CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to com	ıplete this form.	1 Filer ID (Ethics Commi 00086370		2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	SE ONLY
OFFICEHOLDER NAME	The Honorable	John W.			Date Received	
10 000					ELECTRONICA	I I V EII ED
					01/16/2024	LLI FILLD
	NICKNAME	LAST		SUFFIX	01/16/2024	
		Bryant				
4 CANDIDATE /	ADDRESS / PO BOX; A	PT / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING	P.O. Box 140977					
ADDRESS					Receipt #	Amount
Change of Address	Dallas, TX 75214					
					Date Processed	
					Data lass and	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER	Ms.	Joan D.				
NAME	IVIO.	JOAN D.				
	NICKNAME	LAST		SUFFIX		
	NICKNAWE	Smotzer		SUFFIX		
		Sillotzei				
6 CAMPAIGN	STREET ADDRESS (NO F	OO BOY DI EASE):	ΛD-	Γ / SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER	3030 McKinney Avenue		AP	1/3011E#, CITT,	SIA	TE, ZIP CODE
ADDRESS	3030 McKillley Avenue	;				
(Residence or Business)						
	Dallas, TX 75204					
7 CAMPAIGN	AREA CODE PH	ONE NUMBER E	EXTENSION			
TREASURER	(214) 642-4480					
PHONE						
8 REPORT						
TYPE	X January 15	30th day before	election	Runoff	15th day after cam	
		Oth day hafara			appointment (office	
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Attac	cn C/OH-FR)
0 DEDIOD	Month Day You			Month Doy	Voor	
9 PERIOD COVERED	Month Day Yea 07/01/2023		IROUGH	Month Day 12/31/202	Year	
	07/01/2023	111	INCOCIT	12/31/202	23	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
10 ELECTION	Month Day Yea	l <u>—</u>	rimary	Runoff	Other	
	03/05/2024		,			
		∐ ^G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
	State Representative P	ace Dallas District	t 114 Dallas	State Represent	tative Place Dallas	District D114
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 50

13 C / OH NAME	Bryant, John W. (The	Honorable)	14 Filer ID 00086370	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expen These expenditures may have been made with officeholders are required to report this informa	ut the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
—	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAM	<u> </u>	
		COMMITTEE CAMPAIGN TREASURER ADDI	RESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER T ES OF LOANS, OR CONTRIBUTIONS MADE E		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOA	ANS)	\$ 47,623.86
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 30,255.45
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF TH RIOD	E LAST DAY OF THE	\$ 17,179.55
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS TING PERIOD	AS OF THE LAST DAY	\$ 49,000.00
17 AFFIDAVIT		I swear, or affirm, under per true and correct and include under Title 15, Election Cod	s all information required t	
		The H	onorable John W. Bryaı	nt
		Signature	e of Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL ABO	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
of	, 20, to ce	ertify which, witness my hand and seal of office.		
Signature of office	eer administering	Printed name of officer administering	Title of office	r administering oath

SUBTOTALS - C/OH

FORM COH **COVER SHEET PG 3**

					3 01 50
	ER NAM	ME ohn W. (The Honorable)	19 Filer ID 00086370	(Eth	ics Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	47,435.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	188.86
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	X	SCHEDULE E: LOANS		\$	49,500.00
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	30,255.45
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	es Schedule A1: 5 Rpt: 4/50	
2	FILER NAME Bryant, John	W. (The Honorable)		3 Filer ID 0008637	(Ethics Commissio	n Filers)
4	Date 10/06/2023	 Full name of contributor)		f Contribution (\$)	\$500.00
		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	ıs)		
	Date 09/10/2023	Full name of contributor out-of-state PAC (ID#:_Ambrose, Kevin Contributor address; City; State; Zip Code)	Amount of	f Contribution (\$)	\$100.00
		Washington, MD 20880				
	Principal occu Real Estate	pation / Job title (See Instructions)	Employer (See Instructions Long and Foster Real E			
	Date 09/16/2023	Full name of contributor out-of-state PAC (ID#:_Ambrose, Kevin Contributor address; City; State; Zip Code		Amount of	f Contribution (\$)	\$50.00
		Washington, MD 20880				
	Principal occu Real Estate	pation / Job title (See Instructions)	Employer (See Instructions Long and Foster Real E	*		
	Date 09/16/2023	Full name of contributor out-of-state PAC (ID#:_Anton, Bruce Contributor address; City; State; Zip Code Dallas, TX 75201)	Amount of	f Contribution (\$)	\$250.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self	ns)		
	Date 09/18/2023	Full name of contributor out-of-state PAC (ID#:_Apodaca, Michelle Contributor address; City; State; Zip Code Austin, TX 78763		Amount of	f Contribution (\$)	\$500.00
	Principal occu Lobbyist	pation / Job title (See Instructions)	Employer (See Instructions Apodaca Advocacy Gro			
			1			

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 2/25 Rpt: 5/50	
2	FILER NAME Bryant, John	W. (The Honorable)				3	Filer ID (Ethics Commission 00086370	n Filers)
4	Date 09/17/2023	5 Full name of contributor Ball, Jean6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$100.00
_		Dallas, TX 75227		_				
8	Principal occu	pation / Job title (See Instructions	3)	9	Employer (See Instructions none	5)		
	Date 10/06/2023	Full name of contributor Beer Alliance of Texas PA Contributor address; City; S	-)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78701				<u></u>		
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Date 09/20/2023	Full name of contributor Bobosky, Shelby Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$250.00
		Dallas, TX 75214						
	Principal occu Executive	pation / Job title (See Instructions	s)		Employer (See Instructions Texas Humane Legislat			
	Date 09/20/2023	Full name of contributor Bogart, Billie Contributor address; City; S Richardson, TX 75081	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions none	<u> </u>		
	Date 09/18/2023	Full name of contributor Bradley, David Contributor address; City; S Irving, TX 75062	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions none	s)		

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how t	to complete this form	n.	1	Total pages Schedule A1: Sch: 3/25 Rpt: 6/50	
2	FILER NAME Bryant, John	W. (The Honorable)			3	Filer ID (Ethics Commission 00086370	on Filers)
4	Date 09/20/2023	5 Full name of contributor Branson, Debbie6 Contributor address; City; Stat	out-of-state PAC (ID#: ie; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occur	Dallas, TX 75205 pation / Job title (See Instructions)	lo.	Employer (See Instructions			
•	Attorney	pation / Job title (See Instructions)	9	Law Offices of Frank Bra		on	
	Date 09/10/2023	Full name of contributor Brestler, Edward Contributor address; City; Stat				Amount of Contribution (\$)	\$50.00
	Principal occur	Dallas, TX 75204 pation / Job title (See Instructions)		Employer (See Instructions	<u>)</u>		
	Not Employe			Employer (See manuacions	')		
	Date 09/11/2023	Full name of contributor Brestler, Edward Contributor address; City; Stat	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
		Dallas, TX 75204					
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions)		
	Date 11/13/2023	Full name of contributor Brooks, Peter Contributor address; City; Stat Austin, TX 78751				Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/19/2023	Full name of contributor Brooks, Peter Contributor address; City; Stat Austin, TX 78751	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			•				

