pation / Job title (See Instructions) neral Manager	Employer (See Instruction: Sabine River Authority	
	, issistant GC		Sabile Niver / Manority	. 5.46

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 32/33 Rpt: 35/125	
2	FILER NAME Clardy, Trav	is P. (The Honorable)		3	Filer ID (Ethics Commission 00067818	n Filers)
4	Date 11/03/2023	 Full name of contributor out-of-state PAC (ID#:_ Windham, Danny & Sally Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$300.00
8	Principal occu	Center, TX 75935 pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/03/2023	Full name of contributor out-of-state PAC (ID#:_ Worsham, Debrah (Mrs.) Contributor address; City; State; Zip Code Center, TX 75935			Amount of Contribution (\$)	\$500.00
	Principal occu Dentist	pation / Job title (See Instructions)	Employer (See Instructions Debrah Worsham DDS)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (ID#:_ Wright, Ben Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$260.00
	Principal occu	Nacogdoches, TX 75963 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/02/2023	Full name of contributor out-of-state PAC (ID#:_ Wright, Ben Contributor address; City; State; Zip Code Nacogdoches, TX 75965	<u> </u>		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions TFP Nutrition)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (ID#:_ Wright, Steele Contributor address; City; State; Zip Code Nacogdoches, TX 75965			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
			,			

MON	ETARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A1
The Ins	truction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 33/33 Rpt: 36/125	
	FILER NAME Clardy, Travis P. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067818
4 Date 09/22/20	5 Full name of contributor out-of-state PAC (ID#:_ Wright III, M.S. 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$250.00
	Nacogdoches, TX 75965		
8 Principal CEO	occupation / Job title (See Instructions)	9 Employer (See Instruction: TFP Nutrition	s)
Date 11/03/20	Full name of contributor out-of-state PAC (ID#:_ Wulf, Fred Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$500.00
	Center, TX 75935		
	occupation / Job title (See Instructions) s and Distribution Expert	Employer (See Instruction: OILSPILL Solutions Tea	

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 37/125 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Clardy, Travis P. (The Honorable) 00067818 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 09/12/2023 TREPAC/ Texas Association of Realtors PAC \$250.00 I Advertising for 7 Contributor address; City; State; Zip Code Fundraising Event Austin, TX 78768 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/22 Rpt: 38/125	Clardy, Travis P. (The Honorable) 00067818
4	Date	5 Payee name
	07/20/2023	CBTX Postal Unit
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2.55	215 E. Main St
		Nacogdoches, TX 75961
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Postage Expense
		Campaign 1 ostage Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	11/01/2023	Castro, Dylan
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	408 Rivercrest Rd
		Lufkin, TX 75901
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Contract Labor Expense
		Campaign Contract Easts Expense
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	11/30/2023	Castro, Dylan
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	408 Rivercrest Rd
		Lufkin, TX 75901
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Contract Labor Expense
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		_
_	Sch: 2/22 Rpt: 39/125	Clardy, Travis P. (The Honorable) 00067818	
4	Date	5 Payee name	_
	12/30/2023	Castro, Dylan	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$2,500.00	408 Rivercrest Rd	
		Lufkin, TX 75901	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
	EXI ENDITORE	Check if Austin, TX, officeholder living expense	
		Campaign Contract Labor Report	
_	Complete ONLY if direct	Condidate/Officeholder name Office possible	_
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	·		_
	Date	Payee name	
	12/04/2023	DETCOG	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	202 E Pilar St	
		Nacogdoches, TX 75961	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Campaign Subscription/Dues Expense	
		Campaign Subscription/Dues Expense	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
_	Date	Davisa nama	=
	07/28/2023	Payee name Davis, Britton	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$300.00	800 Embassy Dr., Unit 507	
		Austin, TX 78702	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign Labor Expense	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
-			_
L			

SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/22 Rpt: 40/125	Clardy, Travis P. (The Honorable) 00067818
4	Date	5 Payee name
	08/30/2023	Davis, Britton
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	800 Embassy Dr., Unit 507
		Austin, TX 78702
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Contract Labor Expense
		Campaign Contract Labor Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/29/2023	Davis, Britton
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	800 Embassy Dr., Unit 507
		Austin, TX 78702
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Contract Labor Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/30/2023	Davis, Britton
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	800 Embassy Dr., Unit 507
		Austin, TX 78702
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Contract Labor Expense
		Campaign Contract Labor Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 4/22 Rpt: 41/125	2 FILER NAME Clardy, Travis P. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067818
4	Date 11/30/2023	5 Payee name Davis, Britton
6	Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 800 Embassy Dr., Unit 507
8	PURPOSE OF EXPENDITURE	Austin, TX 78702 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contract Labor Expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 12/29/2023	Payee name Davis, Britton
	Amount (\$) \$300.00	Payee address; City; State; Zip Code 800 Embassy Dr., Unit 507 Austin, TX 78702
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contract Labor Expense
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 07/28/2023	Payee name Faulk, Kelley
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 4218 Mystic Lane
		Nacogdoches, TX 75965
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contract Labor Expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

ent Solicitation/Fundraising Expense
se Transportation Equipment & Related Expense
Travel in District
Travel Out of District
Travel Out for District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/22 Rpt: 42/125	Clardy, Travis P. (The Honorable) 00067818
4	Date	5 Payee name
	08/30/2023	Faulk, Kelley
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	4218 Mystic Lane
		Nacogdoches, TX 75965
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Contract Labor Expense
		Campaigh Contract Eabor Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	09/29/2023	Faulk, Kelley
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	4218 Mystic Lane
		Nacogdoches, TX 75965
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign Contract Labor Expense
		Campaigh Contract Labor Expense
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date 10/30/2023	Payee name
		Faulk, Kelley
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	4218 Mystic Lane
		Nacogdoches, TX 75965
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign Contract Labor Expense
		Campaigh Contract Labor Expense
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
L		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 6/22 Rpt: 43/125	2 FILER NAME Clardy, Travis P. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067818
4	Date 11/30/2023	5 Payee name Faulk, Kelley
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 4218 Mystic Lane
		Nacogdoches, TX 75965
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contract Labor Expense
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 12/30/2023	Payee name
	Amount (\$)	Faulk, Kelley Payee address; City; State; Zip Code
	\$1,000.00	4218 Mystic Lane
		Nacogdoches, TX 75965
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contract Labor Expense
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date 09/05/2023	Payee name FlexPoint Media, INC
	Amount (\$) \$10,030.00	Payee address; City; State; Zip Code PO Box 1051
		New Albany, OH 43054
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Advertising Expense
	Complete ONLY if direct expenditure to benefit C/ON	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/22 Rpt: 44/125	Clardy, Travis P. (The Honorable) 00067818
4	Date	5 Payee name
	07/28/2023	Gilmore, Claire
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	7071 FM 1638
		Nacogdoches, TX 75964
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Contract Labor Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	08/30/2023	Gilmore, Claire
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	7071 FM 1638
		Nacogdoches, TX 75964
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign Contract Labor Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	4
	Date	Payee name
	09/29/2023	Gilmore, Claire
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	7071 FM 1638
	•	
		Nacogdoches, TX 75964
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Contract Labor Expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiorare to berieff C/Or	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete the	his form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 8/22 Rpt: 45/125	Clardy, Travis P. (The Honorable)	00067818
4	Date	5 Payee name	•
	10/30/2023	Gilmore, Claire	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	7071 FM 1638	
		Nacogdoches, TX 75964	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	scription
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORE	,	Check if Austin, TX, officeholder living expense
		La Ca	ımpaign Contract Labor Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	expenditure to benefit C/OI		Office field
_	Data	<u> </u>	
	Date	Payee name	
	11/30/2023	Gilmore, Claire	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	7071 FM 1638	
		Nacogdoches, TX 75964	
	PURPOSE OF	l ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	scription
	EXPENDITURE	Salaries/Wages/Contract Eabor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		I — I —	Impaign Contract Labor Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	4	
	Date	Payee name	
	12/30/2023	Gilmore, Claire	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	7071 FM 1638	
		Nacogdoches, TX 75964	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	scription
	OF	l ' ' <u> </u>	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	l	Check if Austin, TX, officeholder living expense
		Ca	ımpaign Contract Labor Expense
	Operated Children	Out dishas (Office held	0" 111
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 9/22 Rpt: 46/125	2 FILER NAME Clardy, Travis P. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067818
4	Date 10/13/2023	5 Payee name Griffin Communication
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 200 S 1st Street Point, TX 75472
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Consulting Expense
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 11/09/2023	Payee name Griffin Communication
	Amount (\$) \$4,750.00	Payee address; City; State; Zip Code 200 S 1st Street Point, TX 75472
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Consulting Expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 11/01/2023	Payee name Hancock Advertising Agency
	Amount (\$) \$825.00	Payee address; City; State; Zip Code 243 Old Tyler Rd
		Nacogdoches, TX 75961
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Advertising Expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to cor	mplete this form.
Total pages Schedule F1: Sch: 10/22 Rpt:	2 FILER NAME Clardy, Travis P. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067818
<u> </u>	i i	00007616
4 Date 11/01/2023	5 Payee name Hancock Advertising Agency	
6 Amount (\$) \$10,825.00	7 Payee address; City; State; Zip Co. 243 Old Tyler Rd	de
	Nacogdoches, TX 75961	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Advertising Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou(ght Office held
Date	Payee name	
12/22/2023	Hancock Advertising Agency	
Amount (\$) \$10,825.00	Payee address; City; State; Zip Coo 243 Old Tyler Rd	de
	Nacogdoches, TX 75961	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Advertising Expense
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ght Office held
Date 12/18/2023	Payee name Hancock Advertising Agency	
Amount (\$) \$6,858.72	Payee address; City; State; Zip Coo 243 Old Tyler Rd	de
	Nacogdoches, TX 75961	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Advertising Expense
Complete ONLY if direct expenditure to benefit C/O	I L Candidate/Officeholder name Office sou H	ght Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/22 Rpt:	Clardy, Travis P. (The Honorable) 00067818
4	Date	5 Payee name
	10/17/2023	Hancock Media
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10,000.00	5905 Meadowbrook Drive
		Morrison, CO 80465
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Advertising Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	10/13/2023	Henderson Chamber of Commerce
_	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	201 N Main St
	Ψ130.00	ZOT W WAIT St
		Henderson, TX 75652
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Subscription/Dues Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	07/24/2023	Intuit Quickbooks Online
	Amount (\$)	Payee address; City; State; Zip Code
	\$74.62	2632 Marine Way
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Software Expense
		Campaign Conward Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/22 Rpt:	Clardy, Travis P. (The Honorable) 00067818
4	Date	5 Payee name
	08/24/2023	Intuit Quickbooks Online
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$79.95	2632 Marine Way
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Software Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	09/25/2023	Intuit Quickbooks Online
	Amount (\$)	Payee address; City; State; Zip Code
	\$86.35	2632 Marine Way
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LAI LIADITORE	Check if Austin, TX, officeholder living expense Campaign Software Expense
		Campaign Soltware Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	y
	Date	Payee name
	10/24/2023	Intuit Quickbooks Online
	Amount (\$)	Payee address; City; State; Zip Code
	\$86.35	2632 Marine Way
	400.00	
		Mountain View, CA 94043
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Software Expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 13/22 Rpt:	Clardy, Travis P. (The Honorable)	00067818
4 Date	5 Payee name	<u> </u>
11/24/2023	Intuit Quickbooks Online	
6 Amount (\$)	7 Payee address; City; State; Zip C	Code
\$92.74	2632 Marine Way	
	Mountain View, CA 94043	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Campaign Software Expense
O Commission ONII V if allowed	Out distance (Office In all January)	Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H	ought Office held
	<u> </u>	
Date	Payee name	
12/26/2023	Intuit Quickbooks Online	
Amount (\$)	Payee address; City; State; Zip C	Code
\$92.74	2632 Marine Way	
	Mountain View, CA 94043	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Software Expense
		Campaign Contract Expense
Complete ONLY if direct	Candidate/Officeholder name Office so	L Dught Office held
expenditure to benefit C/O		
Date	Payee name	
12/19/2023	Jimerson, Mona	
Amount (\$)	Payee address; City; State; Zip C	Corde
\$500.00	1142 County Road 263 N	5500
4000.00	11 12 Godiny Road 200 R	
	Henderson, TX 75652	
BUBBOSE		10.7 =
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
		Donation Event Expense
Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held
expenditure to benefit C/O	Н	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to comple	te this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 14/22 Rpt:	Clardy, Travis P. (The Honorable)	00067818
4	Date	5 Payee name	-
	07/28/2023	Jones, Jerri	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$300.00	3316 Lake Forest Dr	
		Nacogdoches, TX 75964	
8	PURPOSE	_	Description
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	-	Check if Austin, TX, officeholder living expense
l			Campaign Contract Labor Expense
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	experientare to benefit Grot	'	
	Date	Payee name	
l	08/30/2023	Jones, Jerri	
	Amount (\$)	Payee address; City; State; Zip Code	
l	\$300.00	3316 Lake Forest Dr	
l			
l		Nacogdoches, TX 75964	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
l			Campaign Contract Labor Expense
			Campaign Contract Labor Expense
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·	Office field
⊨	Date	Davos namo	
l	09/29/2023	Payee name Jones, Jerri	
┝	Amount (\$)		
	\$300.00	Payee address; City; State; Zip Code 3316 Lake Forest Dr	
	Ψ300.00	3310 Lake I olest bi	
l		Nacadashas TV 7F064	
		Nacogdoches, TX 75964	
l	PURPOSE OF	,	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Salaries/Wages/Contract Labor	Check if Austin, TX, officeholder living expense
l			Campaign Contract Labor Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/22 Rpt:	Clardy, Travis P. (The Honorable) 00067818
4	Date	5 Payee name
	10/30/2023	Jones, Jerri
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	3316 Lake Forest Dr
		Nacogdoches, TX 75964
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign Contract Labor Expense
		Campaigh Contract Labor Expense
_	0 1: 0.11.7.7.1.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/30/2023	Jones, Jerri
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	3316 Lake Forest Dr
		Nacogdoches, TX 75964
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		Campaign Contract Labor Expense
	Opening the ONII Wife disease	Our did to 10 ff as had done as many
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/29/2023	Jones, Jerri
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	3316 Lake Forest Dr
		Nacogdoches, TX 75964
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		Campaign Contract Labor Expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Superiorder to beliefft 6/01	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

