

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00086370	2 Total pages filed: 50	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST John W.	MI 	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/16/2024
	NICKNAME	LAST Bryant	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 140977 Dallas, TX 75214		ZIP CODE	Date Hand-delivered or Date Postmarked
			Receipt #	Amount
			Date Processed	
			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Joan D.	MI 	
	NICKNAME	LAST Smotzer	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 3030 McKinney Avenue Dallas, TX 75204		APT / SUITE #;	CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE (214)	PHONE NUMBER 642-4480	EXTENSION	
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 07/01/2023	THROUGH	Month Day Year 12/31/2023	
10 ELECTION	ELECTION DATE Month Day Year 03/05/2024		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) State Representative Place Dallas District 114 Dallas		12 OFFICE SOUGHT (if known) State Representative Place Dallas District D114	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Bryant, John W. (The Honorable)	14 Filer ID (Ethics Commission Filers) 00086370
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	47,623.86
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	30,255.45
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	17,179.55
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	49,000.00

17 AFFIDAVIT

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

 The Honorable John W. Bryant
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

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

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18 FILER NAME Bryant, John W. (The Honorable)		19 Filer ID 00086370	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	47,435.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	188.86
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$	49,500.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	30,255.45
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/25 Rpt: 4/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 10/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACEC PAC 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ambrose, Kevin Contributor address; City; State; Zip Code Washington, MD 20880	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Long and Foster Real Estate
Date 09/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ambrose, Kevin Contributor address; City; State; Zip Code Washington, MD 20880	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Long and Foster Real Estate
Date 09/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anton, Bruce Contributor address; City; State; Zip Code Dallas, TX 75201	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apodaca, Michelle Contributor address; City; State; Zip Code Austin, TX 78763	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Apodaca Advocacy Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/25 Rpt: 5/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ball, Jean <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75227	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) none
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beer Alliance of Texas PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobosky, Shelby <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Texas Humane Legislation
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Billie <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) none
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, David <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/25 Rpt: 6/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Branson, Debbie	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Dallas, TX 75205		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Law Offices of Frank Branson
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brestler, Edward	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75204		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brestler, Edward	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75204		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Peter	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78751		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Peter	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78751		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/25 Rpt: 7/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 10/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Randy & Marti	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75223	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Randy & Marti	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75223	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Brianna	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Dallas, TX 75214	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Stephen	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Nashville, TN 37212	
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions)
Date 09/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Toni	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75206	
Principal occupation / Job title (See Instructions) District Director		Employer (See Instructions) Rep. Venton Jones

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/25 Rpt: 8/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush, Janie <hr/> 6 Contributor address; City; State; Zip Code Dalla, TX 75229	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carl, Carlton <hr/> Contributor address; City; State; Zip Code Martindale, TX 78655	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carl, Carlton <hr/> Contributor address; City; State; Zip Code Martindale, TX 78655	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 09/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casey, Karen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) none
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Butt Public Education PAC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/25 Rpt: 9/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Scott	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Dallas, TX 75208		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coelho, Tony	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Doylestown, PA 18901		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Robert	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Dallas, TX 75214		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilson Elser
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Committee of Vistra Corp PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Irving, TX 75039		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conner, Terry	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Dallas, TX 75214		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/25 Rpt: 10/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooke, Melanie <hr/> 6 Contributor address; City; State; Zip Code Rockwall, TX 75032	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions)
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darden, Margaret <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions)
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Carlos (Dr.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-employed
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denison, Donna M <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) none
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denison, Donna M <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/25 Rpt: 11/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donovan, Carol <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75214	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Attorney-Mediator		9 Employer (See Instructions) Carol Crabtree Donovan PC
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dupuy, Robert <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) Husch Blackwell
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrhardt, Harryette <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) none
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forsythe-Lill, Veletta <hr/> Contributor address; City; State; Zip Code Dallas, TX 75223	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funds Available for Involved Reporters <hr/> Contributor address; City; State; Zip Code Austin , TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/25 Rpt: 12/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaubert, Thomas <hr/> 6 Contributor address; City; State; Zip Code DeSoto, TX 75115	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ginsberg, Elizabeth <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Grace <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) none
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Rhonda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hampton, Joanna <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) MDW Studio