	MONET	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/25 Rpt: 7/50	
2	FILER NAME Bryant, John	W. (The Honorable)			3	Filer ID (Ethics Commission 00086370	n Filers)
4	Date 10/06/2023	5 Full name of contributor Brooks, Randy & Marti6 Contributor address; City; St	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$200.00
8	Principal occu	Dallas, TX 75223 pation / Job title (See Instructions	3)	Employer (See Instructions	<u> </u>		
	Not Employe		,		-,		
	Date 10/12/2023	Full name of contributor Brooks, Randy & Marti Contributor address; City; Si)	•	Amount of Contribution (\$)	\$100.00
	Principal occu	Dallas, TX 75223 pation / Job title (See Instructions	.)	Employer (See Instructions	-) 		
	Not Employe		')	Employer (See Instructions)		
	Date 09/12/2023	Full name of contributor Brown, Brianna Contributor address; City; Si	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$200.00
		Dallas, TX 75214					
	Principal occu Not Employe	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Date 09/10/2023	Full name of contributor Bryant, Stephen Contributor address; City; St			•	Amount of Contribution (\$)	\$100.00
	Principal occu NA	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Date 09/17/2023	Full name of contributor Bryant, Toni Contributor address; City; Si Dallas, TX 75206			•	Amount of Contribution (\$)	\$100.00
	Principal occu District Direc	pation / Job title (See Instructions tor	(5)	Employer (See Instructions Rep. Venton Jones	5)		

	MONET	ARY POLITICAL (ONS		SCHEDU	LE A1	
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/25 Rpt: 8/50	
2	FILER NAME Bryant, John	W. (The Honorable)			3	Filer ID (Ethics Commiss 00086370	ion Filers)
4	Date 09/10/2023	5 Full name of contributor Bush, Janie6 Contributor address; City; S	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$50.00
		Dalla, TX 75229					
8	Principal occu Not Employe	pation / Job title (See Instructions ed	8)	9 Employer (See Instructions	s)		
	Date 11/20/2023	Full name of contributor Carl, Carlton Contributor address; City; S)	•	Amount of Contribution (\$)	\$1,000.00
	Dringing Loggy	Martindale, TX 78655		Employer (Coo Instruction	<u></u>		
	Consultant	pation / Job title (See Instructions	5)	Employer (See Instructions Self	5)		
	Date 09/11/2023	Full name of contributor out-of-state PAC (ID#:) Carl, Carlton Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00
		Martindale, TX 78655					
	Principal occu Consultant	pation / Job title (See Instructions	s)	Employer (See Instructions Self	S)		
	Date 09/17/2023	Full name of contributor Casey, Karen Contributor address; City; S Dallas, TX 75214	out-of-state PAC (ID#:_		•	Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions none	S)		
	Date 12/07/2023	Full name of contributor Charles Butt Public Educa Contributor address; City; S San Antonio, TX 78209				Amount of Contribution (\$)	\$10,000.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL C	S		SCHEDUI	E A1		
	The Instruc	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 6/25 Rpt: 9/50	
2	FILER NAME Bryant, John	W. (The Honorable)				3	Filer ID (Ethics Commission 00086370	on Filers)
4	Date 09/11/2023	5 Full name of contributor Chase, Scott6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
•	Dringing Lagge	Dallas, TX 75208	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	_	Employer (Coo Instructions	<u></u>		
8	Attorney	pation / Job title (See Instructions)		Employer (See Instructions Self	s)		
	Date 09/18/2023	Full name of contributor Coelho, Tony Contributor address; City; St.)	•	Amount of Contribution (\$)	\$500.00
	Principal occu	Doylestown, PA 18901 pation / Job title (See Instructions	\		Employer (See Instructions	;) 		
	Not Employe		,		Employer (See mandenone	"		
	Date 09/20/2023	Full name of contributor Coleman, Robert Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$200.00
		Dallas, TX 75214						
	Principal occu Attorney	pation / Job title (See Instructions			Employer (See Instructions Wilson Elser	5)		
	Date 10/06/2023	Full name of contributor Committee of Vistra Corp Contributor address; City; St)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions			Employer (See Instructions	5)		
	Date 09/10/2023	Full name of contributor Conner, Terry Contributor address; City; St	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$250.00
	Principal occu Not Employe	pation / Job title (See Instructions			Employer (See Instructions	s)		

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS 		SCHEDUL	E A1
	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/25 Rpt: 10/50	
2	FILER NAME Bryant, John	W. (The Honorable)			3	Filer ID (Ethics Commission 00086370	n Filers)
4	Date 09/10/2023	5 Full name of contributorCooke, Melanie6 Contributor address; City; S	out-of-state PAC (ID#:_	_	7	Amount of Contribution (\$)	\$50.00
		Rockwall, TX 75032					
8	Principal occu Not employe	pation / Job title (See Instruction d	5)	9 Employer (See Instructions	S)		
	Date 09/21/2023	Full name of contributor Darden, Margaret Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00
	Principal occu	Dallas, TX 75225 pation / Job title (See Instruction	5)	Employer (See Instructions	<u> </u>		
	None	padon, dos dae (ecc medadaen	-,	Employer (eee meadedions	-,		
	Date 09/20/2023	Full name of contributor Davis, Carlos (Dr.) Contributor address; City; S	out-of-state PAC (ID#:_		•	Amount of Contribution (\$)	\$200.00
		Dallas, TX 75218					
	Principal occu Psychologist	pation / Job title (See Instruction	5)	Employer (See Instructions Self-employed	5)		
	Date 09/18/2023	Full name of contributor Denison, Donna M Contributor address; City; S Dallas, TX 75214)		Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instruction	5)	Employer (See Instructions none	5)		
	Date 09/18/2023	Full name of contributor Denison, Donna M Contributor address; City; S Dallas, TX 75214	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions none	<u>. </u>		

	MONEI	ARY POLITICAL CONTR	IBUTION	IS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to comp	lete this form	n.	1	Total pages Schedule A1: Sch: 8/25 Rpt: 11/50	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Bryant, John	W. (The Honorable)				00086370	
4	Date 09/17/2023	Donovan, Carol	ate PAC (ID#:)	7	Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75214					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Attorney-Me	diator		Carol Crabtree Donovar	ı P	С	
	Date 09/18/2023	Full name of contributor out-of-sta Dupuy, Robert Contributor address; City; State; Zip Cod	ate PAC (ID#:			Amount of Contribution (\$)	\$500.00
		Dallas, TX 75214					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	lawyer			Husch Blackwell			
	Date 09/18/2023	Full name of contributor out-of-sta	ate PAC (ID#:			Amount of Contribution (\$)	\$50.00
		Contributor address; City; State; Zip Cod Dallas, TX 75219	e				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
				none			
_	Date	Full name of contributor out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	09/18/2023	Forsythe-Lill, Veletta Contributor address; City; State; Zip Cod				(,	\$150.00
		Dallas, TX 75223					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	10/06/2023	Funds Available for Involved Reporte					\$500.00
		Contributor address; City; State; Zip Cod					
		Austin , TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			,				

	MONET	ARY POLITICAL (CONTRIBUTION	NS			SCHEDUI	LE A1
	The Instruc	ction Guide explains how	to complete this for	rm.		1	Total pages Schedule A1: Sch: 9/25 Rpt: 12/50	
2	FILER NAME Bryant, John	W. (The Honorable)				3	Filer ID (Ethics Commission 00086370	on Filers)
4	Date 09/20/2023	5 Full name of contributor Gaubert, Thomas6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	DeSoto, TX 75115 pation / Job title (See Instructions	(i) 9	Employ	er (See Instructions	<u> </u>		
_	Not Employe		,		nployed	,		
	Date 09/20/2023	Full name of contributor Ginsberg, Elizabeth Contributor address; City; St	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$100.00
		Dallas, TX 75230						
	Principal occur Attorney	pation / Job title (See Instructions	(3)	Employ Self	er (See Instructions	s)		
	Date 09/19/2023	Full name of contributor out-of-state PAC (ID#:) Glover, Grace Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$100.00	
		Dallas, TX 75206						
	Principal occu	pation / Job title (See Instructions	5)	Employ none	er (See Instructions	5)		
	Date 09/10/2023	Full name of contributor Green, Rhonda Contributor address; City; St Dallas, TX 75214	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions	(3)	Employ	er (See Instructions	5)		
	Date 09/16/2023	Full name of contributor Hampton, Joanna Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occu Architect	pation / Job title (See Instructions	s)		ver (See Instructions Studio	s)		