Printing Expense Salaries/Wages/Contract Labor

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

Solicitation/Fundraising Expense

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Clardy, Travis P. (The Honorable) 00067818 Sch: 16/22 Rpt: 4 Date Payee name 08/01/2023 Jones, Jerri 6 Amount (\$) Payee address; State; Zip Code \$2,500.00 3316 Lake Forest Dr Nacogdoches, TX 75964 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Contract Labor Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/13/2023 Kline's Amount (\$) Payee address; City; State; Zip Code \$2,485.47 628 N University Dr Nacogdoches, TX 75961 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Printing Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/25/2023 Kniffen, Megan Amount (\$) Payee address: City: State; Zip Code \$440.00 11801 Bayton Drive Frisco, TX 75035 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Contract Labor Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 17/22 Rpt:	Clardy, Travis P. (The Honorable) 00067818
4	Date	5 Payee name
	10/10/2023	Kniffen, Megan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$265.00	11801 Bayton Drive
		Frisco, TX 75035
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Contract Labor Expense
_		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/06/2023	Kniffen, Megan
	Amount (\$)	Payee address; City; State; Zip Code
	\$685.00	11801 Bayton Drive
		Frisco, TX 75035
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign Contract Labor Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	Description
	Date 07/21/2023	Payee name Nacogdoches Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	2516 North St
		Nacogdoches, TX 75965
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Subscription/Dues Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	o
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

ense Travel in Di ense Travel Out o ges/Contract Labor OTHER (en

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/22 Rpt:	Clardy, Travis P. (The Honorable) 00067818
4	Date	5 Payee name
	12/05/2023	Nacogdoches County Republican Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	PO Box 630866
		Nacogdoches , TX 75963
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Subscription/Dues Expense
		Campaigh Subscription/Dues Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
<u> </u>	Dete	
	Date	Payee name
	12/11/2023	Nacogdoches County Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	P.O. Box 60866
		Nacogdoches, TX 75963
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Compaign Subscription/Duce Expanse
		Campaign Subscription/Dues Expense
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	
_	_	
	Date	Payee name
	08/09/2023	Newton County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	213 Court Street
		Newton, TX 75966
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Sponsorship for Precinct Chairmen
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment		The Instruction Guide explains how to c	ompl	lete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 19/22 Rpt:		Clardy, Travis P. (The Honorable)		00067818
4	Date	5	Payee name		
	11/29/2023		Point A Media Inc		
6	Amount (\$)	7	Payee address; City; State; Zip C	ode	
	\$1,485.00		2908 Westward Dr		
			Nacogdoches, TX 75964		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)) Description
	OF EXPENDITURE		Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE				Check if Austin, TX, officeholder living expense
					Campaign Advertising Expense
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office so	uaht	t Office held
	expenditure to benefit C/O		Candidate/Officeriolder frame Office Sci	ugnt	. Office field
_	Data	Т	David and the second		
	Date 11/15/2023		Payee name Republican Party of Texas		
		┡	· · · · · · · · · · · · · · · · · · ·		
	Amount (\$) \$750.00		Payee address; City; State; Zip C	oue	
	\$750.00		1108 Lavaca, Suite 500		
			Austin TV 70701		
		L	Austin, TX 78701	1	
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Office Overhead/Rental Expense		Check if dayer dustice of rexast Complete Scredule 1.
					Campaign Subscription/Dues Expense
	Complete ONLY if direct		Candidate/Officeholder name Office so	ught	t Office held
	expenditure to benefit C/O	Н			
	Date		Payee name		
	08/31/2023		Rodrigues & Morgan LLC		
	Amount (\$)		Payee address; City; State; Zip C	ode	
	\$395.00		2301 South Street		
			Nacogdoches, TX 75964		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)) Description
	OF EXPENDITURE		Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE				Check if Austin, TX, officeholder living expense
					Campaign Accounting Expense
	Complete ONLY if direct	<u> </u>	Condidate/Officeholder norms	ualst.	Office held
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office so	ugnt	t Office held
_					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	S .	Expense Printing E	Expense Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not lis	ted above)
1	Total pages Schedule F1:		urabla)		,	nmission Filers)
Ļ	Sch: 20/22 Rpt:	Clardy, Travis P. (The Hono	nable)		00067818	
4	Date	Payee name				
	11/06/2023	Sherry Braden Photography				
6	Amount (\$)	Payee address; City;	State; Zip Co	ode		
	\$1,082.50	620 Norma St				
		Nacogdoches, TX 75965				
8	PURPOSE	a) Category (See Categories listed at the	ne top of this schedule)	(b) Description		
	OF EXPENDITURE	Advertising Expense			rel outside of Texas. Complete Schedule stin, TX, officeholder living expense	Т.
					Advertising Expense	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sou	ught	Office held	
	Date	Payee name				
	07/19/2023	Texas Department of Crimir	nal Justice			
	Amount (\$)	Payee address; City;	State; Zip Co	ode		
	\$49.80	PO Box 13084	•			
		Capitol Station				
		Austin, TX 78711				
	PURPOSE	A) Category (See Categories listed at th	ne top of this schedule)	(b) Description		
	OF EXPENDITURE	Gift/Awards/Memorials Expe		Check if trav	rel outside of Texas. Complete Schedule	Т.
				. —	citin, TX, officeholder living expense	
				Campaign	Gift Expense	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sou	<u>l</u> ught	Office held	
	Date	Payee name				
	12/04/2023	The Daily Sentinel				
	Amount (\$)	Payee address; City;	State; Zip Co	ode		
	\$192.00	4920 Colonial Dr				
		Nacogdoches, TX 75965				
	PURPOSE	a) Category (See Categories listed at the	ne top of this schedule)	(b) Description		
	OF EXPENDITURE	Fees	-	I —	rel outside of Texas. Complete Schedule	Т.
					stin, TX, officeholder living expense Subscription/Dues Expense	
				Campaign	oassonphon/bues Expense	
	Complete ONLY if direct	Candidate/Officeholder name	Office sou	<u>l</u> uaht	Office held	
	expenditure to benefit C/OI		233 300	•	3 2	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/22 Rpt:	Clardy, Travis P. (The Honorable) 00067818
4	Date	5 Payee name
	10/13/2023	USPS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2.07	3007 N. University Drive
		Nacogdoches, TX 75965
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Postage Expense
		Santipoligies Sounge — Person
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	12/05/2023	USPS
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,862.00	3007 N. University Drive
		Nacogdoches, TX 75965
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Postage Expense
		Santipoligies Sounge — Person
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	12/11/2023	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.41	PO BOX 9891
		Arlington, VA 22219
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Credit Card Expense
		Campaign Great Gara Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
1		

SCHEDULE F1

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1: Sch: 22/22 Rpt:	2 FILER NAME Clardy, Travis P. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067818
4	Date 12/17/2023	5 Payee name WinRed	<u>'</u>
6	Amount (\$) \$4.10	7 Payee address; City; State; Zip Code PO BOX 9891 Arlington, VA 22219	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Credit Card Expense
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 12/22/2023	Payee name WinRed	
	Amount (\$) \$10.25	Payee address; City; State; Zip Code PO BOX 9891 Arlington, VA 22219	
	PURPOSE OF EXPENDITURE		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Credit Card Expense
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 12/22/2023	Payee name WinRed	
	Amount (\$) \$4.10	Payee address; City; State; Zip Code PO BOX 9891	
		Arlington, VA 22219	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Credit Card Expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By -				Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Candidate/Officeholder/Politica	I Committee	Legal Services The Instruction Guide ex		/ages/Contract Labor	OTHER (enter a category not listed abor	/e)
<u> </u>	Total pages Schedule F4:	2 FILED NAME		pianis now to co	implete tills form.	3 Filer ID (Ethics Commission	n Filers)
ľ	Sch: 1/66 Rpt: 60/125		· /is P. (The Honorable)		00067818	
4	TOTAL OF UNITEMIZ	-		•	DIT CARD	\$ 805.53	
5	Date	6 Payee name					
	09/21/2023	Fredonia H	otel				
7	Amount (\$) \$900.00	8 Payee address 200 N Fredo		State; Zip Co	de		
		Nacogdoch	es, TX 75961				
9	TYPE OF EXPENDITURE	X	Political	Non-Poli	tical		
10		(a) Category (Se	ee Categories listed at the top of	this schedule)	(b) Description		
	OF EXPENDITURE	Event Expe	nse		<u> </u>	outside of Texas. Complete Schedule T.	
					Campaign Ev	, TX, officeholder living expense vent Expense	
11	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Offic	ceholder name	Office sou	ght	Office held	
	Date	Payee name					
	09/23/2023	Fredonia H	otel				
	Amount (\$)	Payee addres	ss; City;	State; Zip Co	de		
	\$40.00	200 N Fredo	onia St.				
	Ψ10.00						
	\$10.00	Nacogdoch	es, TX 75961				
	TYPE OF EXPENDITURE		es, TX 75961 Political	Non-Poli	tical		
	TYPE OF EXPENDITURE PURPOSE	X			tical (b) Description		
	TYPE OF EXPENDITURE	(a) Category (Se	Political		(b) Description Check if travel	outside of Texas. Complete Schedule T.	
	TYPE OF EXPENDITURE PURPOSE OF	(a) Category (Se	Political ee Categories listed at the top of		(b) Description Check if travel Check if Austin	, TX, officeholder living expense	
	TYPE OF EXPENDITURE PURPOSE OF	(a) Category (Se	Political ee Categories listed at the top of		(b) Description Check if travel Check if Austin		
	TYPE OF EXPENDITURE PURPOSE OF	(a) Category (Se Food/Bever	Political ee Categories listed at the top of age Expense		(b) Description Check if travel Check if Austin Campaign Fo	, TX, officeholder living expense	
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (Se Food/Bever	Political ee Categories listed at the top of age Expense	this schedule)	(b) Description Check if travel Check if Austin Campaign Fo	TX, officeholder living expense ood/Beverage Expense	
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (Se Food/Bever	Political ee Categories listed at the top of age Expense	this schedule)	(b) Description Check if travel Check if Austin Campaign Fo	TX, officeholder living expense ood/Beverage Expense	
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (Se Food/Bever	Political ee Categories listed at the top of age Expense	this schedule)	(b) Description Check if travel Check if Austin Campaign Fo	TX, officeholder living expense ood/Beverage Expense	
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (Se Food/Bever	Political ee Categories listed at the top of age Expense	this schedule)	(b) Description Check if travel Check if Austin Campaign Fo	TX, officeholder living expense ood/Beverage Expense	
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (Se Food/Bever	Political ee Categories listed at the top of age Expense	this schedule)	(b) Description Check if travel Check if Austin Campaign Fo	TX, officeholder living expense ood/Beverage Expense	
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (Se Food/Bever	Political ee Categories listed at the top of age Expense	this schedule)	(b) Description Check if travel Check if Austin Campaign Fo	TX, officeholder living expense ood/Beverage Expense	
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (Se Food/Bever	Political ee Categories listed at the top of age Expense	this schedule)	(b) Description Check if travel Check if Austin Campaign Fo	TX, officeholder living expense ood/Beverage Expense	
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (Se Food/Bever	Political ee Categories listed at the top of age Expense	this schedule)	(b) Description Check if travel Check if Austin Campaign Fo	TX, officeholder living expense ood/Beverage Expense	
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (Se Food/Bever	Political ee Categories listed at the top of age Expense	this schedule)	(b) Description Check if travel Check if Austin Campaign Fo	TX, officeholder living expense ood/Beverage Expense	
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (Se Food/Bever	Political ee Categories listed at the top of age Expense	this schedule)	(b) Description Check if travel Check if Austin Campaign Fo	TX, officeholder living expense ood/Beverage Expense	