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/25 Rpt: 13/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins-Bowland, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75218	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) none
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodge, Terri <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmberg, Bill <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-employed
Date 09/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmberg, Bill <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) none
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IBAT PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/25 Rpt: 14/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 10/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IMPACT PAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78768	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jee, Andrew <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jee Law
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, JoAnn <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 09/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Scherry <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/25 Rpt: 15/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaplan, David & Shawn <hr/> 6 Contributor address; City; State; Zip Code Dallas , TX 75218	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendall, Karen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klutts, Melanie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Adminstrator		Employer (See Instructions) Richard ISD
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koudelka, Kama <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) N.A		Employer (See Instructions)
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krausse, Annette <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Staff		Employer (See Instructions) Kim for Congress

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/25 Rpt: 16/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kutac, Angela <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75218	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) none
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawler, Gary <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goddan Blair & Sampson PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78760	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Livingston, Kathleen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Mauri <hr/> Contributor address; City; State; Zip Code Garland, TX 75042	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Financial Manager		Employer (See Instructions) Modern Family Vision

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/25 Rpt: 17/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luckhardt, Lou <hr/> 6 Contributor address; City; State; Zip Code Ennis, TX 75119	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) AFL-CIO staff		9 Employer (See Instructions) Dallas CLC AFL-CIO
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyle, Kathrine <hr/> Contributor address; City; State; Zip Code Dallas , TX 75225	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangan, Andrew <hr/> Contributor address; City; State; Zip Code Ausint, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathis, Maryam <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mattox, Janice <hr/> Contributor address; City; State; Zip Code Dallas, TX 75223	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/25 Rpt: 18/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauzy, Charles	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Dallas, TX 75214		
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Self
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazero, John	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75214		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McFerrin, Grace	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75228		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McQuire, Mike	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code Irving, TX 75207		
Principal occupation / Job title (See Instructions) Pres & CEO		Employer (See Instructions) Andrews Distributing
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McRoberts, Hunt	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75214		
Principal occupation / Job title (See Instructions)		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/25 Rpt: 19/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meed, Alex <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) none
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mesh, Mary <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions)
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Laura (The Honorable) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75319	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 09/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) none
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molberg Campaign, Ken (Judge) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/25 Rpt: 20/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Camille	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Dallas, TX 75218		
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) VA
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naimon, David	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Rockville, MD 20852		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) US Government
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholson, Gavin	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75201		
Principal occupation / Job title (See Instructions) Chief of Staff		Employer (See Instructions) Rep. Venton Jones
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Northrup, Michael	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75206		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Cowles & Thompson
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Offutt, Larry	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75206		
Principal occupation / Job title (See Instructions) Risk Manager		Employer (See Instructions) Steak n' Shake

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/25 Rpt: 21/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 08/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Stephan <hr/> 6 Contributor address; City; State; Zip Code Pittsburg, TX 75686	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 09/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ridley, Paul <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Dallas City Council		Employer (See Instructions) City of Dallas
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Karen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75223	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodine, Richard <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Annadele <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/25 Rpt: 22/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 11/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salem, M. Emad	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Euless, TX 76040	
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Sellstate Metro Realty
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salem, M. Emad	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Euless, TX 76040	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Sellstate Metro Realty
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Rene	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75206	
Principal occupation / Job title (See Instructions) Organist		Employer (See Instructions) Christ Episcopal Church
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmitt, Lee	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75221	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schudder, Kendall	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75214	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Armadilla Strategies LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/25 Rpt: 23/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Tim <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75218	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) none
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheaks, Robert <hr/> Contributor address; City; State; Zip Code Irving, TX 75060	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lab Tech		Employer (See Instructions) Electro Plate Circuitry
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheedy, Jessica <hr/> Contributor address; City; State; Zip Code Arlington, TX 76017	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siebler, Ron <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Self
Date 10/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith , Robert <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) President/CEO		Employer (See Instructions) Accident & Injury Pain Center

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/25 Rpt: 24/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smotzer, Joan	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Dallas, TX 75204		
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions)
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephenson, Sally	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75206		
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Melissa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75218		
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions)
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strickland, Alisa	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75218		
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Lisa	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Dallas, TX 75218		
Principal occupation / Job title (See Instructions) Medical Director		Employer (See Instructions) Blue Cross Blue Shield