	MONET	ARY POLITICAL (SCHEDUL	E A1			
	The Instru	ction Guide explains hov	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 10/25 Rpt: 13/50	
2	FILER NAME Bryant, John	W. (The Honorable)				3	Filer ID (Ethics Commission 00086370	n Filers)
4	Date 09/16/2023	5 Full name of contributor Hawkins-Bowland, Cynth)	7	Amount of Contribution (\$)	\$200.00
		Dallas, TX 75218						
8	Principal occu	pation / Job title (See Instructions	5)	9	Employer (See Instructions none	s)		
	Date 09/20/2023	Full name of contributor Hodge, Terri Contributor address; City; S)	•	Amount of Contribution (\$)	\$50.00
	Deinsinal assu	Dallas, TX 75231			Franks on (Cook bathwetic no			
	none	pation / Job title (See Instructions	o)		Employer (See Instructions	s)		
	Date 09/11/2023	Full name of contributor Holmberg, Bill Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$100.00
		Dallas, TX 75214						
	Principal occu Consultant	pation / Job title (See Instructions	s)		Employer (See Instructions Self-employed	5)		
	Date 09/17/2023	Full name of contributor Holmberg, Bill Contributor address; City; S Dallas, TX 75214	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions none	<u>l </u>		
	Date 10/06/2023	Full name of contributor IBAT PAC Contributor address; City; S Austin, TX 78701	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 11/25 Rpt: 14/50	
2	FILER NAME Bryant, John	W. (The Honorable)			3	Filer ID (Ethics Commission 00086370	on Filers)
4	Date 10/06/2023	5 Full name of contributor IMPACT PAC6 Contributor address; City; Sta)	7	Amount of Contribution (\$)	\$250.00
		Austin, TX 78768					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	s)		
	Date 12/07/2023	Full name of contributor Jee, Andrew Contributor address; City; Sta	out-of-state PAC (ID#:atte; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Dallas, TX 75219 pation / Job title (See Instructions)		Employer (See Instructions	<u>s)</u>		
	Attorney	panon / oos ane (oos mondonons)		Jee Law	-,		
	Date 09/21/2023	Full name of contributor Jenkins, JoAnn Contributor address; City; Sta	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$100.00
		Dallas, TX 75205					
	Principal occu none	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 09/17/2023	Full name of contributor Johnson, Scherry Contributor address; City; Sta Dallas, TX 75219)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/18/2023	Full name of contributor Jones, Melissa Contributor address; City; Sta	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$50.00
	Principal occu None	pation / Job title (See Instructions)		Employer (See Instructions None	5)		

	MONET	ARY POLITICAL (ONS		SCHEDULE A1		
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/25 Rpt: 15/50	
2	FILER NAME Bryant, John	W. (The Honorable)			3	Filer ID (Ethics Commission 00086370	n Filers)
4	Date 09/10/2023	5 Full name of contributor Kaplan, David & Shawn6 Contributor address; City; States	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$500.00
_	Dringing age	Dallas , TX 75218		Employer (Coo Instructions	<u></u>		
8	Attorney	pation / Job title (See Instructions	5)	9 Employer (See Instructions	5)		
	Date 09/10/2023	Full name of contributor Kendall, Karen Contributor address; City; S				Amount of Contribution (\$)	\$250.00
		Dallas, TX 75214			<u> </u>		
	None	pation / Job title (See Instructions	5)	Employer (See Instructions None	S)		
	Date 11/13/2023	Full name of contributor Klutts, Melanie Contributor address; City; S	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$25.00
		Dallas, TX 75218					
	Principal occu Admnistrator	pation / Job title (See Instructions	s)	Employer (See Instructions Richard ISD	5)		
	Date 09/10/2023	Full name of contributor Koudelka, Kama Contributor address; City; S Dallas, TX 75214)	•	Amount of Contribution (\$)	\$250.00
	Principal occu N.A	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date 09/19/2023	Full name of contributor Krausse, Annette Contributor address; City; S Dallas, TX 75206	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions Kim for Congress	5)		
				<u>-</u>			

	MONET	ARY POLITICAL (S		SCHEDUL	E A1		
	The Instru	ction Guide explains hov	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 13/25 Rpt: 16/50	
2	FILER NAME Bryant, John	W. (The Honorable)				3	Filer ID (Ethics Commission 00086370	n Filers)
4	Date 09/14/2023	5 Full name of contributor Kutac, Angela6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$200.00
		Dallas, TX 75218						
8	Principal occu	pation / Job title (See Instruction	5)	9	Employer (See Instructions none	s)		
	Date 09/12/2023	Full name of contributor Lawler, Gary Contributor address; City; S)		Amount of Contribution (\$)	\$50.00
	Dringing agg	Dallas, TX 75206	5)		Employer (See Instructions	<u></u>		
	Not Employe	pation / Job title (See Instruction: ed	5)		Employer (See Instructions	o)		
	Date 10/06/2023	Full name of contributor Linebarger Goddan Blair Contributor address; City; S)	•	Amount of Contribution (\$)	\$500.00
		Austin, TX 78760						
	Principal occu	pation / Job title (See Instruction:	5)		Employer (See Instructions	5)		
	Date 09/20/2023	Full name of contributor Livingston, Kathleen Contributor address; City; S)		Amount of Contribution (\$)	\$100.00
	Principal occu	Dallas, TX 75225 pation / Job title (See Instruction	5)		Employer (See Instructions	<u> </u>		
	Date 09/20/2023	Full name of contributor Long, Mauri Contributor address; City; S Garland, TX 75042	out-of-state PAC (ID#:_)	-	Amount of Contribution (\$)	\$50.00
	Principal occu Financial Ma	pation / Job title (See Instruction:	5)		Employer (See Instructions Modern Family Vision	5)		
	arrota Mu	g			y violoti			

	MONET	TARY POLITICAL CONTRIBUTIONS					SCHEDUL	E A1
	The Instruc	ction Guide explains how	v to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 14/25 Rpt: 17/50	
2	FILER NAME Bryant, John	W. (The Honorable)				3	Filer ID (Ethics Commission 00086370	on Filers)
4	Date 09/18/2023	5 Full name of contributor Luckhardt, Lou6 Contributor address; City; S	out-of-state PAC (ID#: itate; Zip Code)	7	Amount of Contribution (\$)	\$50.00
Q	Principal occur	Ennis, TX 75119 pation / Job title (See Instruction	c) (c)	<u> </u>	Employer (See Instructions	-, 		
0	AFL-CIO sta		5)		Dallas CLC AFL-CIO	·)		
	Date 09/20/2023	Full name of contributor Lyle, Kathrine Contributor address; City; S				•	Amount of Contribution (\$)	\$1,000.00
	Principal occur	Dallas , TX 75225 pation / Job title (See Instruction	c)		Employer (See Instructions	·/-		
	None	pation / Job title (See instruction	5)		None (See Instructions	·)		
	Date 07/06/2023	Full name of contributor Mangan, Andrew Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Ausint, TX 78704						
	Principal occu	pation / Job title (See Instruction	s)		Employer (See Instructions	5)		
	Date 11/13/2023	Full name of contributor Mathis, Maryam Contributor address; City; S Dallas, TX 75204				•	Amount of Contribution (\$)	\$20.00
	Principal occu Not Employe	pation / Job title (See Instructioned	s)		Employer (See Instructions	5)		
	Date 09/18/2023	Full name of contributor Mattox, Janice Contributor address; City; S Dallas, TX 75223	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$500.00
	Principal occu Attorney	pation / Job title (See Instruction	s)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL (S		SCHEDUI	E A1		
	The Instruc	ction Guide explains hov	to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 15/25 Rpt: 18/50	
2	FILER NAME Bryant, John	W. (The Honorable)				3	Filer ID (Ethics Commission 00086370	on Filers)
4	Date 09/16/2023	5 Full name of contributor Mauzy, Charles	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$50.00
8		Dallas, TX 75214 pation / Job title (See Instruction	s)	9	Employer (See Instructions	<u> </u> s)		
	Date 09/20/2023	Full name of contributor Mazero, John Contributor address; City; S Dallas, TX 75214			Self		Amount of Contribution (\$)	\$500.00
	Principal occu Retired	pation / Job title (See Instruction	5)		Employer (See Instructions	<u>I</u> 5)		
	Date 09/19/2023	Full name of contributor McFerrin, Grace Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	Dallas, TX 75228 pation / Job title (See Instruction	s)		Employer (See Instructions	<u> </u> s)		
	Date 10/06/2023	Full name of contributor McQuire, Mike Contributor address; City; S)		Amount of Contribution (\$)	\$1,500.00
	Principal occu Pres & CEO	pation / Job title (See Instruction	5)		Employer (See Instructions Andrews Distributing	<u>I</u> S)		
	Date 09/18/2023	Full name of contributor McRoberts, Hunt Contributor address; City; S Dallas, TX 75214	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instruction	5)		Employer (See Instructions none	s)		