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursen Office Overhead/Rental Exper Polling Expense Printing Expense Salaries/Wages/Contract Labo plains how to complete this form	ransportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 2/66 Rpt: 61/125	Clardy, Travis P. (The Honorable)	00067818
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	TO A CREDIT CARD	\$ 805.53
5 Date 10/03/2023	6 Payee name Fredonia Hotel		
7 Amount (\$) \$27.00	8 Payee address; City; 200 N Fredonia St.	State; Zip Code	
	Nacogdoches, TX 75961		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	Check if	n travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense In Food/Beverage Expense
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
10/03/2023	Fredonia Hotel		
Amount (\$) \$135.00	Payee address; City; 200 N Fredonia St. Nacogdoches, TX 75961	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	Check if	n travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense n Food/Beverage Expense
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 10(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Polling E e Printing E		Travel in Dist Travel Out of	
Canadato, Cinocinotacini Cinaci	The Instruction Guide ex			0 11 i i i i i i i i i i i i i i i i i i	n a category not noted above,
1 Total pages Schedule F4: Sch: 3/66 Rpt: 62/125	2 FILER NAME Clardy, Travis P. (The Honorable	e)		3 Filer ID 0006781	(Ethics Commission Filers)
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	D TO A CRE	EDIT CARD	\$	805.53
5 Date 11/03/2023	6 Payee name Fredonia Hotel				
7 Amount (\$) \$83.00	8 Payee address; City; 200 N Fredonia St.	State; Zip C	ode		
	Nacogdoches, TX 75961				
9 TYPE OF EXPENDITURE	X Political	Non-Po	litical		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top o Food/Beverage Expense	f this schedule)	Check if Aust	el outside of Texas. C iin, TX, officeholder li Food/Beverage	ving expense
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	ught	Office	held
Date	Payee name				
08/13/2023	Fredonia Hotel				
Amount (\$) \$900.00	Payee address; City; 200 N Fredonia St. Nacogdoches, TX 75961	State; Zip C	ode		
TYPE OF EXPENDITURE	X Political	Non-Po	litical		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Event Expense	f this schedule)	Check if Aust	el outside of Texas. C tin, TX, officeholder liv Event Expense	ving expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office so	ught	Office	held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ns how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	· · · · · · · · · · · · · · · · · · ·	ns now to complete this form.	3 Filer ID (Ethics Commission Filers)
Sch: 4/66 Rpt: 63/125	Clardy, Travis P. (The Honorable)		00067818
4	ZED EXPENDITURES CHARGED T	O A CREDIT CARD	\$ 805.53
5 Date 10/13/2023	6 Payee name Fredonia Hotel		,
7 Amount (\$) \$99.50	200 N Fredonia St.	ate; Zip Code	
9 TYPE OF	Nacogdoches, TX 75961 X Political	Non-Political	
EXPENDITURE			
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense cood/Beverage Expense
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
07/24/2023	AT &T Communications		
Amount (\$) \$132.06	Payee address; City; Sta PO Box 598014 Orlando, FL 32859	ate; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense elephone Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 10(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica		Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contra	Expense Transportation Equipment & Related Expense Travel in District Travel Out of District
		olains how to complete this	
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 5/66 Rpt: 64/125	Clardy, Travis P. (The Honorable)	00067818
4 TOTAL OF UNITEMI	ZED EXPENDITURES CHARGE	TO A CREDIT CA	RD \$ 805.53
5 Date	6 Payee name		•
08/24/2023	AT &T Communications		
7 Amount (\$) \$132.06	PO Box 598014	State; Zip Code	
	Orlando, FL 32859		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE	(a) Category (See Categories listed at the top of	this schedule) (b) Descr	iption
OF EXPENDITURE	Office Overhead/Rental Expense		neck if travel outside of Texas. Complete Schedule T.
		-	neck if Austin, TX, officeholder living expense paign Telephone Expense
		Cam	paigit releptione Expense
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
09/25/2023	AT &T Communications		
Amount (\$)	Payee address; City;	State; Zip Code	
\$132.06	PO Box 598014		
	Orlando, FL 32859		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE	(a) Category (See Categories listed at the top of	this schedule) (b) Descr	iption
OF EXPENDITURE	Office Overhead/Rental Expense		neck if travel outside of Texas. Complete Schedule T.
		-	neck if Austin, TX, officeholder living expense
		Cam	paign Telephone Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking	Event Expense Fees Feed/Reverge Expense		ayment/Reimbursement rhead/Rental Expense		aising Expense uipment & Related Expense
Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Printing Ex		Travel in District Travel Out of District OTHER (onter a content of the content o	rict category not listed above)
Candidate/Onicenoide// Onice	The Instruction Guide exp			OTTLK (enter a c	ategory not listed above)
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID	(Ethics Commission Filers)
Sch: 6/66 Rpt: 65/125	Clardy, Travis P. (The Honorable)			00067818	
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CRE	DIT CARD	\$	805.53
5 Date 10/24/2023	6 Payee name AT &T Communications				
7 Amount (\$)		State; Zip Co	de		
\$137.25	PO Box 598014	ziato, Lip Go	uo		
	Orlando, FL 32859				
9 TYPE OF EXPENDITURE	X Political	Non-Poli	tical		
10 PURPOSE	(a) Category (See Categories listed at the top of the	nis schedule)	(b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense		ш	outside of Texas. Compl , TX, officeholder living of	
			ш	elephone Expens	·
			1 3		
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sou	ght	Office hel	d
Date	Payee name				
12/18/2023	AT &T Communications				
Amount (\$)	Payee address; City; S	State; Zip Co	de		
\$137.25	PO Box 598014				
	0.1151.00050				
TVDF 05	Orlando, FL 32859				
TYPE OF EXPENDITURE	X Political	Non-Poli	tical		
PURPOSE	(a) Category (See Categories listed at the top of the	nis schedule)	(b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense		<u> </u>	outside of Texas. Compl , TX, officeholder living of	
				elephone Expens	•
			Campaig. 13		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sou	ght	Office hel	d

EXPENDITURES MADE BY CREDIT CARD EXPENDITURE CATEGORIES FOR BOX 10(a)

SCHEDULE **F4**

Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	al Committee Legal Services	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide explains	s how to complete this form.	
1 Total pages Schedule F4:			3 Filer ID (Ethics Commission Filers)
Sch: 7/66 Rpt: 66/125	Clardy, Travis P. (The Honorable)		00067818
TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED TO	A CREDIT CARD	\$ 805.53
5 Date	6 Payee name		
12/24/2023	AT &T Communications		
7 Amount (\$) \$137.85	PO Box 598014	e; Zip Code	
	Orlando, FL 32859		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE	(a) Category (See Categories listed at the top of this so	(b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	1 <u>-</u>	outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense elephone Expense
		Campaign	elephone Expense
11 Complete ONLY if direct expenditure to benefit C/O		Office sought	Office held
Date	Payee name		
10/17/2023	Austin Land & Cattle		
Amount (\$) \$573.06	Payee address; City; State 1205 N Lamar Blvd	e; Zip Code	
	Austin, TX 78703		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE	(a) Category (See Categories listed at the top of this so	(b) Description	
OF EXPENDITURE	Food/Beverage Expense		outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense ood/Beverage Expense
		Campaign	oou/beverage Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O		Office sought	Office held
		Office sought	Office held
		Office sought	Office held
		Office sought	Office held
		Office sought	Office held
		Office sought	Office held
		Office sought	Office held
		Office sought	Office held
		Office sought	Office held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense	Office Over Polling Exp			draising Expense Equipment & Related Expense tt
Contributions/ Donations Made By Candidate/Officeholder/Politica		Printing Exp Salaries/Wa	ense ages/Contract Labor	Travel Out of Di OTHER (enter a	istrict a category not listed above)
	The Instruction Guide expla	ains how to con	plete this form.		
1 Total pages Schedule F4:				3 Filer ID	(Ethics Commission Filers)
Sch: 8/66 Rpt: 67/125	Clardy, Travis P. (The Honorable)			00067818	
TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREE	OIT CARD	\$	805.53
5 Date	6 Payee name				
12/13/2023	Austin Land & Cattle				
7 Amount (\$)		state; Zip Coo	le		
\$210.00	1205 N Lamar Blvd				
	Austin, TX 78703				
9 TYPE OF	X Political	Non-Politi	cal		
EXPENDITURE	[7] 1 0				
10 PURPOSE OF	(a) Category (See Categories listed at the top of th	is schedule)	(b) Description		
EXPENDITURE	Food/Beverage Expense		<u> </u>	outside of Texas. Con n, TX, officeholder livin	
				ood/Beverage I	
			, J		P
11 Complete ONLY if direct	Candidate/Officeholder name	Office soug	ht	Office h	eld
expenditure to benefit C/O	Н	_			
Date	Payee name				
07/09/2023	Barbecue House				
Amount (\$)	Payee address; City; S	state; Zip Cod	le		
\$40.66	704 Stallings Dr N				
	Nacogdoches, TX 75965				
TYPE OF EXPENDITURE	X Political	Non-Politi	cal		
PURPOSE	(a) Category (See Categories listed at the top of th	is schedule)	(b) Description		
OF EXPENDITURE	Food/Beverage Expense		=	outside of Texas. Con	
				n, TX, officeholder livin pod/Beverage I	
			Campaign	Jour Beverage 1	_xpense
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name H	Office soug	ht	Office h	eld
I					

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Overhea Polling Expens e Printing Exper Salaries/Wage	es/Contract Labor	Transportation E Travel in District Travel Out of Dis	raising Expense quipment & Related Expense strict category not listed above)
1 Total pages Schedule F4:		planto non to comp	3	Filer ID	(Ethics Commission Filers)
Sch: 9/66 Rpt: 68/125	Clardy, Travis P. (The Honorable	:)		00067818	,
4 TOTAL OF UNITEMIA	ZED EXPENDITURES CHARGEI	D TO A CREDI	T CARD \$	3	805.53
5 Date 09/30/2023	6 Payee name Brendyn's BBQ		•		
7 Amount (\$) \$47.13	8 Payee address; City; 601 E Main St	State; Zip Code			
	Nacogdoches, TX 75961				
9 TYPE OF EXPENDITURE	X Political	Non-Politica	ıl		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	this schedule) (b)	<u> </u>	tside of Texas. Com X, officeholder living d/Beverage E	expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought		Office he	eld
Date	Payee name				
08/05/2023	Butcher Boys				
Amount (\$) \$28.12	Payee address; City; 603 North St	State; Zip Code			
TVDF OF	Nacogdoches, TX 75961				
TYPE OF EXPENDITURE	X Political	Non-Politica	d		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	this schedule) (b)	\Box	tside of Texas. Com X, officeholder living d/Beverage E	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought		Office he	eld