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/25 Rpt: 25/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 10/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TSAPAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talley, Olive <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Filmmaker		Employer (See Instructions) Self
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Automobile Dealers PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Land Title Assoc PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Medical Association PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/25 Rpt: 26/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 10/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas State Assoc of Firefighters PAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Trial Lawyers Assoc PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00284885) The Home Depot Inc PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20004	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiller, Martha <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Transou, Linda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Art Director		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/25 Rpt: 27/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 10/06/2023	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00010470) Union Pacific Corp PAC	7 Amount of Contribution (\$) \$1,500.00
6 Contributor address; City; State; Zip Code Spring, TX 75223		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wally, Liz	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75214		
Principal occupation / Job title (See Instructions) Clean Elections Texas		Employer (See Instructions) Consultand
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Mark	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not employed
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, G David	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75238		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Randy	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Washington, DC 20003		
Principal occupation / Job title (See Instructions)		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/25 Rpt: 28/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiesbrod, Carl	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Dalas, TX 75230		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodward, Ruth	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75206		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zeitler, Kurt	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Elgin, TX 78621		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zeitler, Kurt	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Elgin, TX 78621		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 29/50	
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 07/31/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlueter, Stan <hr/> 7 Contributor address; City; State; Zip Code Austin, TX 78768	8 Amount of contribution (\$) \$38.86	9 In-kind contribution description In-kind for Fundraiser
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Lobbyist		11 Employer (FOR NON-JUDICIAL) (See instructions) The Schlueter Group	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scuder, Kendall <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of contribution (\$) \$150.00	In-kind contribution description Sponsorship at National Night Out
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Consultant		Employer (FOR NON-JUDICIAL) (See instructions) Self	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 30/50
2 FILER NAME Bryant, John W. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086370
4 TOTAL OF UNITEMIZED LOANS		\$ 49,000.00
5 Date of loan 09/05/2023	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, John	9 Loan Amount (\$) \$500.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code Dallas, TX 75214	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions) Self
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 1/20 Rpt: 31/50	2	FILER NAME Bryant, John W. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00086370
4	Date 07/14/2023	5	Payee name Access Valet Parking		
6	Amount (\$) \$16.00	7	Payee address; City; State; Zip Code Access Valet Parking Austin, TX 78701		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Valet Parking		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/05/2023		Payee name Ace Parking		
	Amount (\$) \$17.95		Payee address; City; State; Zip Code 12475 FM812 Austin, TX 78617		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 09/28/2023		Payee name Action Network		
	Amount (\$) \$10.00		Payee address; City; State; Zip Code 1900 L Street Washington, DC 20036		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Computer Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Computer Services		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/20 Rpt: 32/50	2 FILER NAME Bryant, John W. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086370
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4 Date 10/30/2023	5 Payee name Action Network
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6 Amount (\$) \$10.00	7 Payee address; City; State; Zip Code 1900 L Street Washington, DC 20036
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Computer Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Computer Services
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/28/2023	Payee name Action Network
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Amount (\$) \$10.00	Payee address; City; State; Zip Code 1900 L Street Washington, DC 20036
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Computer Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Computer Services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/28/2023	Payee name Action Network
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Amount (\$) \$10.00	Payee address; City; State; Zip Code 1900 L Street Washington, DC 20036
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Computer Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Computer Services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/20 Rpt: 33/50	2 FILER NAME Bryant, John W. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086370
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4 Date 08/17/2023	5 Payee name Addams, Cameron
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6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 13687 Purple Sage Dallas, TX 75240
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/20/2023	Payee name Burnham, Lon
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Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1600 Texas Ft. Worth, TX 76102
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/11/2023	Payee name Buzzbrew