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUI	LE A1
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 16/25 Rpt: 19/50	
2	FILER NAME Bryant, John	W. (The Honorable)			3	Filer ID (Ethics Commission 00086370	on Filers)
4	Date 09/22/2023	5 Full name of contributor [Meed, Alex	out-of-state PAC (ID#: te; Zip Code)	7	Amount of Contribution (\$)	\$100.00
		Austin, TX 78703					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions none	5)		
	Date 09/10/2023	Full name of contributor Mesh, Mary Contributor address; City; Sta)		Amount of Contribution (\$)	\$50.00
	Principal occu	Dallas, TX 75214 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	NA .	,		. , ,			
	Date 09/29/2023	Full name of contributor [Miller, Laura (The Honorab Contributor address; City; Sta)		Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75319					
	Principal occu None	pation / Job title (See Instructions)		Employer (See Instructions None	5)		
	Date 09/17/2023	Full name of contributor [Mitchell, John Contributor address; City; Sta Dallas, TX 75214	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions none	5)		
	Date 09/20/2023	Full name of contributor [Molberg Campaign, Ken (J Contributor address; City; Sta Dallas, TX 75201)		Amount of Contribution (\$)	\$100.00
	Principal occu Judge	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL (S		SCHEDUL	E A1		
	The Instruc	ction Guide explains how	to complete this fo	orr	m.	1	Total pages Schedule A1: Sch: 17/25 Rpt: 20/50	
2	FILER NAME Bryant, John	ı W. (The Honorable)				3	Filer ID (Ethics Commission 00086370	n Filers)
4	Date 09/18/2023	Full name of contributor Morgan, Camille Contributor address; City; Si	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$25.00
	Dringing Loon	Dallas, TX 75218	<u> </u>	_	Employer (Coa Instructions	<u></u>		
8	RN	pation / Job title (See Instructions	5)	9	Employer (See Instructions VA	5)		
	Date 09/18/2023	Full name of contributor Naimon, David Contributor address; City; S)		Amount of Contribution (\$)	\$100.00
	Dringing age	Rockville, MD 20852			Employer (See Instructions	<u></u>		
	Attorney	pation / Job title (See Instructions	5)		Employer (See Instructions US Government	5)		
	Date 09/12/2023	Full name of contributor Nicholson, Gavin Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$100.00
		Dallas, TX 75201						
	Principal occu Chief of Staf	pation / Job title (See Instructions f	5)		Employer (See Instructions Rep. Venton Jones	s)		
	Date 09/12/2023	Full name of contributor Northrup, Michael Contributor address; City; S Dallas, TX 75206)		Amount of Contribution (\$)	\$100.00
	Principal occu Attorney	pation / Job title (See Instructions	s)		Employer (See Instructions Cowles & Thompson	5)		
	Date 09/18/2023	Full name of contributor Offutt, Larry Contributor address; City; S Dallas, TX 75206	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Risk Manage	pation / Job title (See Instructions er	(s)		Employer (See Instructions Steak n' Shake	5)		
			-					

	MONET	TARY POLITICAL CONTRIBUTIONS					SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 18/25 Rpt: 21/50	
2	FILER NAME Brvant, John	W. (The Honorable)				3	Filer ID (Ethics Commission 00086370	n Filers)
4	Date 08/07/2023	5 Full name of contributor Orr, Stephan	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$500.00
_	Dringing! agg.	Pittsburg, TX 75686	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	_	Employer (Coo Instructions	<u></u>		
8	Attorney	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 09/17/2023	Full name of contributor Ridley, Paul Contributor address; City; St)		Amount of Contribution (\$)	\$500.00
		Dallas, TX 75214						
	Principal occu Dallas City C	pation / Job title (See Instructions Council)		Employer (See Instructions City of Dallas	s)		
	Date 11/13/2023	Full name of contributor Roberts, Karen Contributor address; City; St	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$50.00
		Dallas, TX 75223						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 09/11/2023	Full name of contributor Rodine, Richard Contributor address; City; St Dallas, TX 75201	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/10/2023	Full name of contributor Ross, Annadele Contributor address; City; St Dallas, TX 75219	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions ed)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL (IS		SCHEDUL	E A1	
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 19/25 Rpt: 22/50	
2	FILER NAME Bryant, John	W. (The Honorable)			3	Filer ID (Ethics Commission 00086370	n Filers)
4	Date 11/13/2023	5 Full name of contributor Salem, M. Emad 6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
		Euless, TX 76040					
8	Principal occu Real Estate	pation / Job title (See Instructions	9	Employer (See Instructions Sellstate Metro Realty	5)		
	Date 09/11/2023	Full name of contributor Salem, M. Emad Contributor address; City; St			•	Amount of Contribution (\$)	\$100.00
		Euless, TX 76040	, 1		<u></u>		
	Real Estate	pation / Job title (See Instructions	(1)	Employer (See Instructions Sellstate Metro Realty	S)		
	Date 09/19/2023	Full name of contributor Schmidt, Rene Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)	•	Amount of Contribution (\$)	\$50.00
		Dallas, TX 75206					
	Principal occu Organist	pation / Job title (See Instructions)	Employer (See Instructions Christ Episcopal Church			
	Date 11/19/2023	Full name of contributor Schmitt, Lee Contributor address; City; St Dallas, TX 75221	out-of-state PAC (ID#:ate; Zip Code		•	Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	5)		
	Date 09/10/2023	Full name of contributor Schudder, Kendall Contributor address; City; St Dallas, TX 75214	out-of-state PAC (ID#:ate; Zip Code		•	Amount of Contribution (\$)	\$100.00
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions Armadilla Strategies LLC			