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense	Office Overl Polling Expe		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Contributions/ Donations Made B Candidate/Officeholder/Politica	al Committee Legal Services	Salaries/Wa	ges/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
4 7 1 0 1 1 5	The Instruction Guide ex	rplains how to com	plete this form.	To structure str
1 Total pages Schedule F4: Sch: 10/66 Rpt:	Clardy, Travis P. (The Honorable	;)		3 Filer ID (Ethics Commission Filers) 00067818
4 TOTAL OF UNITEMI	ZED EXPENDITURES CHARGE	D TO A CRED	OIT CARD	\$ 805.53
5 Date 10/12/2023	6 Payee name Butcher Boys			
7 Amount (\$) \$33.21	8 Payee address; City; 603 North St	State; Zip Cod	е	
	Nacogdoches, TX 75961			
9 TYPE OF EXPENDITURE	X Political	Non-Politi	cal	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top o Food/Beverage Expense	f this schedule)	Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense cood/Beverage Expense
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	ht	Office held
Date	Payee name			
10/12/2023	Butcher Boys			
Amount (\$) \$32.12	Payee address; City; 603 North St	State; Zip Cod	е	
TVD= 05	Nacogdoches, TX 75961			
TYPE OF EXPENDITURE	X Political	Non-Politi	cal	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top o Food/Beverage Expense	f this schedule) (Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense cood/Beverage Expense
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	ht	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense	Office Ove Polling Ex		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Contributions/ Donations Made By Candidate/Officeholder/Politica			rpense /ages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide ex	plains how to co	mplete this form.	1
1 Total pages Schedule F4: Sch: 11/66 Rpt:	2 FILER NAME Clardy, Travis P. (The Honorable	e)		3 Filer ID (Ethics Commission Filers) 00067818
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	O TO A CRE	DIT CARD	\$ 805.53
5 Date 12/09/2023	6 Payee name Butcher Boys			
7 Amount (\$) \$30.28	8 Payee address; City; 603 North St	State; Zip Co	de	
	Nacogdoches, TX 75961			
9 TYPE OF EXPENDITURE	X Political	Non-Poli	tical	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	this schedule)	Check if Austin	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense ood/Beverage Expense
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sou	ght	Office held
Date	Payee name			
12/05/2023	Capitol Gift Shop			
Amount (\$) \$1,082.50	Payee address; City; 1201 San Jacinto Austin, TX 78701	State; Zip Co	de	
TYPE OF EXPENDITURE	X Political	Non-Poli	tical	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Gift/Awards/Memorials Expense	this schedule)		outside of Texas. Complete Schedule T. n, TX, officeholder living expense ift Expense
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ght	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Salaries/Wages/Co	ransportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 12/66 Rpt:	Clardy, Travis P. (The Honorable	e)	00067818
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	D TO A CREDIT (CARD \$ 805.53
5 Date 07/20/2023	6 Payee name Clear Springs Restaurant		
7 Amount (\$) \$55.00	8 Payee address; City; 211 Old Tyler Road	State; Zip Code	
	Nacogdoches, TX 75961		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top o Food/Beverage Expense		escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Food/Beverage Expense
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
11/10/2023	Clear Springs Restaurant		
Amount (\$) \$45.97	Payee address; City; 211 Old Tyler Road Nacogdoches, TX 75961	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top o Food/Beverage Expense		escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Food/Beverage Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertishing Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	Fees Fees Food/Beverage Expense y - Gift/Awards/Memorials Exp legal Services Legal Services	Office Ov Polling E pense Printing E		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
Candidate/Onicendiden/Politic	The Instruction Guide		9	OTHER (effer a category flot listed above)
4 Total marca Calcadula E4			ompiete tilis ioriii.	2 Files ID (Ethica Commission Files)
1 Total pages Schedule F4:		1.1.3		3 Filer ID (Ethics Commission Filers)
Sch: 13/66 Rpt:	Clardy, Travis P. (The Honoral	bie)		00067818
4 TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	SED TO A CRE	EDIT CARD	\$ 805.53
5 Date	6 Payee name			
10/09/2023	Danwal Inc			
7 Amount (\$) \$826.25	8 Payee address; City; 12404 Hwy 155 S	State; Zip Co	ode	
	Tyler, TX 75703			
9 TYPE OF EXPENDITURE	X Political	Non-Pol	litical	
10 PURPOSE	(a) Category (See Categories listed at the to	op of this schedule)	(b) Description	
OF EXPENDITURE	Advertising Expense		Check if trave	el outside of Texas. Complete Schedule T.
EXPENDITURE			, <u>—</u>	in, TX, officeholder living expense
			Campaign A	Advertising Expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ught	Office held
Date	Payee name			
12/19/2023	Danwal Inc			
Amount (\$) \$4,544.36	Payee address; City; 12404 Hwy 155 S	State; Zip Co	ode	
	Tyler, TX 75703			
TYPE OF EXPENDITURE	X Political	Non-Pol	litical	
PURPOSE	(a) Category (See Categories listed at the to	op of this schedule)	(b) Description	
OF EXPENDITURE	Advertising Expense		Check if trave	el outside of Texas. Complete Schedule T.
LAFLINDITORL			I <u></u>	in, TX, officeholder living expense
			Campaign A	Advertising Expense
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sou	ught	Office held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made Book Candidate/Officeholder/Politica		Offi pense Pol ials Expense Prii	ce Overhead/Rental Expense ling Expense nting Expense aries/Wages/Contract Labor	Transportation Equipment & Related Ex Travel in District Travel Out of District OTHER (enter a category not listed abo	
	The Instruction	Guide explains how	to complete this form.		
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
Sch: 14/66 Rpt:	Clardy, Travis P. (The Ho	onorable)		00067818	
4 TOTAL OF UNITEMI	ZED EXPENDITURES CH	ARGED TO A	CREDIT CARD	\$ 805.53	
5 Date	6 Payee name				
08/18/2023	Dolli's Diner				
7 Amount (\$) \$130.00	8 Payee address; City; 116 S. Pecan Street	State; Zi	p Code		
	Nacogdoches, TX 75961				
9 TYPE OF EXPENDITURE	X Political	Nor	n-Political		
10 PURPOSE	(a) Category (See Categories listed	at the top of this schedule) (b) Description		
OF EXPENDITURE	Food/Beverage Expense		Check if Aust	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense Food/Beverage Expense	
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Offic	e sought	Office held	
Date	Payee name				
08/23/2023	Dolli's Diner				
Amount (\$) \$44.00	Payee address; City; 116 S. Pecan Street	State; Zi	p Code		
	Nacogdoches, TX 75961				
TYPE OF EXPENDITURE	X Political	Nor	n-Political		
PURPOSE OF	(a) Category (See Categories listed		_ '		
EXPENDITURE	Food/Beverage Expense		_	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense	
			 	Food/Beverage Expense	
			Jan-paign i		
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Offic	e sought	Office held	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a) Advertising Expense Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Polling E rpense Printing	vernead/Rental Expense Expense Expense Wages/Contract Labor	Travel in Distr Travel Out of	
	The Instruction Guid	le explains how to c	omplete this form.		
1 Total pages Schedule F4: Sch: 15/66 Rpt:	2 FILER NAME Clardy, Travis P. (The Honora	able)		3 Filer ID 00067818	(Ethics Commission Filers)
4	ZED EXPENDITURES CHARG	•	EDIT CARD	\$	805.53
5 Date	6 Payee name			1	
10/02/2023	Dolli's Diner				
7 Amount (\$) \$43.00	8 Payee address; City; 116 S. Pecan Street	State; Zip C	ode		
	Nacogdoches, TX 75961				
9 TYPE OF EXPENDITURE	X Political	Non-Po	litical		
10 PURPOSE	(a) Category (See Categories listed at the	top of this schedule)	(b) Description		
OF EXPENDITURE	Food/Beverage Expense		ı <u>—</u>	l outside of Texas. Co	
			-	in, TX, officeholder liv	
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	ught	Office	held
Date	Payee name				
10/11/2023	Dolli's Diner				
Amount (\$) \$43.61	Payee address; City; 116 S. Pecan Street	State; Zip C	ode		
	Nacogdoches, TX 75961				
TYPE OF EXPENDITURE	X Political	Non-Po	litical		
PURPOSE	(a) Category (See Categories listed at the	top of this schedule)	(b) Description		
OF EXPENDITURE	Food/Beverage Expense		ı <u>—</u>	l outside of Texas. Co in, TX, officeholder liv	
				ood/Beverage	
			Jan. Paug. 1		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	ught	Office	held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ins how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:		·	3 Filer ID (Ethics Commission Filers)
Sch: 16/66 Rpt:	Clardy, Travis P. (The Honorable)		00067818
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED T	O A CREDIT CARD	\$ 805.53
5 Date 10/28/2023	6 Payee name Dolli's Diner		
7 Amount (\$) \$38.00	8 Payee address; City; Sta 116 S. Pecan Street Nacogdoches, TX 75961	ate; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense pood/Beverage Expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
09/14/2023	Doubletree		
Amount (\$) \$689.40	Payee address; City; Sta 303 W. 15th Street Austin, TX 78701	ate; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Travel Out of District	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ravel Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense	Office Over Polling Exp		Transportation E Travel in District	
Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Legal Services		ages/Contract Labor	Travel Out of Dis OTHER (enter a	a category not listed above)
4 7 1 0 1 1 54	The Instruction Guide exp	lains how to con	nplete this form.	la =:	(Elliss Os assissing Elless)
1 Total pages Schedule F4: Sch: 17/66 Rpt:	Clardy, Travis P. (The Honorable)			3 Filer ID 00067818	(Ethics Commission Filers)
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREI	DIT CARD	\$	805.53
5 Date 10/11/2023	6 Payee name Doubletree				
7 Amount (\$) \$184.00	8 Payee address; City; S 303 W. 15th Street Austin, TX 78701	State; Zip Coo	le		
9 TYPE OF EXPENDITURE	X Political	Non-Politi	cal		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Travel Out of District	his schedule)	Check if Austin	outside of Texas. Com n, TX, officeholder living avel Expense	•
11 Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	Office soug	ht	Office he	eld
Date 11/17/2023	Payee name Doubletree				
Amount (\$) \$985.39	Payee address; City; S 303 W. 15th Street Austin, TX 78701	State; Zip Coo	le		
TYPE OF EXPENDITURE	X Political	Non-Politi	cal		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Travel Out of District	his schedule)	Check if Austin	outside of Texas. Com n, TX, officeholder living avel Expense	•
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	Office soug	ht	Office he	eld

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	y - Gift/Awa al Committee Legal S			ense ges/Contract Labor	Travel Out of D OTHER (enter	
		struction Guide expla	ins now to com	ipiete this form.	<u> </u>	
1 Total pages Schedule F4:					3 Filer ID	(Ethics Commission Filers)
Sch: 18/66 Rpt:	Clardy, Travis P.	(The Honorable)			00067818	
4 TOTAL OF UNITEMIZ	ZED EXPENDITUR	RES CHARGED	TO A CRED	OIT CARD	\$	805.53
5 Date	6 Payee name			•		
11/29/2023	Doubletree					
7 Amount (\$)	8 Payee address;	City; St	ate; Zip Cod	e		
\$220.22	303 W. 15th Stre	•	•			
,						
	Austin, TX 78701					
9 TYPE OF	_					
EXPENDITURE	X Politica	al	Non-Politic	cal		
10 PURPOSE	(a) Category (See Categ	gories listed at the top of this	schedule) (b) Description		
OF EXPENDITURE	Travel Out of Dis	trict		<u> </u>	outside of Texas. Cor	
EXI ENDITORE				ш	, TX, officeholder livin	ng expense
				Campaign Tra	avel Expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officehold H	der name	Office soug	ht	Office h	eld
Date	Payee name					
12/06/2023	Doubletree					
Amount (\$)	Payee address;	City; St	ate; Zip Cod	e		
\$157.43	303 W. 15th Stre	•	, _р			
Ψ101.40	000 W. 1001 000	Ci				
	Austin, TX 78701					
TYPE OF		<u> </u>				
EXPENDITURE	X Politica	al	Non-Politic	cal		
PURPOSE	(a) Category (See Categ	gories listed at the top of this	schedule) (b) Description		
OF	Travel Out of Dis	trict		_	outside of Texas. Cor	nplete Schedule T.
EXPENDITURE				Check if Austin,	, TX, officeholder livin	g expense
				Campaign Tra	avel Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officehold	ler name	Office soug	ht	Office h	eld

SCHEDULE F4

	Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense	Office Ove Polling Ex		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District	
	Contributions/ Donations Made By Candidate/Officeholder/Politica	y - Gift/Awards/Memorials Expense al Committee Legal Services		kpense /ages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)	
		The Instruction Guide exp	plains how to co	mplete this form.	1	
1	Total pages Schedule F4: Sch: 19/66 Rpt:	2 FILER NAME Clardy, Travis P. (The Honorable)	١		3 Filer ID (Ethics Commission Filers) 00067818	1
4			•			
Ĺ	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CRE	DIT CARD	\$ 805.53	
5	Date 12/15/2023	6 Payee name Doubletree				
7	Amount (\$)	8 Payee address; City;	State; Zip Co	de		
	\$158.14	303 W. 15th Street				
		Austin, TX 78701				
9	TYPE OF EXPENDITURE	X Political	Non-Poli	tical		
10		(a) Category (See Categories listed at the top of	this schedule)	(b) Description		
	OF EXPENDITURE	Travel Out of District		<u> </u>	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
				ш	ravel Expense	
					•	
11	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ght	Office held	
F	Date	Payee name				_
	11/29/2023	Doubletree				
	Amount (\$) \$15.00	Payee address; City; 303 W. 15th Street	State; Zip Co	de		
		Austin, TX 78701				
	TYPE OF EXPENDITURE	X Political	Non-Poli	tical		
	PURPOSE	(a) Category (See Categories listed at the top of	this schedule)	(b) Description		
	OF EXPENDITURE	Travel Out of District			l outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
				<u> </u>	ravel Expense	
				, ,	•	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ght	Office held	
H						
1						

SCHEDULE **F4**

Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	al Committee Legal Services	Office Over Polling Exp Printing Exp Salaries/Wa	pense ages/Contract Labor	Travel in District Travel Out of Dis	quipment & Related Expense
	The Instruction Guide exp	lains now to con	· ·		
1 Total pages Schedule F4:				3 Filer ID	(Ethics Commission Filers)
Sch: 20/66 Rpt:	Clardy, Travis P. (The Honorable)			00067818	
TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED	TO A CREI	DIT CARD	\$	805.53
5 Date	6 Payee name				
07/03/2023	El Ranchero				
7 Amount (\$) \$50.00	126 King St	State; Zip Coo	de		
	Nacogdoches, TX 75961				
9 TYPE OF EXPENDITURE	X Political	Non-Politi	ical		
10 PURPOSE	(a) Category (See Categories listed at the top of t	this schedule)	(b) Description		
OF EXPENDITURE	Food/Beverage Expense		<u> </u>	outside of Texas. Com	
			ш	TX, officeholder living	
			Campaign Fo	od/Beverage E	xpense
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	yht	Office he	eld
Date	Payee name				
07/24/2023	El Ranchero				
Amount (\$)	Payee address; City;	State; Zip Cod	de		
\$38.00	126 King St	•			
, , , , ,					
	Nacogdoches, TX 75961				
TYPE OF		☐ Non Dolini	in al		
EXPENDITURE	X Political	Non-Politi	Icai		
PURPOSE	(a) Category (See Categories listed at the top of t	this schedule)	(b) Description		
OF				ustaida of Tayloo Com	ploto Cobodulo T
EVENDITUEE	Food/Beverage Expense		Check if travel of	outside of Texas. Com	piete Scriedule 1.
EXPENDITURE	Food/Beverage Expense		=	TX, officeholder living	
EXPENDITURE	Food/Beverage Expense		Check if Austin,		expense
EXPENDITURE	Food/Beverage Expense		Check if Austin,	TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office soug	Check if Austin, Campaign Fo	TX, officeholder living	expense
Complete <u>ONLY</u> if direct	Candidate/Officeholder name	Office soug	Check if Austin, Campaign Fo	TX, officeholder living od/Beverage E	expense
Complete <u>ONLY</u> if direct	Candidate/Officeholder name	Office soug	Check if Austin, Campaign Fo	TX, officeholder living od/Beverage E	expense
Complete <u>ONLY</u> if direct	Candidate/Officeholder name	Office soug	Check if Austin, Campaign Fo	TX, officeholder living od/Beverage E	expense
Complete <u>ONLY</u> if direct	Candidate/Officeholder name	Office soug	Check if Austin, Campaign Fo	TX, officeholder living od/Beverage E	expense
Complete <u>ONLY</u> if direct	Candidate/Officeholder name	Office soug	Check if Austin, Campaign Fo	TX, officeholder living od/Beverage E	expense
Complete <u>ONLY</u> if direct	Candidate/Officeholder name	Office soug	Check if Austin, Campaign Fo	TX, officeholder living od/Beverage E	expense
Complete <u>ONLY</u> if direct	Candidate/Officeholder name	Office soug	Check if Austin, Campaign Fo	TX, officeholder living od/Beverage E	expense
Complete <u>ONLY</u> if direct	Candidate/Officeholder name	Office soug	Check if Austin, Campaign Fo	TX, officeholder living od/Beverage E	expense
Complete <u>ONLY</u> if direct	Candidate/Officeholder name	Office soug	Check if Austin, Campaign Fo	TX, officeholder living od/Beverage E	expense
Complete <u>ONLY</u> if direct	Candidate/Officeholder name	Office soug	Check if Austin, Campaign Fo	TX, officeholder living od/Beverage E	expense