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Amount (\$) \$23.19	Payee address; City; State; Zip Code 5815 Live Oak Street Dallas, TX 75214
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Meal
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/20 Rpt: 34/50	2 FILER NAME Bryant, John W. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086370
4 Date 07/17/2023	5 Payee name Capitol Grille in Capitol	
6 Amount (\$) \$221.37	7 Payee address; City; State; Zip Code Capitol Building Austin, TX 78768	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business meal
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2023	Payee name Cipollina	
Amount (\$) \$63.66	Payee address; City; State; Zip Code 1213 S Lynn St Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/13/2023	Payee name Circle Grill	
Amount (\$) \$28.92	Payee address; City; State; Zip Code 3701 N Buckner Dallas, TX 75228	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/20 Rpt: 35/50	2 FILER NAME Bryant, John W. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086370
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4 Date 10/08/2023	5 Payee name Dallas County Democratic Party
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6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 1414 N Washington Dallas, TX 75204
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/01/2023	Payee name Dallas County Democratic Party
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Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1414 N Washington Dallas, TX 75204
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/16/2023	Payee name Dallas County Democratic Party
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Amount (\$) \$750.00	Payee address; City; State; Zip Code 1414 N Washington Dallas, TX 75204
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Filing fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 6/20 Rpt: 36/50	2	FILER NAME Bryant, John W. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00086370
4	Date 09/13/2023	5	Payee name Dirty Martin's		
6	Amount (\$) \$46.19	7	Payee address; City; State; Zip Code 2808 Guadalupe Austin, TX 78701		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business meal		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 07/17/2023		Payee name El Alma Restaurant		
	Amount (\$) \$133.03		Payee address; City; State; Zip Code 1025 Barton Springs Austin, TX 78704		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business meal		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 09/06/2023		Payee name Funky East Dallas Democrats		
	Amount (\$) \$500.00		Payee address; City; State; Zip Code Requested Dallas, TX 75218		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/20 Rpt: 37/50	2 FILER NAME Bryant, John W. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086370
4 Date 08/02/2023	5 Payee name Google	
6 Amount (\$) \$63.96	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Computer Services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2023	Payee name Google	
Amount (\$) \$63.96	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Computer Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Computer Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2023	Payee name Google	
Amount (\$) \$63.96	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Computer Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Computer Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 8/20 Rpt: 38/50	2	FILER NAME Bryant, John W. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00086370
4	Date 11/02/2023	5	Payee name Google		
6	Amount (\$) \$63.96	7	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Computer Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Computer Services		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/04/2023		Payee name Google		
	Amount (\$) \$63.96		Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Computer Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Computer Services		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 07/03/2023		Payee name Google		
	Amount (\$) \$63.96		Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Computer Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Computer Services		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 9/20 Rpt: 39/50	2	FILER NAME Bryant, John W. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00086370
4	Date 11/20/2023	5	Payee name H.E.B.		
6	Amount (\$) \$10.11	7	Payee address; City; State; Zip Code 2701 East 7th St Austin, TX 78701		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/05/2023		Payee name Harland Clarke		
	Amount (\$) \$77.96		Payee address; City; State; Zip Code 10931 Laurate Dr San Antonio, TX 78249		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Checks		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 08/30/2023		Payee name InFocus Campaigns		
	Amount (\$) \$400.00		Payee address; City; State; Zip Code PO Box 10726 Fort Worth, TX 76114		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Mailing Lists	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailing Lists		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/20 Rpt: 40/50	2 FILER NAME Bryant, John W. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086370
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4 Date 10/16/2023	5 Payee name Jack Boles Parking
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6 Amount (\$) \$10.00	7 Payee address; City; State; Zip Code 8150 Brookriver Dallas, TX 75247
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/13/2023	Payee name Junius Heights Historic District
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Amount (\$) \$350.00	Payee address; City; State; Zip Code 715 Parkmont Dallas, TX 75214
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Tickets	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Historic House Tour
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/24/2023	Payee name Junius Heights Historic District
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Amount (\$) \$300.00	Payee address; City; State; Zip Code 715 Parkmont Dallas, TX 75214
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ticket to Home Tour
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/20 Rpt: 41/50	2 FILER NAME Bryant, John W. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086370
4 Date 08/24/2023	5 Payee name La Calle Doce	
6 Amount (\$) \$40.21	7 Payee address; City; State; Zip Code 1925 Skillman Dallas, TX 75206	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business meal
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/10/2023	Payee name Mattitos	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 3102 Oak Lawn Dallas, TX 75219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/07/2023	Payee name Meso Mayo	