	MONET	ARY POLITICAL CONTRIB	BUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete	e this forr	n.	1	Total pages Schedule A1: Sch: 20/25 Rpt: 23/50	
2	FILER NAME Bryant John	W. (The Honorable)			3	Filer ID (Ethics Commission 00086370	n Filers)
4	Date 09/17/2023	 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00
		Dallas, TX 75218					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions none	s)		
	Date 09/20/2023	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu	Irving, TX 75060 pation / Job title (See Instructions)		Employer (See Instructions	:) 		
	Lab Tech	oction, top the (See instituctions)		Electro Plate Circuitry	,,		
	Date 09/10/2023	Full name of contributor out-of-state P Sheedy, Jessica Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Arlington, TX 76017					
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions	5)		
	Date 09/10/2023	Full name of contributor out-of-state P Siebler, Ron Contributor address; City; State; Zip Code Dallas, TX 75218	-)		Amount of Contribution (\$)	\$50.00
	Principal occu Contractor	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> 5)		
	Date 10/04/2023	Full name of contributor out-of-state P Smith , Robert Contributor address; City; State; Zip Code Dallas, TX 75230				Amount of Contribution (\$)	\$500.00
	Principal occu President/CE	pation / Job title (See Instructions)		Employer (See Instructions Accident & Injury Pain C		ter	
	. residenti et			. soldoni d injury i dili C			

	MONET	ARY POLITICAL CON	S		SCHEDUL	E A1	
	The Instruc	ction Guide explains how to co	omplete this forr	n.	1	Total pages Schedule A1: Sch: 21/25 Rpt: 24/50	
2	FILER NAME Bryant, John	W. (The Honorable)			3	Filer ID (Ethics Commission 00086370	n Filers)
4	Date 09/20/2023)	7	Amount of Contribution (\$)	\$100.00
_		Dallas, TX 75204	To To				
8	Principal occu None	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 09/18/2023	Full name of contributor out Stephenson, Sally Contributor address; City; State; Zig				Amount of Contribution (\$)	\$100.00
	Drincinal occu	Dallas, TX 75206 pation / Job title (See Instructions)		Employer (See Instructions			
	Writer	oation / Job title (See Instructions)		Self)		
	Date 09/20/2023	Full name of contributor out Stewart, Melissa Contributor address; City; State; Zip	t-of-state PAC (ID#: p Code			Amount of Contribution (\$)	\$5.00
		Dallas, TX 75218					
	Principal occu NA	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/20/2023	Full name of contributor out Strickland, Alisa Contributor address; City; State; Zip Dallas, TX 75218	t-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu none	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 10/03/2023	Swanson, Lisa	t-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occu Medical Dire	pation / Job title (See Instructions)		Employer (See Instructions Blue Cross Blue Shield)		

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 22/25 Rpt: 25/50		
2	FILER NAME Bryant, John	W. (The Honorable)		3	Filer ID (Ethics Commission 00086370	n Filers)
4	Date 10/06/2023 5 Full name of contributor out-of-state PAC (ID#:) TSAPAC 6 Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$2,000.00
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/18/2023 Talley, Olive Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00
	Principal occu	Dallas, TX 75214 pation / Job title (See Instructions)	Employer (See Instructions) 		
	Filmmaker	pation / 300 title (See Instructions)	Self	')		
	Date 10/16/2023			Amount of Contribution (\$)	\$3,000.00	
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/06/2023 Texas Land Title Assoc PAC Contributor address; City; State; Zip Code Austin, TX 78703				Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/06/2023 Texas Medical Association PAC Contributor address; City; State; Zip Code Austin, TX 78701				Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUT		SCHEDULE A				
	The Instru	ction Guide explains how to complete thi	1	Total pages Schedule A1: Sch: 23/25 Rpt: 26/50				
2	FILER NAME Bryant, John	W. (The Honorable)		3	Filer ID (Ethics Commission 00086370	ı Filers)		
4	Date 10/06/2023	 Full name of contributor	7	Amount of Contribution (\$)	\$500.00			
_		Austin, TX 78701	1	Ţ				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	IS)				
	Date 10/06/2023	Full name of contributor out-of-state PAC (I Texas Trial Lawyers Assoc PAC Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$2,500.00			
	Principal occu	Austin, TX 78701 Dation / Job title (See Instructions)	Employer (See Instructions	l IS)				
	Date 10/05/2023	Full name of contributor X out-of-state PAC (I The Home Depot Inc PAC Contributor address; City; State; Zip Code Washington, DC 20004		Amount of Contribution (\$)	\$1,000.00			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)				
	Date 09/10/2023				Amount of Contribution (\$)	\$50.00		
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions	ıs)				
	Date O9/18/2023 Full name of contributor out-of-state PAC (ID#:) Transou, Linda Contributor address; City; State; Zip Code Dallas, TX 75214				Amount of Contribution (\$)	\$50.00		
	Principal occu Art Director	pation / Job title (See Instructions)	Employer (See Instructions Self	ıs)				

	MONET	ARY POLITICAL C		E A1			
	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 24/25 Rpt: 27/50	
2	FILER NAME	W. (The Honorable)			3	Filer ID (Ethics Commission 00086370	on Filers)
1	Date		V	00010470	-		
4	10/06/2023	Union Pacific Corp PAC	x out-of-state PAC (ID#: CI		ľ	Amount of Contribution (\$)	\$1,500.00
		6 Contributor address; City; Sta	te; Zip Code				
		Spring, TX 75223					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	09/18/2023	Wally, Liz	out of state 1 Me (IB#)		ranount of Contribution (¢)	\$100.00
		Contributor address; City; Sta					
		, , , , , , , , , , , , , , , , , , ,	, ,				
		Dallas, TX 75214					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Clean Election	ons Texas		Consultand			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/13/2023	Weiss, Mark					\$50.00
		Contributor address; City; Sta	te; Zip Code				
		Austin, TX 78703					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	:) [
	i inicipal coca	patient, con the (ecc metadiene)		Not employed	,		
	Date	Full name of contributor	out-of-state PAC (ID#:	, ,	Г	Amount of Contribution (\$)	
	09/14/2023	West, G David	Out-of-state FAC (ID#			Amount of Contribution (4)	\$100.00
	00/1 1/2020	Contributor address; City; Sta					Ψ100.00
		Contributor address, Oity, Sta	ic, zip code				
		Dallas, TX 75238					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe	ed					
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/22/2023	White, Randy					\$50.00
		Contributor address; City; Sta			1		
		Machineton DC 20002					
	Dringing! as	Washington, DC 20003	1	Employer (Coo Instruction	<u></u>		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions none	5)		
				HOHE			

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDUL	E A1	
	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 25/25 Rpt: 28/50		
2	FILER NAME Bryant, John	W. (The Honorable)		3	Filer ID (Ethics Commissio 00086370	n Filers)
4	Date 09/10/2023	 Full name of contributor	7	Amount of Contribution (\$)	\$250.00	
_	Duinning Langu	Dalas, TX 75230	O Francisco (Con Instructions			
8	Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/10/2023	Full name of contributor		Amount of Contribution (\$)	\$25.00	
		Dallas, TX 75206 pation / Job title (See Instructions)	Employer (See Instructions)		
Not Employed						
	Date Full name of contributor out-of-state PAC (ID#:) 11/13/2023 Zeitler, Kurt Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$10.00
		Elgin, TX 78621				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions)		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 29/50 3 Filer ID (Ethics Commission Filers) FILER NAME Bryant, John W. (The Honorable) 00086370 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution Date out-of-state PAC (ID#: Amount of contribution (\$) description 07/31/2023 Schlueter, Stan \$38.86 In-kind for Fundraiser 7 Contributor address; City; State; Zip Code Austin, TX 78768 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) Lobbyist 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 Full name of contributor Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 10/03/2023 Scuder, Kendall \$150.00 | Sponsorship at National Contributor address; City; State; Zip Code Night Out Dallas, TX 75214 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) Employer (FOR NON-JUDICIAL) 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)