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By	Event Expense Fees Food/Beverage Expense /- Gift/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District
Candidate/Officeholder/Politica	d Committee Legal Services	Salaries/Wages/Contract Labor unns how to complete this form.	OTHER (enter a category not listed above)
1 Total pages Schedule F4:	·	uns now to complete this form.	3 Filer ID (Ethics Commission Filers)
Sch: 21/66 Rpt:	Clardy, Travis P. (The Honorable)		00067818
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$ 805.53
5 Date 08/13/2023	6 Payee name El Ranchero		
7 Amount (\$) \$105.00	8 Payee address; City; St 126 King St	ate; Zip Code	
	Nacogdoches, TX 75961		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ood/Beverage Expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
08/30/2023	El Ranchero		
Amount (\$) \$45.00	Payee address; City; St 126 King St Nacogdoches, TX 75961	ate; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
	(6)		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ood/Beverage Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ns how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:		·	3 Filer ID (Ethics Commission Filers)
Sch: 22/66 Rpt:	Clardy, Travis P. (The Honorable)		00067818
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED T	O A CREDIT CARD	\$ 805.53
5 Date 09/22/2023	6 Payee name El Ranchero		
7 Amount (\$) \$34.00	126 King St	ate; Zip Code	
9 TYPE OF EXPENDITURE	Nacogdoches, TX 75961 X Political	Non-Political	
10 PURPOSE		schedule) (b) Description	
OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense pod/Beverage Expense
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
10/07/2023	El Ranchero		
Amount (\$) \$40.00	Payee address; City; Sta 126 King St Nacogdoches, TX 75961	ate; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ood/Beverage Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ns how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	· · · · · · · · · · · · · · · · · · ·	·	3 Filer ID (Ethics Commission Filers)
Sch: 23/66 Rpt:	Clardy, Travis P. (The Honorable)		00067818
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED T	O A CREDIT CARD	\$ 805.53
5 Date 11/19/2023	6 Payee name El Ranchero		
7 Amount (\$) \$95.00	126 King St	ate; Zip Code	
9 TYPE OF	Nacogdoches, TX 75961 X Political	Non-Political	
EXPENDITURE		<u> </u>	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ood/Beverage Expense
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
12/15/2023	El Ranchero		
Amount (\$) \$58.00	Payee address; City; Sta 126 King St Nacogdoches, TX 75961	ate; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ood/Beverage Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense	Office Over Polling Exp		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Salaries/W	ages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide exp	plains how to cor	nplete this form.	1
1 Total pages Schedule F4: Sch: 24/66 Rpt:	2 FILER NAME Clardy, Travis P. (The Honorable))		3 Filer ID (Ethics Commission Filers) 00067818
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	O TO A CREI	DIT CARD	\$ 805.53
5 Date 12/28/2023	6 Payee name El Ranchero			
7 Amount (\$) \$30.00	8 Payee address; City; 126 King St	State; Zip Coo	de	
	Nacogdoches, TX 75961			
9 TYPE OF EXPENDITURE	X Political	Non-Polit	ical	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	this schedule)	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ood/Beverage Expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name H	Office souç	ht	Office held
Date	Payee name			
07/31/2023	Enterprise Rent a Car			
Amount (\$) \$366.60	3600 Presidential Blvd St	State; Zip Coo	de	
	Austin, TX 78719			
TYPE OF EXPENDITURE	X Political	Non-Polit	ical	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Travel Out of District	this schedule)	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ravel Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name H	Office souç	yht	Office held

SCHEDULE F4

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 10(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Ove Polling Ex Printing Ex		Travel Travel	ortation Equipment & Related Expense in District Out of District R (enter a category not listed above)
			The Instruction Guide exp				
1	Total pages Schedule F4:	2 FILER NAM	E			3 Filer	ID (Ethics Commission Filers)
	Sch: 25/66 Rpt:	Clardy, Tra	vis P. (The Honorable)			0006	37818
4	TOTAL OF UNITEMIZ	ZED EXPEND	DITURES CHARGED	TO A CRE	DIT CARD	\$	805.53
5	Date 08/26/2023	6 Payee name Enterprise	e Rent a Car				
7	Amount (\$) \$206.51		dential Blvd St	State; Zip Co	de		
9	TYPE OF	Austin, TX	78719 Political	Non-Poli	tical		
	EXPENDITURE		Tollical		iicai		
10		(a) Category (s	See Categories listed at the top of	this schedule)	(b) Description		
	OF EXPENDITURE	Travel Out	of District		<u> </u>	n, TX, officeho	exas. Complete Schedule T. Dider living expense DENSE
					, in [1.1.5]		
11	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ght	C	Office held
	Date	Payee name)				
	09/12/2023	Enterprise	Rent a Car				
	Amount (\$) \$371.76	Payee addre	ess; City; dential Blvd St	State; Zip Co	de		
	Ψ5/1.70	3000 F1631	dential biva St				
		Austin, TX	78719				
	TYPE OF EXPENDITURE	X	Political	Non-Poli			
	PURPOSE OF	(a) Category (s	See Categories listed at the top of	this schedule)	(b) Description		
	EXPENDITURE	Travel Out	of District		<u> </u>		exas. Complete Schedule T. Older living expense
					Campaign Ti		
					Campaign 11	avoi Exp	
⊢					1.		Office held
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Off H	liceholder name	Office sou	gnt		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Of	nceholder name	Office sou	gnt		
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Ofi H	icenolder name	Office sou	gnt		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Ofi H	icenolder name	Office sou	gnt		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Ofi H	icenolder name	Office sou	gnt		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Ofi H	ricenolder name	Office sou	gnt		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Ofi H	icenolder name	Office sou	gnt		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Ofi H	icenolder name	Office sou	gnt		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Ofi H	icenolder name	Office sou	gnt		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Ofi	ncenolder name	Office sou	gnt		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Ofi	icenolder name	Office sou	gnt		

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Overhead Polling Expense Printing Expense Salaries/Wages	se s/Contract Labor	Travel in District Travel Out of Dis	quipment & Related Expense
1 Total pages Schedule F4:			3	Filer ID	(Ethics Commission Filers)
Sch: 26/66 Rpt:	Clardy, Travis P. (The Honorable))		00067818	(
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT	CARD \$		805.53
5 Date 10/14/2023	6 Payee name Facebook		•		
7 Amount (\$) \$3.24	8 Payee address; City; 1601 Willow Road	State; Zip Code			
	Menlo Park, CA 94025				
9 TYPE OF EXPENDITURE	X Political	Non-Political			
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of a Advertising Expense	this schedule) (b)		side of Texas. Comp (, officeholder living ertising Exper	expense
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sought		Office he	ld
Date 10/27/2023	Payee name Facebook				
Amount (\$) \$26.83	Payee address; City; 1601 Willow Road Menlo Park, CA 94025	State; Zip Code			
TYPE OF EXPENDITURE	X Political	Non-Political			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of a Advertising Expense	this schedule) (b)	\Box	side of Texas. Comp K, officeholder living Pertising Exper	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought		Office he	ld

SCHEDULE **F4**

Accounting Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Food/Beverage Expense y - Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide explain	s how to complete this form.	
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 27/66 Rpt:	Clardy, Travis P. (The Honorable)		00067818
4 TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED TO	O A CREDIT CARD	\$ 805.53
5 Date	6 Payee name		
11/27/2023	Facebook		
7 Amount (\$) \$50.00	1601 Willow Road	te; Zip Code	
	Menlo Park, CA 94025		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF	(a) Category (See Categories listed at the top of this s	_ · _ ·	
EXPENDITURE	Advertising Expense	<u></u>	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
		□	Advertising Expense
		Campaign	atoriusing Experies
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
12/27/2023	Facebook		
Amount (\$) \$25.00	Payee address; City; Stat 1601 Willow Road	te; Zip Code	
	Menlo Park, CA 94025		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE	(a) Category (See Categories listed at the top of this s		
OF EXPENDITURE	Advertising Expense	<u></u>	el outside of Texas. Complete Schedule T.
		□	in, TX, officeholder living expense Advertising Expense
		Campaign	divertising Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 28/66 Rpt:	Clardy, Travis P. (The Honorable)		00067818
TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED TO	A CREDIT CARD	\$ 805.53
5 Date 09/26/2023	6 Payee name Genuineink.com		
\$798.12	8 Payee address; City; State 570 Piermont Road Suite 149 Closter, NJ 07624	; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE	(a) Category (See Categories listed at the top of this sch	nedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ffice Expense
11 Complete ONLY if direct expenditure to benefit C/OF		Office sought	Office held
Date	Payee name		
07/01/2023	Google Storage		
Amount (\$) \$19.19	Payee address; City; State 1600 Amphitheatre Parkway Mountain View, CA 94043	; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense oftware Expense
Complete ONLY if direct expenditure to benefit C/OH		Office sought	Office held

SCHEDULE **F4**

	Accounting/Banking Consulting Expense	Fees Food/Beverage Expen	Office O	verhead/Rental Expense Expense	Transportation Equipment & Rela Travel in District	
	Contributions/ Donations Made By Candidate/Officeholder/Politica	 Gift/Awards/Memorials 	Expense Printing	Expense /Wages/Contract Labor	Travel Out of District OTHER (enter a category not list	ed above)
		The Instruction G	uide explains how to c	omplete this form.	, , ,	ŕ
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Com	mission Filers)
	Sch: 29/66 Rpt:	Clardy, Travis P. (The Hono	orable)		00067818	
4	TOTAL OF UNITEMIZ	ZED EXPENDITURES CHA	RGED TO A CR	EDIT CARD	\$ 805.53	
5	Date 07/25/2023	6 Payee name Google Storage				
7	Amount (\$)	8 Payee address; City;	State; Zip C	ode		
	\$10.65	1600 Amphitheatre Parkwa	y			
		Mountain View, CA 94043				
9	TYPE OF EXPENDITURE	X Political	Non-Po	litical		
10		(a) Category (See Categories listed at t	he top of this schedule)	(b) Description		
	OF EXPENDITURE	Office Overhead/Rental Ex	pense	1 	outside of Texas. Complete Schedule 1	Г.
				ı —	n, TX, officeholder living expense ffice Expense	
				Campaign	пісе Ехрепэс	
11	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	Office so	ught	Office held	
	Date	Payee name				
	08/01/2023	Google Storage				
\vdash	Amount (\$)	Payee address; City;	State; Zip C	ode		
l	` '					
	\$19.19	1600 Amphitheatre Parkwa	у			
	\$19.19	1600 Amphitheatre Parkwa Mountain View, CA 94043	у			
	\$19.19 TYPE OF EXPENDITURE	•	y Non-Po	litical		
	TYPE OF EXPENDITURE PURPOSE	Mountain View, CA 94043	Non-Po	litical (b) Description		
	TYPE OF EXPENDITURE	Mountain View, CA 94043	Non-Po	(b) Description Check if travel	outside of Texas. Complete Schedule 1	г.
	TYPE OF EXPENDITURE PURPOSE OF	Mountain View, CA 94043 X Political (a) Category (See Categories listed at the content of the	Non-Po	(b) Description Check if travel	n, TX, officeholder living expense	г.
	TYPE OF EXPENDITURE PURPOSE OF	Mountain View, CA 94043 X Political (a) Category (See Categories listed at the content of the	Non-Po	(b) Description Check if travel		г.
	TYPE OF EXPENDITURE PURPOSE OF	Mountain View, CA 94043 X Political (a) Category (See Categories listed at the Office Overhead/Rental Expendicular Candidate/Officeholder name	Non-Po	(b) Description Check if travel Check if Austin	n, TX, officeholder living expense	г.
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Mountain View, CA 94043 X Political (a) Category (See Categories listed at the Office Overhead/Rental Expendicular Candidate/Officeholder name	Non-Ponte top of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder living expense ffice Expense	г.
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Mountain View, CA 94043 X Political (a) Category (See Categories listed at the Office Overhead/Rental Expendicular Candidate/Officeholder name	Non-Ponte top of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder living expense ffice Expense	г.
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Mountain View, CA 94043 X Political (a) Category (See Categories listed at the Office Overhead/Rental Expendicular Candidate/Officeholder name	Non-Ponte top of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder living expense ffice Expense	г.
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Mountain View, CA 94043 X Political (a) Category (See Categories listed at the Office Overhead/Rental Expendicular Candidate/Officeholder name	Non-Ponte top of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder living expense ffice Expense	г.
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Mountain View, CA 94043 X Political (a) Category (See Categories listed at the Office Overhead/Rental Expendicular Candidate/Officeholder name	Non-Ponte top of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder living expense ffice Expense	г.
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Mountain View, CA 94043 X Political (a) Category (See Categories listed at the Office Overhead/Rental Expendicular Candidate/Officeholder name	Non-Ponte top of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder living expense ffice Expense	г.
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Mountain View, CA 94043 X Political (a) Category (See Categories listed at the Office Overhead/Rental Expendicular Candidate/Officeholder name	Non-Ponte top of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder living expense ffice Expense	г.
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Mountain View, CA 94043 X Political (a) Category (See Categories listed at the Office Overhead/Rental Expendicular Candidate/Officeholder name	Non-Ponte top of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder living expense ffice Expense	г.
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Mountain View, CA 94043 X Political (a) Category (See Categories listed at the Office Overhead/Rental Expendicular Candidate/Officeholder name	Non-Ponte top of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder living expense ffice Expense	г.
	TYPE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct	Mountain View, CA 94043 X Political (a) Category (See Categories listed at the Office Overhead/Rental Expendicular Candidate/Officeholder name	Non-Ponte top of this schedule)	(b) Description Check if travel Check if Austin	n, TX, officeholder living expense ffice Expense	г.