Amount (\$) \$154.82	Payee address; City; State; Zip Code 4123 Abrams Dallas, TX 75214	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business meal
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/20 Rpt: 42/50	2 FILER NAME Bryant, John W. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086370
4 Date 08/15/2023	5 Payee name Minnis, Norma	
6 Amount (\$) \$271.00	7 Payee address; City; State; Zip Code 6219 Prospect Avenue Dallas, TX 75214	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/17/2023	Payee name Minnis, Norma	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 6219 Prospect Avenue Dallas, TX 75214	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/13/2023	Payee name Minnis, Norma	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 6219 Prospect Ave Dallas, TX 75214	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/20 Rpt: 43/50	2 FILER NAME Bryant, John W. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086370
4 Date 10/23/2023	5 Payee name Minnis, Norma	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 9219 Prospect Ave Dallas, TX 75214	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/28/2023	Payee name Office Deport	
Amount (\$) \$14.70	Payee address; City; State; Zip Code 5111 Greenville Dallas, TX 75206	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/21/2023	Payee name Ohio River South	
Amount (\$) \$431.02	Payee address; City; State; Zip Code 235 Mitchell St SW Atlanta, GA 30303	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting for event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/20 Rpt: 44/50	2 FILER NAME Bryant, John W. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086370
4 Date 08/14/2023	5 Payee name Ozona	
6 Amount (\$) \$162.38	7 Payee address; City; State; Zip Code 4615 Greenville Dallas, TX 75206	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/22/2023	Payee name Ozona	
Amount (\$) \$1,199.03	Payee address; City; State; Zip Code 4615 Greenville Dallas, TX 75206	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2023	Payee name Phoebe's Diner	
Amount (\$) \$43.77	Payee address; City; State; Zip Code 533 W Oltorf Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business meal
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/20 Rpt: 45/50	2 FILER NAME Bryant, John W. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086370
4 Date 07/21/2023	5 Payee name Readyfresh	
6 Amount (\$) \$6.66	7 Payee address; City; State; Zip Code 16420 N Interstate 35 Austin, TX 78728	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Water
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/21/2023	Payee name Readyfresh	
Amount (\$) \$36.61	Payee address; City; State; Zip Code 16420 N Interstate 35 Austin, TX 78728	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Water
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/21/2023	Payee name Readyfresh	
Amount (\$) \$36.61	Payee address; City; State; Zip Code 16420 N Interstate 35 Austin, TX 78728	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Water
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 16/20 Rpt: 46/50	2	FILER NAME Bryant, John W. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00086370
4	Date 10/20/2023	5	Payee name Readyfresh		
6	Amount (\$) \$3.56	7	Payee address; City; State; Zip Code 16420 N Interstate 35 Austin, TX 78728		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Water		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/22/2023		Payee name Readyfresh		
	Amount (\$) \$18.84		Payee address; City; State; Zip Code 16420 N Interstate 35 Austin, TX 78728		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Water		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/21/2023		Payee name Readyfresh		
	Amount (\$) \$3.56		Payee address; City; State; Zip Code 16420 N Interstate 35 Austin, TX 78728		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Water		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/20 Rpt: 47/50	2 FILER NAME Bryant, John W. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086370
4 Date 09/25/2023	5 Payee name Santa Rita Cafe	
6 Amount (\$) \$199.66	7 Payee address; City; State; Zip Code 1206 W 38th St Austin, TX 78705	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business meal
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/13/2023	Payee name Sazon	
Amount (\$) \$63.82	Payee address; City; State; Zip Code 1816 S Lamar Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/12/2023	Payee name Smith, Peggy	
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code 14 Greenway Plaza Unit 18M Houston, TX 77046	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Lodging	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Austin Lodging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/20 Rpt: 48/50	2 FILER NAME Bryant, John W. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086370
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4 Date 07/27/2023	5 Payee name Smith, Peggy
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6 Amount (\$) \$3,500.00	7 Payee address; City; State; Zip Code 14 Greenway Plaza Unit 18M Houston, TX 77046
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Lodging	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/12/2023	Payee name Smith, Peggy
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Amount (\$) \$3,500.00	Payee address; City; State; Zip Code 14 Greenway Plaza Unit 18M Houston, TX 77046
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Lodging	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/29/2023	Payee name Smith, Peggy
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Amount (\$) \$3,500.00	Payee address; City; State; Zip Code 14 Greenway Plaza Unit 18M Houston, TX 77046
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Lodging	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/20 Rpt: 49/50	2 FILER NAME Bryant, John W. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086370
4 Date 10/31/2023	5 Payee name Smith, Peggy	
6 Amount (\$) \$3,500.00	7 Payee address; City; State; Zip Code 14 Greenway Plaza Unit 18M Houston, TX 77046	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Lodging	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2023	Payee name The Grove	
Amount (\$) \$103.93	Payee address; City; State; Zip Code 800 W Sixth Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/07/2023	Payee name White Rock Alehouse	
Amount (\$) \$31.72	Payee address; City; State; Zip Code 7331 Gaston Dallas, TX 75214	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/20 Rpt: 50/50	2 FILER NAME Bryant, John W. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086370	
4 Date 12/28/2023	5 Payee name Xaman Cafe		
6 Amount (\$) \$61.41	7 Payee address; City; State; Zip Code 334 W Jefferson Dallas, TX 75208		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business meal	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held