

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00035933	2 Total pages filed: 12		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Walter B.	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2024	
	NICKNAME Ben	LAST Bius	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 3011 Hwy 30 Suite 306 Huntsville, TX 77340			Date Hand-delivered or Date Postmarked	
				Receipt #	Amount
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Andrew J.	MI		
	NICKNAME	LAST Bolton	SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 21 Waterway Avenue Ste. 300 The Woodlands, TX 77380				
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(281)	723-2791			
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)				
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month Day Year
	07/01/2023				12/31/2023
10 ELECTION	ELECTION DATE Month Day Year 03/05/2024			ELECTION TYPE	
				<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff
			<input type="checkbox"/> General	<input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) None Walker			12 OFFICE SOUGHT (if known) State Representative District 12	

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Bius, Walter B. (Mr.)	14 Filer ID (Ethics Commission Filers) 00035933
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	1.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	16,001.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	28,877.97
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	998,076.37
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1,370,000.00

17 AFFIDAVIT

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

 Mr. Walter B. Bius
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - C/OH

18 FILER NAME Bius, Walter B. (Mr.)	19 Filer ID (Ethics Commission Filers) 00035933
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20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 10,001.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 6,000.00
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 600.00
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 1,010,000.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 28,877.97
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/4 Rpt: 4/12
2 FILER NAME Bius, Walter B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00035933
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Afflitto, Ernie <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CEO/Manager		9 Employer (See Instructions) Mold Rx of Texas
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balke, Greg (Mr.) <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77340	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales Rep		Employer (See Instructions) Certified Labs
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Sherri (Mrs.) <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77340	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) self
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Tina (Mrs.) <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77340	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) self
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benton, Marc <hr/> Contributor address; City; State; Zip Code Anderson, TX 77830	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Senior Solutions Consultant		Employer (See Instructions) Totara

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 5/12
2 FILER NAME Bius, Walter B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00035933
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bius, Susana (Mrs.)	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Huntsville, TX 77340		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Britt, Kyle (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Huntsville, TX 77340		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Texas Pardons and Paroles
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, David (Mr.)	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Huntsville, TX 77340		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Doug (Mr.)	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Huntsville, TX 77340		
Principal occupation / Job title (See Instructions) VP Sales		Employer (See Instructions) Aether DBS
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hazelwood, CF (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Huntsville, TX 77340		
Principal occupation / Job title (See Instructions) TDC Admin		Employer (See Instructions) Texas Department of Corrections

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/12
2 FILER NAME Bius, Walter B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00035933
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keathley, Mike (Mr.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Huntsville, TX 77340	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Legacy Builders
Date 12/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCULLOCH, ANN	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code BRENHAM, TX 77833	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morey, Matthew (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Huntsville, TX 77340	
Principal occupation / Job title (See Instructions) Salesman		Employer (See Instructions) Self
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nedbalek, Brent (Mr.)	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Brenham, TX 77833	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Triton Air
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OHENDALSKI, RICHARD (Mr.)	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code HUNTSVILLE, TX 77230	
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 7/12
2 FILER NAME Bius, Walter B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00035933
4 Date 12/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Bill (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Huntsville, TX 77320	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Parker Data & Voice
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinon, Juan (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Huntsville, TX 77340	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Donna Pinon Inc.
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson Jr., Corbin (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77002	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Quintana Minerals
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLENBERG, CLINTON	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) LONESTAR CONSTRUCTION PARTNERS LLC

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 8/12	
2 FILER NAME Bius, Walter B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00035933	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/31/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolton, Andrew (Mr.)	8 Amount of contribution (\$) \$1,000.00	9 In-kind contribution description Work as campaign treasurer and legal counsel.
	7 Contributor address; City; State; Zip Code New Waverly, TX 77358	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Owner		11 Employer (FOR NON-JUDICIAL) (See instructions) Self	
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 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, William (Mr.)	Amount of contribution (\$) \$5,000.00	In-kind contribution description IT services for campaign
	Contributor address; City; State; Zip Code Huntsville, TX 77320	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) President		Employer (FOR NON-JUDICIAL) (See instructions) IT Services	
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)			

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 9/12

2 FILER NAME
Bius, Walter B. (Mr.)

3 Filer ID (Ethics Commission Filers)
00035933

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date
12/28/2023

6 Full name of pledgor out-of-state PAC (ID#: _____)
Bolton, Andrew

7 Pledgor Address; City; State; Zip Code

New Waverly, TX 77358

8 Amount of
pledge (\$)
\$600.00

9 In-kind description
(If applicable)

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)
Attorney

11 Employer (See Instructions)
Self

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 10/12
2 FILER NAME Bius, Walter B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00035933
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 12/19/2023	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Bius, Walter B. (Mr.)	9 Loan Amount (\$) \$1,010,000.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code HUNTSVILLE, TX 77342	10 Interest Rate 0
		11 Maturity Date 12/19/2024
12 Principal occupation / Job title (See Instructions) Self		13 Employer (See Instructions) Self
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/2 Rpt: 11/12	2 FILER NAME Bius, Walter B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00035933
4 Date 12/14/2023	5 Payee name A+ Locksmith	
6 Amount (\$) \$93.10	7 Payee address; City; State; Zip Code PO Box 194 Huntsville, TX 77342	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Locksmith Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Invoice #4776 (duplicated keys)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/05/2023	Payee name AT & T	
Amount (\$) \$278.28	Payee address; City; State; Zip Code PO Box 5014 Carol Stream, IL 60197	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Telephone Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/17/2023	Payee name Direct Texas Marking Group	
Amount (\$) \$12,458.12	Payee address; City; State; Zip Code 1260 S Business IH 35 New Braunsfels, TX 78130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphics Design and printing services. Invoice #2023-6121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/2 Rpt: 12/12	2 FILER NAME Bius, Walter B. (Mr.)	3 Filer ID (Ethics Commission Filers) 00035933
4 Date 12/18/2023	5 Payee name Direct Texas Marking Group	
6 Amount (\$) \$10,000.00	7 Payee address; City; State; Zip Code 1260 S Business IH 35 New Braunsfels, TX 78130	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Services Invoice 2023-6122
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/11/2023	Payee name TEXAS GOP STORE	
Amount (\$) \$3,564.13	Payee address; City; State; Zip Code 404 1 45 HUNTSVILLE, TX 77340	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase of Signage Invoice #6365
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/12/2023	Payee name TEXAS GOP STORE	
Amount (\$) \$2,484.34	Payee address; City; State; Zip Code 404 1 45 HUNTSVILLE, TX 77340	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signage Invoice #6376
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held