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ns how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:		·	3 Filer ID (Ethics Commission Filers)
Sch: 30/66 Rpt:	Clardy, Travis P. (The Honorable)		00067818
4	ZED EXPENDITURES CHARGED T	O A CREDIT CARD	\$ 805.53
5 Date 08/25/2023	6 Payee name Google Storage		
7 Amount (\$) \$10.65	8 Payee address; City; Sta 1600 Amphitheatre Parkway Mountain View, CA 94043	ate; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ffice Expense
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
09/01/2023	Google Storage		
Amount (\$) \$24.75	Payee address; City; Sta 1600 Amphitheatre Parkway Mountain View, CA 94043	ate; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ffice Expense
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Feed/Peyerage Expense		ayment/Reimbursement erhead/Rental Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Translain Dictrict
Constituting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Printing E		Travel in District Travel Out of District OTHER (enter a category not listed above)
Candidate/Onicendiden/Politica	The Instruction Guide exp			OTHER (enter a category not listed above)
1 Total pages Schedule F4:	2 FILER NAME		-	3 Filer ID (Ethics Commission Filers)
Sch: 31/66 Rpt:	Clardy, Travis P. (The Honorable))		00067818
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CRE	DIT CARD	\$ 805.53
5 Date 09/25/2023	6 Payee name Google Storage			
7 Amount (\$) \$10.65	1600 Amphitheatre Parkway	State; Zip Co	de	
9 TYPE OF EXPENDITURE	Mountain View, CA 94043 X Political	Non-Poli	tical	
10 PURPOSE	(a) Category (See Categories listed at the top of	this schedule)	(b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	ŕ	Check if travel Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ffice Expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sou	ght	Office held
Date	Payee name			
10/01/2023	Google Storage			
Amount (\$) \$34.96	Payee address; City; 1600 Amphitheatre Parkway Mountain View, CA 94043	State; Zip Co	de	
TYPE OF EXPENDITURE	X Political	Non-Poli	tical	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense	this schedule)	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ffice Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sou	ght	Office held

SCHEDULE F4

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 10(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	y - Gift/Awa	verage Expense rds/Memorials Expense ervices	Office Overheat Polling Expension Printing Expension		Transportatio Travel in Dist Travel Out of	
		struction Guide explains				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID	(Ethics Commission Filers)
Sch: 32/66 Rpt:	Clardy, Travis P. ((The Honorable)			0006781	8
4 TOTAL OF UNITEMI	ZED EXPENDITUR	ES CHARGED TO) A CREDI	T CARD	\$	805.53
5 Date	6 Payee name					
10/25/2023	Google Storage					
7 Amount (\$) \$10.65	8 Payee address; 1600 Amphitheatr	e Parkway	e; Zip Code			
	Mountain View, C	A 94043				
9 TYPE OF EXPENDITURE	X Politica	I 🔲	Non-Politica	I		
10 PURPOSE	(a) Category (See Category	ories listed at the top of this so	chedule) (b)	Description		
OF EXPENDITURE	Office Overhead/F	Rental Expense		<u> </u>	TX, officeholder liv	
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officehold H	er name	Office sought		Office	held
Date	Payee name					
11/01/2023	Google Storage					
Amount (\$)	Payee address;	•	e; Zip Code			
\$51.17	1600 Amphitheatr	e Parkway				
	Mountain View, C	A 94043				
TYPE OF EXPENDITURE	X Politica	ı 🔲	Non-Politica	l		
PURPOSE	(a) Category (See Category	ories listed at the top of this so	chedule) (b)	Description		
OF EXPENDITURE	Office Overhead/F	Rental Expense		=		complete Schedule T.
				Campaign Off	TX, officeholder liv	
				Campaign On	псе шхрепас	,
Complete <u>ONLY</u> if direct expenditure to benefit C/O	 Candidate/Officehold H	er name	Office sought		Office	held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Event Expense Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Food/Beverage Expense / - Gift/Awards/Memorials Expense	ffice Overhead/Rental Expense Transportation Equipment & Travel in District Travel Out of District alaries/Wages/Contract Labor Travel Out of District OTHER (enter a category r	
	The Instruction Guide explains he	w to complete this form.	
1 Total pages Schedule F4:			Commission Filers)
Sch: 33/66 Rpt:	Clardy, Travis P. (The Honorable)	00067818	
	ZED EXPENDITURES CHARGED TO A	CREDIT CARD \$ 805	.53
5 Date	6 Payee name		
11/25/2023	Google Storage		
7 Amount (\$)	' ' ' '	Zip Code	
\$10.65	1600 Amphitheatre Parkway		
	Mountain View, CA 94043		
9 TYPE OF EXPENDITURE	X Political N	on-Political	
10 PURPOSE OF	(a) Category (See Categories listed at the top of this sched	·	
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Sche Check if Austin, TX, officeholder living expense	dule T.
		Campaign Office Expense	
11 Complete ONLY if direct expenditure to benefit C/O		ce sought Office held	
Date	Payee name		
12/01/2023	Google Storage		
Amount (\$)	Payee address; City; State;	Zip Code	
\$51.17	1600 Amphitheatre Parkway		
	Mountain View, CA 94043		
TYPE OF EXPENDITURE	X Political N	on-Political	
PURPOSE	(a) Category (See Categories listed at the top of this sched	(b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Sche	dule T.
		Check if Austin, TX, officeholder living expense Campaign Office Expense	
		Campaign Onice Expense	
Complete ONLY if direct expenditure to benefit C/O		ce sought Office held	

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense		yment/Reimbursement rhead/Rental Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District	
Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards/Memorials Expense	Printing Ex		Travel Out of District OTHER (enter a category not listed above)	
Outraidae/Onicenolae// Onide	The Instruction Guide expla			OTHER (chief a sategory not isseed above)	
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)	_
Sch: 34/66 Rpt:	Clardy, Travis P. (The Honorable)			00067818	
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CRE	DIT CARD	\$ 805.53	
5 Date 12/25/2023	6 Payee name Google Storage				
7 Amount (\$)		tate; Zip Co	de		_
\$10.65	1600 Amphitheatre Parkway				
	Mountain View, CA 94043				
9 TYPE OF EXPENDITURE	X Political	Non-Polit	ical		
10 PURPOSE	(a) Category (See Categories listed at the top of this	s schedule)	(b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense		ш	outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
			ш	ffice Expense	
			Jan. Pangir J		
11 Complete ONLY if direct	Candidate/Officeholder name	Office sou	ght	Office held	
expenditure to benefit C/O	-				
Date	Payee name				_
11/03/2023	Hampton by Hilton				
Amount (\$)	Payee address; City; St	tate; Zip Co	de		
\$115.00	1701 Lavaca Street				
	Austin, TX 78701				
TYPE OF EXPENDITURE	X Political	Non-Polit	ical		
PURPOSE OF	(a) Category (See Categories listed at the top of this	s schedule)	(b) Description		
EXPENDITURE	Travel Out of District		<u> </u>	outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
			ш	ravel Expense	
				·	
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name	Office sou	ght	Office held	
					_

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor	Transportation Travel in Distri Travel Out of D	
1 Total pages Schedule F4:	·	nams now to con	inplete this form.	3 Filer ID	(Ethics Commission Filers)
Sch: 35/66 Rpt:	Clardy, Travis P. (The Honorable))		00067818	
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREI	DIT CARD	\$	805.53
5 Date 07/03/2023	6 Payee name Hill Country Springs				
7 Amount (\$) \$42.07	10019 South Interstate 35 Frontag	State; Zip Coo ge Rd	de		
9 TYPE OF EXPENDITURE	Austin, TX 78747 X Political	Non-Polit	ical		
10 PURPOSE	(a) Category (See Categories listed at the top of	this schedule)	(b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense	505005,	Check if travel Check if Austin	outside of Texas. Co n, TX, officeholder livi pitol Water Exp	ng expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office souç	yht	Office I	held
Date	Payee name				
08/02/2023	Hill Country Springs				
Amount (\$) \$7.58	Payee address; City; 10019 South Interstate 35 Frontag Austin, TX 78747	State; Zip Cod ge Rd	de		
TYPE OF EXPENDITURE	X Political	Non-Polit	ical		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense	this schedule)	Check if Austin	outside of Texas. Co n, TX, officeholder livi Ditol Water Exp	ng expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office souç	ght	Office I	neld

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ins how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:		<u> </u>	3 Filer ID (Ethics Commission Filers)
Sch: 36/66 Rpt:	Clardy, Travis P. (The Honorable)		00067818
4	ZED EXPENDITURES CHARGED T	O A CREDIT CARD	\$ 805.53
5 Date 09/01/2023	6 Payee name Hill Country Springs		
7 Amount (\$) \$9.32	8 Payee address; City; Sta 10019 South Interstate 35 Frontage Austin, TX 78747	ate; Zip Code Rd	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense pitol Water Expense
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
10/03/2023	Hill Country Springs		
Amount (\$) \$27.32	Payee address; City; Sta 10019 South Interstate 35 Frontage Austin, TX 78747	ate; Zip Code Rd	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense bitol Water Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide expla	ains how to complete this form.	
Total pages Schedule F4: Sch: 37/66 Rpt:	2 FILER NAME Clardy, Travis P. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067818
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$ 805.53
5 Date 11/01/2023	6 Payee name Hill Country Springs		
7 Amount (\$) \$41.06	8 Payee address; City; Si 10019 South Interstate 35 Frontage	tate; Zip Code e Rd	
9 TYPE OF	Austin, TX 78747		
EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of thi Office Overhead/Rental Expense	Check if trav	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense apitol Water Expense
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
12/01/2023	Hill Country Springs		
Amount (\$) \$27.32	Payee address; City; Si 10019 South Interstate 35 Frontage Austin, TX 78747	tate; Zip Code e Rd	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of thi Office Overhead/Rental Expense	Check if trav	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense Water Expense
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Accounting/Banking Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide e:	Office Ove Polling Ex se Printing E: Salaries/V	kpense /ages/Contract Labor	Transportatio Travel in Dist Travel Out of	
1. Total marine Calculus E4.		Apianis now to co	implete this form.	a Filer ID	(Ethias Commission Filers)
1 Total pages Schedule F4: Sch: 38/66 Rpt:	Clardy, Travis P. (The Honorable	e)		3 Filer ID 0006781	(Ethics Commission Filers)
4 TOTAL OF UNITEMIA	ZED EXPENDITURES CHARGE	D TO A CRE	DIT CARD	\$	805.53
5 Date 11/02/2023	6 Payee name Hotel Ella				
7 Amount (\$) \$95.00	8 Payee address; City; 1900 Rio Grande	State; Zip Co	de		
9 TYPE OF	Austin, TX 78705	Non-Poli	tigal		
EXPENDITURE	X Political	Non-Poli	licai		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	of this schedule)	Check if Austir	outside of Texas. C n, TX, officeholder liv DOd/Beverage	- '
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sou	ght	Office	held
Date 11/02/2023	Payee name Hotel Ella				
Amount (\$) \$326.56	Payee address; City; 1900 Rio Grande Austin, TX 78705	State; Zip Co	de		
TYPE OF EXPENDITURE	X Political	Non-Poli	tical		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Travel Out of District	of this schedule)	Check if Austir	outside of Texas. C n, TX, officeholder liv ravel Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sou	ght	Office	held

SCHEDULE F4

Advertishing Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Fees Food/Beverage Expense y - Giff/Awards/Memorials Expe al Committee Legal Services	Office Ov Polling E ense Printing E		Transportation Equipment & Related Expense Travel in District Travel out of District OTHER (enter a category not listed above)
Candidate/Onicendiden/Politica	The Instruction Guide		-	OTHER (effer a category flot listed above)
1 Total pages Schedule F4:		explains now to ex-	mpiete tilis form.	3 Filer ID (Ethics Commission Filer
		blo)		,
Sch: 39/66 Rpt:	Clardy, Travis P. (The Honoral	ole)		00067818
TOTAL OF UNITEMI	ZED EXPENDITURES CHARG	ED TO A CRE	EDIT CARD	\$ 805.53
5 Date	6 Payee name			
11/08/2023	Hotel Viata			
7 Amount (\$)	8 Payee address; City;	State; Zip Co	ode	
\$239.00	320 S Capital of Texas Hwy			
	West Lake Hills, TX 78746			
9 TYPE OF	X Political	Non-Pol	litical	
EXPENDITURE	X Political	Non-Poi	ilicai	
10 PURPOSE	(a) Category (See Categories listed at the to	op of this schedule)	(b) Description	
OF	Travel Out of District			el outside of Texas. Complete Schedule T.
EXPENDITURE			🗀	in, TX, officeholder living expense
			Campaign T	ravel Expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ught	Office held
 Date	Payee name			
11/08/2023	Hotels.com			
		Otata Zia O	1 -	
Amount (\$)	Payee address; City;	State; Zip Co	ode	
\$287.00	333 108th Ave, NE			
	Belleve, WA 97004-5703			
TYPE OF EXPENDITURE	X Political	Non-Pol	iitical	
			Tax	
PURPOSE OF	(a) Category (See Categories listed at the to	p of this schedule)	(b) Description	
EXPENDITURE	Travel Out of District		ı –	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
			ı ∟	ravel Expense
			Campaign	Taver Expense
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sou	<u>l</u> ught	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Ove Polling Exp se Printing Ex Salaries/W	pense ages/Contract Labor	Transportation Travel in Distri Travel Out of D	
1 Total pages Schedule F4:				3 Filer ID	(Ethics Commission Filers)
Sch: 40/66 Rpt:	Clardy, Travis P. (The Honorable))		00067818	
4 TOTAL OF UNITEMIA	ZED EXPENDITURES CHARGE	D TO A CRE	DIT CARD	\$	805.53
5 Date 11/18/2023	6 Payee name Hotels.com				
7 Amount (\$) \$506.00	8 Payee address; City; 333 108th Ave, NE	State; Zip Coo	de		
	Belleve, WA 97004-5703				
9 TYPE OF EXPENDITURE	X Political	Non-Polit	ical		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top o Travel Out of District	f this schedule)	Check if Austir	outside of Texas. Co n, TX, officeholder livin ravel Expense	ng expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ght	Office I	neld
Date	Payee name				
07/30/2023	Hoteltonight.com				
Amount (\$) \$206.00	Payee address; City; 901 Market St #310	State; Zip Cod	de		
	San Francisco, CA 94103				
TYPE OF EXPENDITURE	X Political	Non-Polit	ical		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top o Travel Out of District	f this schedule)	Check if Austir	outside of Texas. Co n, TX, officeholder livir ravel Expense	ng expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ght	Office h	neld