			SCHEDULE E
n Guide explains how to complete this	form.	1	ages Schedule E: /1 Rpt: 30/50
(The Honorable)			(Ethics Commission Filers)
ITEMIZED LOANS		I	\$ 49,000.00
7 Name of lender out-of-state Bryant, John	PAC (ID#:)	9 Loan Amount (\$) \$500.00
8 Lender address; City; State;	Zip Code		10 Interest Rate
Dallas, TX 75214			11 Maturity Date
n / Job title (See Instructions)	13 Employer (See Instructions Self	5)	
ateral	15 Check if personal funds we X	ere deposited	d into political account (See Instructions)
17 Name of guarantor	•		19 Amount Guaranteed (\$)
18 Guarantor address; City; State;	Zip Code		
n	21 Employer (See Instructions	5)	
(The Honorable) TEMIZED LOANS Name of lender	TEMIZED LOANS 7 Name of lender	Temporable (In Equation 1997) The Honorable (In Equation 1997) The Honorable (In Equation 1997) Temporable (In Equation 1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/20 Rpt: 31/50	Bryant, John W. (The Honorable) 00086370
4	Date	5 Payee name
	07/14/2023	Access Valet Parking
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$16.00	Access Valet Parking
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense Valet Parking
		Valettaining
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
\vdash	Date	Dougo nomo
		Payee name
	10/05/2023	Ace Parking
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.95	12475 FM812
		Austin, TX 78617
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense Parking
		T arking
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	Davies same
	Date 09/28/2023	Payee name Action Network
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	1900 L Street
		Washington, DC 20036
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Computer Services Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Computer Services
		Computer Services
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage E
Contributions/ Departing Mode By

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (other a cottographed listed above)

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services	Salaries/V	/ages	/Contract Labor		OTHER (enter a	category not listed above)	
			The Instruction Guid	e explains how to co	mple	ete this form.				
1	Total pages Schedule F1:	2 FILER NAME	Ē				3	Filer ID	(Ethics Commission File	ers)
	Sch: 2/20 Rpt: 32/50	Bryant, Joh	n W. (The Honora	ble)				00086370		
4	Date	5 Payee name								
	10/30/2023	Action Netv	vork							
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	de					
	\$10.00	1900 L Stre	et							
		Washingtor	n, DC 20036							
8	PURPOSE		ee Categories listed at the t		(b)	Description				
ľ	OF	Computer S		top of this schedule)	(~)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	Computer s	JCI VICCS			=		officeholder living		
						Computer Se	rvic	es		
9	Complete ONLY if direct		ceholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/O	4								
	Date	Payee name								
	11/28/2023	Action Netv	vork							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	de					
	\$10.00	1900 L Stre	et							
		Washingtor	n, DC 20036							
	PURPOSE	_	ee Categories listed at the t		(b)	Description				
	OF	Computer S		top of this schedule)	(~)	`	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	Computer c	JC1 V10C3			Check if Austin,	, TX,	officeholder living	expense	
						Computer Se	rvic	ces		
	Complete ONLY if direct		ceholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	4								
	Date	Payee name								
	12/28/2023	Action Netv	vork							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	de					
	\$10.00	1900 L Stre	et							
		Washingtor	n, DC 20036							
	PURPOSE		ee Categories listed at the t	ton of this schedule)	(b)	Description				
	OF	Computer S		op of this schedule)	` '		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE					Check if Austin,	, TX,	officeholder living	expense	
						Computer Se	rvic	ces		
	Complete ONLY if direct		ceholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/O	1								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	Total pages Cab - dist - E4		4
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	
4	Date	5 Payee name	
	08/17/2023	Addams, Cameron	
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 13687 Purple Sage Dallas, TX 75240	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Contract Labor	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	10/20/2023	Burnham, Lon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	1600 Texas	
	DUDDOG	Ft. Worth, TX 76102	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel cutcide of Taxas, Complete Schedule I	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Reimbursement	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	_
	Date	Payee name	Ī
	07/11/2023	Buzzbrew	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$23.19	5815 Live Oak Street	
		Dallas, TX 75214	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Business Meal	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 4/20 Rpt: 34/50 Bryant, John W. (The Honorable) 00086370 4 Date Payee name 07/17/2023 Capitol Grille in Capitol 6 Amount (\$) Payee address; State; Zip Code \$221.37 Capitol Building Austin, TX 78768 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Business meal** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/03/2023 Cipollina Amount (\$) Payee address; City; State; Zip Code \$63.66 1213 S Lynn St Austin, TX 78703 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Business Meal** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/13/2023 Circle Grill Amount (\$) Payee address: City; State; Zip Code \$28.92 3701 N Buckner Dallas, TX 75228 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Business meal** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment					OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAM	 E				3	Filer ID		(Ethics Commission F	ilers)
	Sch: 5/20 Rpt: 35/50	1	nn W. (The Honorable)					000863	70		
4	Date	5 Payee name	9				_				
	10/08/2023		inty Democratic Party								
6	Amount (\$)	7 Payee addr	ess; City; S	State; Zip Co	de						
	\$1,000.00	1414 N Wa	ashington								
		Dallas, TX	75204								
8	PURPOSE OF		See Categories listed at the top of the	nis schedule)	(b)	Description					
	EXPENDITURE		ns/Donations Made By			Check if travel of Check if Austin				ete Schedule T.	
		Candidate	Officeholder/Political Co	ommuee		Contribution	, 17	, omeendaer	iiviiig c	БАРСПЭС	
9	Complete ONLY if direct		ficeholder name	Office sou	ght			Offic	e hel	d	
	expenditure to benefit C/Ol	H									
	Date	Payee name	9								
	11/01/2023	Dallas Cou	inty Democratic Party								
	Amount (\$)	Payee addr	ess; City; S	State; Zip Co	de						
	\$1,000.00	1414 N Wa	ashington								
		Dallas, TX	75204								
	PURPOSE	(a) Category (See Categories listed at the top of the	nis schedule)	(b)	Description					
	OF EXPENDITURE		ns/Donations Made By			_				ete Schedule T.	
		Candidate/Officeholder/Political Committee				Contribution	i, I X	, officenolaer	living e	expense	
						Contribution					
_	Complete ONLY if direct	L Candidate/Of	ficeholder name	Office sou	ght			Offic	e hel	d	
	expenditure to benefit C/O	Н			•						
	Date	Payee name	9								
	11/16/2023	l	inty Democratic Party								
	Amount (\$)	Payee addr	ess; City; S	State; Zip Co	de						
	\$750.00	1414 N Wa	ashington								
		Dallas, TX	75204								
	PURPOSE	(a) Category (See Categories listed at the top of the	nis schedule)	(b)	Description					
	OF EXPENDITURE	Filing fee								ete Schedule T.	
						Check if Austin	ı, TX	, officeholder	living 6	expense	
						Filing fee					
\vdash	Complete ONLY if direct	L Candidate/Of	ficeholder name	Office sou	<u>a</u> ht			Offic	e hel	d	
	expenditure to benefit C/O			200 000	J. 11			00	3.101	-	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 6/20 Rpt: 36/50	2 FILER NAME Bryant, John W. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00086370	
	3cm. 0/20 Kpt. 30/30		
4	Date	5 Payee name	
	09/13/2023	Dirty Martin's	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$46.19	2808 Guadalupe	
	*		
		A . C . TV 70704	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Business meal	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
	Date	Payee name	_
	07/17/2023	El Alma Restaurant	
	Amount (\$)	Payee address; City; State; Zip Code	-
	\$133.03	1025 Barton Springs	
	Ψ100.00	1023 Batton Springs	
		Austin, TX 78704	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Business meal	
			_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experientare to benefit 6/61	<u> </u>	
	Date	Payee name	
	09/06/2023	Funky East Dallas Democrats	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	Requested	
		Dallas, TX 75218	
	DUDD 0.05		_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Fundraiser	
		i anaraissi	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
			_
_			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/20 Rpt: 37/50	Bryant, John W. (The Honorable) 00086370
4	Date	5 Payee name
	08/02/2023	Google
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$63.96	1600 Amphitheatre Parkway
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Computer Services
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/05/2023	Google
	Amount (\$)	Payee address; City; State; Zip Code
	\$63.96	1600 Amphitheatre Parkway
		Mountain View, CA 94043
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Computer Services Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Computer Services
		Computer Convictor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Dato	Dougo nama
	Date	Payee name
	10/02/2023	Google
	Amount (\$)	Payee address; City; State; Zip Code
	\$63.96	1600 Amphitheatre Parkway
L		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Computer Services Check if travel outside of Texas. Complete Schedule T.
		Computer Son issues
		Computer Services
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.		
1	Total pages Schedule F1: Sch: 8/20 Rpt: 38/50	2 FILER NAME Bryant, John W. (The Honorable)		Filer ID 00086370	(Ethics Commission Filers)
4	Date 11/02/2023	5 Payee name Google	•		
6	Amount (\$) \$63.96	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway			
8	PURPOSE OF EXPENDITURE	Mountain View, CA 94043 (a) Category (See Categories listed at the top of this schedule) Computer Services (b)	Description Check if travel outsic Check if Austin, TX, Computer Service	officeholder living	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought		Office he	ld
	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	Description Check if travel outside Check if Austin, TX, Computer Service	officeholder living	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought		Office he	ld
	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	Description Check if travel outsid Check if Austin, TX, Computer Service	officeholder living	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought		Office he	old

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card F dyment	The Instruction Guide explains how to c	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 9/20 Rpt: 39/50	Bryant, John W. (The Honorable)		00086370	
4 Date	5 Payee name		•	
11/20/2023	H.E.B.			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$10.11	2701 East 7th St			
	Austin, TX 78701			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Food/Beverage Expense	ı –	vel outside of Texas. Con	
		Food	stin, TX, officeholder livin	g expense
		1-000		
9 Complete ONLY if direct	Candidate/Officeholder name Office so		Office h	old
expenditure to benefit C/O		ugni	Office II	ciu
Data				
Date 12/05/2023	Payee name Harland Clarke			
Amount (\$)	Payee address; City; State; Zip C 10931 Laurate Dr	oae		
\$77.96	10931 Laurate Di			
	Con Antonio TV 70240			
	San Antonio, TX 78249	T		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	vel outside of Texas. Con	anloto Schodulo T
EXPENDITURE	Accounting/Banking	ı <u>—</u>	stin, TX, officeholder living	
		Checks		
Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office h	eld
expenditure to benefit C/O	H			
Date	Payee name			
08/30/2023	InFocus Campaigns			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$400.00	PO Box 10726			
	Fort Worth, TX 76114			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Mailing Lists		vel outside of Texas. Con	nplete Schedule T.
EXPENDITURE		. —	stin, TX, officeholder living	g expense
		Mailing Lis	ts	
0 1. 6		<u> </u>		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H	ugnt	Office h	ela

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						OTHER (enter a category not listed above)			
┝	Total pages Schedule F1:	I THER NAM					3	Filer ID	(Ethics Commission	Eilore)		
	Sch: 10/20 Rpt: 40/50		nn W. (The Honorable)					00086370	(Ethics Commission	i Fileis)		
┝	Date	_					<u> </u>					
ľ	10/16/2023	5 Payee name										
L		Jack Boles										
6	Amount (\$)	7 Payee addre	ess; City; St	ate; Zip Co	de							
l	\$10.00	8150 Broo	kriver									
l												
		Dallas, TX	75247									
8		(a) Category (s	See Categories listed at the top of this	s schedule)	(b)	Description						
	OF EXPENDITURE	Event Exp		ŕ		Check if travel	outs	ide of Texas. Com	plete Schedule T.			
	LAFLINDITORL					ш	, TX	, officeholder living	expense			
						Parking						
9			ficeholder name	Office sou	ght			Office he	eld			
L	expenditure to benefit C/O	H 										
	Date	Payee name	9									
	10/13/2023	Junius Hei	ghts Historic District									
Н	Amount (\$)	Payee addre	ess; City; St	ate; Zip Co	de							
	\$350.00	715 Parkm										
	,											
		Delles TV	75014									
L		Dallas, TX	75214									
	PURPOSE	(a) Category (s	See Categories listed at the top of this	s schedule)	(b)	Description						
	OF EXPENDITURE	Tickets						ide of Texas. Com				
						Historic Hous		, officeholder living	expense			
						HISTORIC HOUS	e I	loui				
┡		L			<u> </u>							
l	Complete ONLY if direct expenditure to benefit C/Ol		ficeholder name	Office sou	ght			Office he	eld			
L	experience to belieff of e											
	Date	Payee name	9									
	10/24/2023	Junius Hei	ghts Historic District									
H	Amount (\$)	Payee addre	ess; City; St	ate; Zip Co	ode							
	\$300.00	715 Parkm	ont									
		Dollag TV	75014									
L		Dallas, TX	75214									
l	PURPOSE OF	I	See Categories listed at the top of this	s schedule)	(b)	Description						
l	EXPENDITURE	Event Exp	ense			ш		ide of Texas. Com	•			
						Ticket to Hon		, officeholder living	expense			
ĺ						HONEL IO HOII	ıc	ı oui				
\vdash	0 1. 0		r: 1 11	0.00	Ļ							
l	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ficeholder name	Office sou	ght			Office he	eld			
L	CAPERIGITALE TO DETICITE C/OI											

SCHEDULE F1

Advertising Expense Event
Accounting/Banking Fees
Consulting Expense Food/
Contribution/ Onations Made By - Gift/An

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/20 Rpt: 41/50	Bryant, John W. (The Honorable) 00086370
4	Date	5 Payee name
	08/24/2023	La Calle Doce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$40.21	1925 Skillman
		Dallas, TX 75206
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Business meal
		Dusiness meai
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Date	Davies same
		Payee name
	10/10/2023	Mattitos
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	3102 Oak Lawn
		Dallas, TX 75219
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Fundraiser
		T unutuisei
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
-	Date	Payee name
	08/07/2023	Payee name Meso Mayo
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$154.82	4123 Abrams
		Dallas, TX 75214
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Business meal
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services	vices Salaries/Wages/Contract Labor OTHER (enter a cate					strict i category not listed ab	oove)		
ordan outar aymon				The Instruction Gu	uide explains how	to com	ple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 12/20 Rpt: 42/50		Bryant, Johr	n W. (The Hono	rable)					00086370		
4	Date	5	Payee name									
	08/15/2023		Minnis, Norr	ma								
6	Amount (\$)	7	Payee addres	ss; City;	State; Zi	ip Cod	le					
	\$271.00		6219 Prospe	ect Avenue								
			Dallas, TX 7	'5214								
8	PURPOSE	(a)	Category (Se	e Categories listed at t	ne top of this schedule	e) ((b)	Description				
	OF EXPENDITURE			nead/Rental Exp				므			plete Schedule T.	
	LXI LINDITORL							_		officeholder living	g expense	
								Office Supplie	es			
_	0 1 0 0 1 1 1 1	L	0 11 1 10 11		0,00					O.C. 1		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Offic	e soug	ht			Office h	eld	
		_										
	Date		Payee name									
	10/17/2023		Minnis, Norr	na 								
	Amount (\$)		Payee addres		State; Zi	ip Cod	le					
	\$1,000.00		6219 Prospe	ect Avenue								
			Dallas, TX 7	'5214								
	PURPOSE	(a)	Category (Se	e Categories listed at t	ne top of this schedule	e) ((b)	Description				
	OF EXPENDITURE		Salaries/Wa	ges/Contract La	abor			=			plete Schedule T.	
								Contract labo		officeholder living	g expense	
								Contract labo	"			
_	Complete ONLY if direct	<u> </u>	Candidate/Offic	ceholder name	Offic	e soug	ht			Office h	eld	
	expenditure to benefit C/Ol		Janaidate/Onit	scholder flame	Onic	c soug	110			Office II	Ciu	
-	Data	Η										
	Date 12/13/2023		Payee name Minnis, Norr	ma								
		-			04-4 7	:- OI	1-					
	Amount (\$)		Payee addres		State; Zi	ip Coa	le					
	\$1,000.00		6219 Prospe	ect Ave								
			5 II									
			Dallas, TX 7	5214								
	PURPOSE OF	(a)		e Categories listed at the		e) ((b)	Description		do of Toyon Com	nplete Schedule T.	
	EXPENDITURE		Salaries/Wa	ges/Contract La	abor			브		officeholder living		
								Contract Lab			y	
	Complete ONLY if direct		Candidate/Offic	ceholder name	Offic	e soug	ht			Office h	eld	
	expenditure to benefit C/O											
l												

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/20 Rpt: 43/50	Bryant, John W. (The Honorable) 00086370
4	Date	5 Payee name
	10/23/2023	Minnis, Norma
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	9219 Prospect Ave
		Dallas, TX 75214
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Supplies Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Office Supplies
		Cinico Gappinos
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	08/28/2023	Office Deport
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.70	5111 Greenville
		Dallas, TX 75206
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Office Supplies
		C.mos Cappinos
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/21/2023	Ohio River South
	Amount (\$)	Payee address; City; State; Zip Code
	\$431.02	235 Mitchell St SW
		Atlanta, GA 30303
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Texting for event
		Toxing for event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card F dyment	The Instruction Guide explains how to co	implete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 14/20 Rpt: 44/50	Bryant, John W. (The Honorable)	00086370
4 Date	5 Payee name	
08/14/2023	Ozona	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$162.38	4615 Greenville	
	Dallas, TX 75206	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fundraiser
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/O	н	
Date	Payee name	
09/22/2023	Ozona	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$1,199.03	4615 Greenville	
	Dallas, TX 75206	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fundraiser
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/O	Н	
Date	Payee name	
11/21/2023	Phoebe's Diner	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$43.77	533 W Oltorf	
	Austin, TX 78704	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Business meal
		Business meai
Complete ONLY if direct	Candidate/Officeholder name Office sou	Lught Office held
expenditure to benefit C/O		9

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/20 Rpt: 45/50	Bryant, John W. (The Honorable) 00086370
4	Date	5 Payee name
	07/21/2023	Readyfresh
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6.66	16420 N Interstate 35
		Austin, TX 78728
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Office Water
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	08/21/2023	Readyfresh
	Amount (\$)	Payee address; City; State; Zip Code
	\$36.61	16420 N Interstate 35
		Austin, TX 78728
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Office Water
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/21/2023	Readyfresh
	Amount (\$)	Payee address; City; State; Zip Code
	\$36.61	16420 N Interstate 35
	,,,,,	
		Austin, TX 78728
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Office Water
	0 1. 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/20 Rpt: 46/50	Bryant, John W. (The Honorable) 00086370
4	Date	5 Payee name
	10/20/2023	Readyfresh
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3.56	16420 N Interstate 35
		Austin, TX 78728
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office Water
		Since water
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	11/22/2023	Readyfresh
H	Amount (\$)	Payee address; City; State; Zip Code
	\$18.84	16420 N Interstate 35
	Ψ10.04	10-20 N Interstate 00
		Austin, TX 78728
┝	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Office Water
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/21/2023	Readyfresh
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.56	16420 N Interstate 35
		Austin, TX 78728
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office Water
		Office water
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/20 Rpt: 47/50	Bryant, John W. (The Honorable) 00086370
4	Date	5 Payee name
	09/25/2023	Santa Rita Cafe
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$199.66	1206 W 38th St
		Austin, TX 78705
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Business meal
		Dusiness meai
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
_	<u> </u>	
	Date	Payee name
	09/13/2023	Sazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$63.82	1816 S Lamar
		Austin, TX 78704
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Business Meal
		Business mea.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨	Date	Power name
	07/12/2023	Payee name Smith, Peggy
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,500.00	14 Greenway Plaza
		Unit 18M
		Houston, TX 77046
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Lodging Check if travel outside of Texas. Complete Schedule T.
		X Check if Austin, TX, officeholder living expense
		Austin Lodging
_	Complete ONLY if direct	Condidate/Officeholder name Office cought
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Dotations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services	Salaries/Wages/Contract Labor OTHER (enter a categor						above)		
·			The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Comm	ission Filers)
	Sch: 18/20 Rpt: 48/50		Bryant, Johr	n W. (The Honor	rable)					00086370		
4	Date	5	Payee name									
	07/27/2023		Smith, Pegg	ıy								
6	Amount (\$)	7	Payee addres	ss; City;	State; Zi	ip Cod	le					
	\$3,500.00		14 Greenwa	ıy Plaza								
			Unit 18M									
			Houston, TX	(77046								
8	PURPOSE	(a)	Category (Se	e Categories listed at th	ne ton of this schedule	e) ((b)	Description				
	OF		Lodging	o catogorios notos at a	io top or time contour.			_ :	outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE							X Check if Austin,	, TX,	officeholder livi	ng expense	
								Lodging				
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	ceholder name	Offic	e soug	ht			Office	held	
		_										
	Date		Payee name									
	09/12/2023		Smith, Pegg	IJ								
	Amount (\$)		Payee addres	ss; City;	State; Zi	ip Cod	le					
	\$3,500.00		14 Greenwa	ıy Plaza								
			Unit 18M									
			Houston, TX	< 77046								
	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this schedule	e) ((b)	Description				
	OF EXPENDITURE		Lodging					=			mplete Schedule T.	
								X Check if Austin,	, TX,	officeholder livi	ng expense	
								Lodging				
_	Complete ONLY if direct	<u> </u>	Candidate/Offic	coholdor namo	Offic	e soug	ıht			Office	hold	
	expenditure to benefit C/O		Januluale/Onic	centituer flame	Onic	e soug	ji it			Office	iciu	
_	D-4-	_										
	Date 09/29/2023		Payee name	n.,								
			Smith, Pegg									
	Amount (\$)		Payee addres		State; Zi	ip Coo	ie					
	\$3,500.00		14 Greenwa	ly Plaza								
			Unit 18M									
			Houston, TX	(77046								
	PURPOSE OF	(a)		e Categories listed at th	ne top of this schedule	e) ((b)	Description				
	EXPENDITURE		Lodging					Check if travel of X Check if Austin,			mplete Schedule T.	
								Lodging	, 1,	onicendider livi	ng expense	
								છ છ				
	Complete ONLY if direct		 Candidate/Offic	ceholder name	Offic	e soug	ht			Office	held	
	expenditure to benefit C/OI				20	9	. 1					
l												

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1: Sch: 19/20 Rpt: 49/50	2 FILER NAME Bryant, John W. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00086370	_					
4	Date		_					
4	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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lodging						
9	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							
	Date	Payee name						
	12/18/2023	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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Business meal						
	Complete ONLY if direct expenditure to benefit C/OI	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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Business meal						
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.			Travel in District Travel Out of District OTHER (enter a category not listed above)				
Total nages Schedule F1:	2 FILER NAM				3 Filer ID	(Ethics Commission Filers)		
Sch: 20/20 Rpt: 50/50					00086370	(,		
Date	5 Payee nam	ie			•			
12/28/2023								
6 Amount (\$) 7 Payee address; City; State; Zip Code								
\$61.41	334 W Je	fferson						
	Dallas, T	(75208						
	(a) Category	(See Categories listed at the top of this	schedule) (b)					
	Food/Beverage Expense							
				_		ng expense		
				Business mea	aı			
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