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 41/66 Rpt: Clardy, Travis P. (The Honorable) 00067818 \$ 805.53 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Date 5 Payee name 09/08/2023 **Hyatt Regency Lost Pines** Amount (\$) Payee address; State; Zip Code \$114.00 575 Hyatt Lost Pines Rd Cedar Creek, TX 78612 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Travel Expense Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 07/06/2023 **IContact** Amount (\$) Payee address; City; State; Zip Code

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 42/66 Rpt: Clardy, Travis P. (The Honorable) 00067818 \$ 805.53 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Date Payee name 08/02/2023 **IContact** Amount (\$) Payee address; City; State; Zip Code \$86.60 2450 Perimeter Park Drive Suite 105 Morrisville, NC 27560 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Software Expense 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 09/02/2023 **IContact** Amount (\$) Payee address; City; State; Zip Code \$86.60 2450 Perimeter Park Drive Suite 105 Morrisville, NC 27560 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense

Complete ONLY if direct

expenditure to benefit C/OH

Candidate/Officeholder name

Office sought

Campaign Software Expense

Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 43/66 Rpt: Clardy, Travis P. (The Honorable) 00067818 \$ 805.53 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 10/03/2023 **IContact** Amount (\$) Payee address; City; State; Zip Code \$86.60 2450 Perimeter Park Drive Suite 105 Morrisville, NC 27560 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Software Expense Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 11/02/2023 **IContact** Amount (\$) Payee address; City; State; Zip Code \$86.60 2450 Perimeter Park Drive Suite 105 Morrisville, NC 27560

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 44/66 Rpt: Clardy, Travis P. (The Honorable) 00067818 \$ 805.53 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 12/02/2023 **IContact** Amount (\$) Payee address; City; State; Zip Code \$86.60 2450 Perimeter Park Drive Suite 105 Morrisville, NC 27560 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Software Expense 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date Legislative Solutions 08/30/2023 Amount (\$) Payee address; City; State; Zip Code \$350.00 PO Box 5643

Non-Political

Office sought

(b) Description

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense

Campaign Advertising Expense

TYPE OF

PURPOSE

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Austin, TX 78763-5643

Advertising Expense

Candidate/Officeholder name

Χ

Political

(a) Category (See Categories listed at the top of this schedule)

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ins how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 45/66 Rpt:	Clardy, Travis P. (The Honorable)		00067818
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED 1	TO A CREDIT CARD	\$ 805.53
5 Date 12/01/2023	6 Payee name Legislative Solutions		
7 Amount (\$) \$350.00	PO Box 5643	ate; Zip Code	
	Austin, TX 78763-5643		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Advertising Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense dvertising Expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
11/17/2023	Longview News-Journal		
Amount (\$) \$20.95	Payee address; City; Sta 320 E Methvin St Longview, TX 75601	ate; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ubscription/Dues Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE **F4**

Accounting/Banking Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	ll Committee Legal Services	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
		ins how to complete this form.	1
1 Total pages Schedule F4: Sch: 46/66 Rpt:	2 FILER NAME Clardy, Travis P. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067818
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$ 805.53
5 Date 11/20/2023	6 Payee name Longview News-Journal		
7 Amount (\$) \$18.25	320 E Methvin St	ate; Zip Code	
9 TYPE OF	Longview, TX 75601	Non-Political	
EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if trave	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense Subscription/Dues Expense
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
07/21/2023	Longview News-Journal		
Amount (\$) \$16.99	Payee address; City; St 320 E Methvin St Longview, TX 75601	ate; Zip Code	
TVDE OF	Longview, 1 × 73001		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if trave	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense Subscription/Dues Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held

SCHEDULE F4

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 10(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica		Polling Expe Printing Exp		Travel in Distr Travel Out of	
	The Instruction Guide expl	ains how to com	plete this form.		
1 Total pages Schedule F4: Sch: 47/66 Rpt:	2 FILER NAME Clardy, Travis P. (The Honorable)			3 Filer ID 00067818	(Ethics Commission Filers)
4 TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED	TO A CRED	OIT CARD	\$	805.53
5 Date 08/19/2023	6 Payee name Longview News-Journal				
7 Amount (\$)	8 Payee address; City; S	State; Zip Cod	e		
\$16.99	320 E Methvin St				
9 TYPE OF EXPENDITURE	Longview, TX 75601	Non-Politic	cal		
		-			
10 PURPOSE OF	(a) Category (See Categories listed at the top of the	is schedule) (b) Description	outside of Teves Co	omplete Schedule T.
EXPENDITURE	Office Overhead/Rental Expense		<u>—</u>	, TX, officeholder liv	
			Campaign Su	ubscription/Du	ues Fees
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	ht	Office	held
Date	Payee name				
09/21/2023	Longview News-Journal				
Amount (\$) \$16.99	Payee address; City; S 320 E Methvin St	State; Zip Cod	e		
	Longview, TX 75601				
TYPE OF EXPENDITURE	X Political	Non-Politic	cal		
PURPOSE	(a) Category (See Categories listed at the top of th	is schedule) (b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense		=		omplete Schedule T.
			Campaign St	, TX, officeholder liv	
			Campaign St	abscription/bt	ies Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	I Candidate/Officeholder name H	Office soug	ht	Office	held

SCHEDULE **F4**

Advertishing Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overho Polling Exper Printing Expe		Travel in District Travel Out of Dis	quipment & Related Expense
	The Instruction Guide expla	ains how to comp	olete this form.		
1 Total pages Schedule F4: Sch: 48/66 Rpt:	2 FILER NAME Clardy, Travis P. (The Honorable)		:	3 Filer ID 00067818	(Ethics Commission Filers)
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CRED	IT CARD	\$	805.53
5 Date 10/21/2023	6 Payee name Longview News-Journal		L		
7 Amount (\$) \$16.99	320 E Methvin St	tate; Zip Code	3		
9 TYPE OF EXPENDITURE	Longview, TX 75601 X Political	Non-Politic	al		
	(2) Catagory (0-04)	- 	N December		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of thi Office Overhead/Rental Expense	is schedule) (L	Check if Austin,	utside of Texas. Comp TX, officeholder living bscription/Due:	expense
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sough	t	Office he	ld
Date	Payee name				
11/21/2023	Longview News-Journal				
Amount (\$) \$16.99	320 E Methvin St	tate; Zip Code)		
	Longview, TX 75601				
TYPE OF EXPENDITURE	X Political	Non-Politic			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of thi Office Overhead/Rental Expense	is schedule) (K	Check if Austin,	utside of Texas. Comp TX, officeholder living bscription/ Due	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sough	t	Office he	ld

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 49/66 Rpt:	Clardy, Travis P. (The Honorable)		00067818
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$ 805.53
5 Date 12/20/2023	6 Payee name Longview News-Journal		
7 Amount (\$) \$16.99	-	State; Zip Code	
	Longview, TX 75601		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of th Office Overhead/Rental Expense	Check if travel	I outside of Texas. Complete Schedule T. n, TX, officeholder living expense subscription/Dues Expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
10/10/2023	Lowes		
Amount (\$) \$214.30	Payee address; City; S 220 N Stallings Drive Nacogdoches, TX 75961	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Office Overhead/Rental Expense	Check if travel	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense supplies Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F4

Accounting Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Food/Beverage Expense /- Gift/Awards/Memorials Exper Legal Services	Office Ov Polling E: nse Printing E		Transport Travel in I Travel Ou	Infundation Expense Author Equipment & Related Expense District It of District enter a category not listed above)
	The Instruction Guide 6	explains how to co	omplete this form.		
1 Total pages Schedule F4: Sch: 50/66 Rpt:	2 FILER NAME Clardy, Travis P. (The Honorab	le)		3 Filer ID 000678	
4	ZED EXPENDITURES CHARGE	•	DIT CARD	\$	805.53
5 Date 12/06/2023	6 Payee name Lowes				
7 Amount (\$) \$197.92	8 Payee address; City; 220 N Stallings Drive	State; Zip Co	ode		
	Nacogdoches, TX 75961				
9 TYPE OF EXPENDITURE	X Political	Non-Pol	litical		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	1 <u>1</u>	tin, TX, officeholde	
11 Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	Office sou	ught	Off	ice held
Date 07/14/2023	Payee name Maudie's Original				
Amount (\$) \$74.00	Payee address; City; 2608 W 7th St	State; Zip Co	ode		
	Austin, TX 78703				
TYPE OF EXPENDITURE	X Political	Non-Pol	litical		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	of this schedule)	Check if Aus	tin, TX, officeholde	s. Complete Schedule T. er living expense age Expense
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sou	ught	Offi	ice held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica		Office Over Polling Expense Printing Expense		Transportati Travel in Dis Travel Out o	
		ide explains how to co			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID	(Ethics Commission Filers)
Sch: 51/66 Rpt:	Clardy, Travis P. (The Hono	rable)		0006781	18
4 TOTAL OF UNITEMI	ZED EXPENDITURES CHAF	RGED TO A CRE	DIT CARD	\$	805.53
5 Date	6 Payee name				
07/14/2023	Maudie's Original				
7 Amount (\$) \$10.00	8 Payee address; City; 2608 W 7th St	State; Zip Co	de		
	Austin, TX 78703				
9 TYPE OF EXPENDITURE	X Political	Non-Pol	tical		
10 PURPOSE	(a) Category (See Categories listed at the	e top of this schedule)	(b) Description		
OF EXPENDITURE	Food/Beverage Expense		ш		Complete Schedule T.
			Campaign F	n, TX, officeholder l	· ·
			Campaign	oou/beveray	е шхрепае
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office	e held
Date	Payee name				
10/17/2023	Maudie's Original				
Amount (\$)	Payee address; City;	State; Zip Co	ode		
\$46.00	2608 W 7th St				
	Austin, TX 78703				
TYPE OF EXPENDITURE	X Political	Non-Pol	tical		
PURPOSE	(a) Category (See Categories listed at the	e top of this schedule)	(b) Description		
OF EXPENDITURE	Food/Beverage Expense				Complete Schedule T.
				n, TX, officeholder l	
			Campaign F	oou/Beverag	e Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sou	ght	Office	e held
İ					

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Office Over Polling Exp		Solicitation/Fundraising Expense Transportation Equipment & Relate Travel in District Travel Out of District	d Expense
Candidate/Officeholder/Politica	al Committee Legal Services	Salaries/Wa	ages/Contract Labor	OTHER (enter a category not listed	above)
1 Total pages Cabadula E4:	The Instruction Guide ex	plains how to con	nplete this form.	3 Filer ID (Ethics Comm	iccion Filoro)
1 Total pages Schedule F4: Sch: 52/66 Rpt:	Clardy, Travis P. (The Honorable	·)		3 Filer ID (Ethics Comm 00067818	ISSION FILEIS)
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGEI	O TO A CREI	DIT CARD	\$ 805.53	
5 Date 11/07/2023	6 Payee name Maudie's Original				
7 Amount (\$) \$70.00	8 Payee address; City; 2608 W 7th St	State; Zip Coo	le		
9 TYPE OF	Austin, TX 78703				
9 TYPE OF EXPENDITURE	X Political	Non-Politi	cal		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	this schedule)	Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ood/Beverage Expense	
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office soug	ht	Office held	
Date	Payee name				
07/10/2023	Nac Burger				
Amount (\$) \$32.83	Payee address; City; 3205 N University Dr Nacogdoches, TX 75965	State; Zip Coo	de		
TYPE OF EXPENDITURE	X Political	Non-Politi	cal		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	this schedule)	Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ood/Beverage Expense	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	ht	Office held	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	y - Gift/Award	erage Expense Is/Memorials Expense vices	Office Overheat Polling Expens Printing Expen		Transport Travel in I Travel Ou	ation Equipment & Related Expense District t of District enter a category not listed above)
		ruction Guide explains				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID	(Ethics Commission Filers)
Sch: 53/66 Rpt:	Clardy, Travis P. (The Honorable)			000678	318
4 TOTAL OF UNITEMI	ZED EXPENDITURE	S CHARGED TO	A CREDI	ΓCARD	\$	805.53
5 Date	6 Payee name					
07/27/2023	Nac Burger					
7 Amount (\$) \$30.59	3205 N University	Dr	e; Zip Code			
	Nacogdoches, TX	75965				
9 TYPE OF EXPENDITURE	X Political		Non-Politica	I		
10 PURPOSE	(a) Category (See Categor	ies listed at the top of this sc	nedule) (b)	Description		
OF EXPENDITURE	Food/Beverage Ex	pense		ш		s. Complete Schedule T. er living expense
				Campaign Fo		• .
				Campaign	our Bevera	igo Experise
11 Complete ONLY if direct expenditure to benefit C/O	L Candidate/Officeholde H	r name	Office sought		Offi	ce held
Date	Payee name					
12/02/2023	Nac Burger					
Amount (\$)	Payee address;	City; State	; Zip Code			
\$31.11	3205 N University	Dr				
	Nacogdoches, TX	75965				
TYPE OF EXPENDITURE	X Political		Non-Politica	I		
PURPOSE	(a) Category (See Categor	ies listed at the top of this sc	nedule) (b)	Description		
OF EXPENDITURE	Food/Beverage Ex	pense		<u> </u>		s. Complete Schedule T.
				ш		er living expense
				Campaign Fo	ou/Bevera	ige Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	 Candidate/Officeholde H	r name	Office sought		Offi	ce held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Polling E nse Printing	verhead/Rental Expense Expense Expense /Wages/Contract Labor	Travel in Di Travel Out	
	The Instruction Guide e	explains how to c	omplete this form.		
1 Total pages Schedule F4: Sch: 54/66 Rpt:	2 FILER NAME Clardy, Travis P. (The Honorabl	e)		3 Filer ID 0006783	(Ethics Commission Filers)
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	ED TO A CRE	EDIT CARD	\$	805.53
5 Date 08/27/2023	6 Payee name Peking Chinese Restaurant			-	
7 Amount (\$) \$25.00	8 Payee address; City; 205 Creekbend Blvd	State; Zip C	code		
	Nacogdoches, TX 75965				
9 TYPE OF EXPENDITURE	X Political	Non-Po	litical		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	of this schedule)	Check if Aus	el outside of Texas. tin, TX, officeholder Food/Beveraç	• .
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	ught	Offic	e held
Date	Payee name				
07/21/2023	Pizza Hut				
Amount (\$) \$13.00	Payee address; City; 5510 S IH 35 Frontage Rd Suite C-100 Austin, TX 78745	State; Zip C	code		
TYPE OF EXPENDITURE	X Political	Non-Po	olitical		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expense	of this schedule)	Check if Aus	el outside of Texas. tin, TX, officeholder Food/Beveraç	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	pught	Offic	e held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	l Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ins how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	<u> </u>	mo non to complete this form	3 Filer ID (Ethics Commission Filers)
Sch: 55/66 Rpt:	Clardy, Travis P. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067818
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED 1	ΓΟ A CREDIT CARD	\$ 805.53
5 Date 11/17/2023	6 Payee name Ranch 616		
7 Amount (\$) \$260.00	8 Payee address; City; Sta 616 Nueces St	ate; Zip Code	
	Austin , TX 78701		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense pod/Beverage Expense
11 Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
12/02/2023	Romas Italian Kitchen		
Amount (\$) \$95.00	Payee address; City; Sta 124 E Main St	ate; Zip Code	
	Nacogdoches, TX 75961		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense DOD/Beverage Expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	Office sought	Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Sch: 56/66 Rpt:	Clardy, Travis P. (The Honorable)		00067818	
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED T	TO A CREDIT CARD	\$ 805.53	
5 Date 11/20/2023	6 Payee name Romas Italian Kitchen			
7 Amount (\$) \$120.00	124 E Main St	ate; Zip Code		
	Nacogdoches, TX 75961			
9 TYPE OF EXPENDITURE	X Political	Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense pod/Beverage Expense	
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held	
Date	Payee name			
09/09/2023	Schlotzsky's-Nac			
Amount (\$) \$35.44	Payee address; City; Sta 2608 North St Nacogdoches, TX 75965	ate; Zip Code		
TYPE OF EXPENDITURE	X Political	Non-Political		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense DOD/Beverage Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica		Polling Ex e Printing E		Travel in Dist Travel Out of	
	The Instruction Guide ex	plains how to co	mplete this form.		
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID	(Ethics Commission Filers)
Sch: 57/66 Rpt:	Clardy, Travis P. (The Honorable	!)		0006781	8
4 TOTAL OF UNITEMI.	ZED EXPENDITURES CHARGE	D TO A CRE	DIT CARD	\$	805.53
5 Date	6 Payee name				
10/24/2023	Taco Bueno				
7 Amount (\$) \$17.93	8 Payee address; City; 1821 North St	State; Zip Co	ode		
	Nacogdoches, TX 75963				
9 TYPE OF EXPENDITURE	X Political	Non-Pol	tical		
10 PURPOSE	(a) Category (See Categories listed at the top o	f this schedule)	(b) Description		
OF EXPENDITURE	Food/Beverage Expense		<u> </u>		omplete Schedule T.
				n, TX, officeholder liv	• ,
11 Complete ONLY if direct expenditure to benefit C/O	L Candidate/Officeholder name H	Office sou	ght	Office	held
Date	Payee name				
11/17/2023	The Stephen F Austin Royal Son	esta Hotel			
Amount (\$) \$473.63	Payee address; City; 701 Congress Avenue	State; Zip Co	ode		
	Austin, TX 78701				
TYPE OF EXPENDITURE	X Political	Non-Pol	tical		
PURPOSE	(a) Category (See Categories listed at the top o	f this schedule)	(b) Description		
OF EXPENDITURE	Travel Out of District		l <u>–</u>		omplete Schedule T.
				n, TX, officeholder liv ravel Expense	
			Campaign	iavei Experist	5
Complete <u>ONLY</u> if direct expenditure to benefit C/O	 Candidate/Officeholder name H	Office sou	ght	Office	held

SCHEDULE **F4**

Advertishing Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Ove Polling Ex Printing E		Transportation Equipment & Related Exp Travel in District Travel Out of District OTHER (enter a category not listed abov	
	The Instruction Guide ex	plains how to co	mplete this form.		
1 Total pages Schedule F4: Sch: 58/66 Rpt:	2 FILER NAME Clardy, Travis P. (The Honorable)		3 Filer ID (Ethics Commission 00067818	n Filers)
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGE	O TO A CRE	DIT CARD	\$ 805.53	
5 Date 11/20/2023	6 Payee name The Stephen F Austin Royal Son	esta Hotel			
7 Amount (\$) \$157.22	8 Payee address; City; 701 Congress Avenue	State; Zip Co	de		
9 TYPE OF	Austin, TX 78701 X Political	Non-Poli	tical		
EXPENDITURE		<u> </u>			
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Travel Out of District	this schedule)	Check if Austin	I outside of Texas. Complete Schedule T. n, TX, officeholder living expense ravel Expense	
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sou	ght	Office held	
Date	Payee name				
12/15/2023	The Stephen F Austin Royal Son	esta Hotel			
Amount (\$) \$5.28	Payee address; City; 701 Congress Avenue Austin, TX 78701	State; Zip Co	de		
TYPE OF EXPENDITURE	X Political	Non-Poli	tical		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	this schedule)	Check if Austin	I outside of Texas. Complete Schedule T. n, TX, officeholder living expense ood/Beverage Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sou	ght	Office held	

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor S how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Cabadula E4	<u> </u>		3 Filer ID (Ethics Commission Filers)
1 Total pages Schedule F4: Sch: 59/66 Rpt:	Clardy, Travis P. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067818
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED TO	O A CREDIT CARD	\$ 805.53
5 Date 07/16/2023	6 Payee name Uber		
7 Amount (\$) \$12.00	8 Payee address; City; Stat 182 Howard Street Suite 8 San Francisco, CA 94105	e; Zip Code	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE	(a) Category (See Categories listed at the top of this s	chedule) (b) Description	
OF EXPENDITURE	Travel Out of District	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ravel Expense
11 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
07/16/2023	Uber		
Amount (\$) \$24.00	Payee address; City; Stat 182 Howard Street Suite 8 San Francisco, CA 94105	e; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this s Travel Out of District	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ravel Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 60/66 Rpt: Clardy, Travis P. (The Honorable) 00067818 \$ 805.53 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Date Payee name 07/17/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$20.97 182 Howard Street Suite 8 San Francisco, CA 94105 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Travel Expense Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 09/13/2023 Uber Payee address: Amount (\$) City; State; Zip Code

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 61/66 Rpt: Clardy, Travis P. (The Honorable) 00067818 \$ 805.53 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 09/13/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$7.60 182 Howard Street Suite 8 San Francisco, CA 94105 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Travel Expense 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 09/13/2023 Uber Payee address: Amount (\$) City; State; Zip Code \$4.06 182 Howard Street Suite 8 San Francisco, CA 94105 **TYPE OF** Non-Political Political Χ **EXPENDITURE**

(b) Description

Office sought

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense

Campaign Travel Expense

PURPOSE

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

(a) Category (See Categories listed at the top of this schedule)

Travel Out of District

Candidate/Officeholder name

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 62/66 Rpt: Clardy, Travis P. (The Honorable) 00067818 \$ 805.53 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 09/14/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$1.40 182 Howard Street Suite 8 San Francisco, CA 94105 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Travel Expense 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 63/66 Rpt: Clardy, Travis P. (The Honorable) 00067818 \$ 805.53 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 10/10/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$16.98 182 Howard Street Suite 8 San Francisco, CA 94105 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Travel Expense Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 10/10/2023 Uber Payee address: Amount (\$) City; State; Zip Code \$10.00 182 Howard Street Suite 8

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	y - Gift/Awa	verage Expense rds/Memorials Expense rvices	Office Overhead/Re Polling Expense Printing Expense Salaries/Wages/Co	ental Expense	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
		struction Guide explains			
1 Total pages Schedule F4:	2 FILER NAME			3	Filer ID (Ethics Commission Filers)
Sch: 64/66 Rpt:	Clardy, Travis P. (The Honorable)			00067818
4 TOTAL OF UNITEMI	ZED EXPENDITURI	ES CHARGED TO	A CREDIT C	CARD \$	805.53
5 Date	6 Payee name				
09/15/2023	Whitepages				
7 Amount (\$) \$111.71	8 Payee address; 2033 6th Ave Suit	e #1100	e; Zip Code		
	Seattle, WA 9812	<u>L</u>			
9 TYPE OF EXPENDITURE	X Politica		Non-Political		
10 PURPOSE	(a) Category (See Catego	ries listed at the top of this so	hedule) (b) De	scription	
OF EXPENDITURE	Office Overhead/F	Rental Expense		_	de of Texas. Complete Schedule T.
			C	4	officeholder living expense cription/Research Expense
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholde	er name	Office sought		Office held
experiulture to benefit C/O					
Date	Payee name				
10/15/2023	Whitepages				
Amount (\$)	Payee address;	City; State	e; Zip Code		
\$111.71	2033 6th Ave Suit	e #1100			
	Seattle, WA 9812	1			
TYPE OF EXPENDITURE	X Politica		Non-Political		
PURPOSE	(a) Category (See Category	ries listed at the ton of this so	hedule) (b) De	scription	
OF	Office Overhead/F		(a, be	-	de of Texas. Complete Schedule T.
EXPENDITURE	Cinice Overnedd/i	teritar Expense		Check if Austin, TX,	officeholder living expense
			C	ampaign Subs	cription/Research Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholde H	er name	Office sought		Office held

SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense		yment/Reimbursement rhead/Rental Expense pense		draising Expense Equipment & Related Expense :
Contributions/ Donations Made By Candidate/Officeholder/Politica		Printing Ex Salaries/W	pense ages/Contract Labor	Travel Out of Di OTHER (enter a	strict a category not listed above)
	The Instruction Guide exp	lains how to co	nplete this form.		
1 Total pages Schedule F4:				3 Filer ID	(Ethics Commission Filers)
Sch: 65/66 Rpt:	Clardy, Travis P. (The Honorable)			00067818	
TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CRE	DIT CARD	\$	805.53
5 Date 11/01/2023	6 Payee nameWhitepages				
7 Amount (\$) \$146.70	8 Payee address; City; S 2033 6th Ave Suite #1100	State; Zip Co	de		
	Seattle, WA 98121				
9 TYPE OF EXPENDITURE	X Political	Non-Polit	ical		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Office Overhead/Rental Expense	his schedule)	Check if Austin	outside of Texas. Com n, TX, officeholder living ubscription/Res	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name H	Office sou	ght	Office h	eld
Date	Payee name				
11/15/2023	Whitepages				
Amount (\$) \$111.71	2033 6th Ave Suite #1100	State; Zip Co	de		
	Seattle, WA 98121				
TYPE OF EXPENDITURE	X Political	Non-Polit	ical		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Office Overhead/Rental Expense	his schedule)	Check if Austin	l outside of Texas. Com n, TX, officeholder living ubscription/Res	•
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	Office sou	ght	Office h	eld

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 66/66 Rpt: Clardy, Travis P. (The Honorable) 00067818 \$ 805.53 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 12/15/2023 Whitepages Amount (\$) Payee address; City; State; Zip Code \$111.71 2033 6th Ave Suite #1100 Seattle, WA 98121 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Subscription/Research Expense Office sought 11 Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH