CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple	ete this form.	1 Filer ID (Ethics Commiss 00087975	sion Filers)	2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	ISE ONLY
OFFICEHOLDER NAME	Mr.	Vincent J.			Date Received	
					ELECTRONICA	LLY FILED
	NICKNAME	LAST		SUFFIX	01/15/2024	
	NICKNAME	Gallo Jr.		SUFFIX	01/10/2021	
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
MAILING	3201 Walnut Grove Pl.					1
ADDRESS					Receipt #	Amount
Change of Address	Flower Mound, TX 75022				Data Processed	
🖰					Date Processed	
					Date Imaged	
					Date imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER		Vincent J.				
NAME		Vincent 5.				
	NIO(A) A A A E			OUEEW		
	NICKNAME	LAST Gallo Jr.		SUFFIX		
		Gallo Ji.				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO	BOX PLEASE);	APT	/ SUITE #; CITY;	STA	TE; ZIP CODE
ADDRESS	3201 Walnut Grove Pl.					
(Residence or Business)						
	Flower Mound, TX 75022					
7 CAMPAICNI	ADEA CODE DUON	E NUMBER - F	VTENCION			
7 CAMPAIGN TREASURER		E NUMBER E	EXTENSION			
PHONE	(214) 773-0428					
8 REPORT						
TYPE	X January 15	30th day before	election	Runoff	15th day after can	nnaign treasurer
		_ countary before	Ciccaciii		appointment (offic	
	July 15	8th day before 6		Exceeded modified	Final Report (Atta	ch C/OH-FR)
			ı	eporting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2023	TH	IROUGH	12/31/202	3	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	rimary	Runoff	Other	
	03/05/2024	l ПG	eneral	Special		
				ш.		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
III OFFICE	OFFICE HELD (II ally)			State Representa		
				State Represent	ative District 05	
		GO T	O PAGE 2			
I						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 24

13 C / OH NAME	(Ethics Commission Filers)							
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expend These expenditures may have been made witho officeholders are required to report this informa	ut the candidate's or office	eholder's knowledge or				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME						
ш°	GENERAL							
		COMMITTEE ADDRESS						
	SPECIFIC							
		COMMITTEE CAMPAIGN TREASURER NAME	<u> </u>					
		COMMITTEE CAMPAIGN TREASURER ADDR	ESS					
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THES OF LOANS, OR CONTRIBUTIONS MADE E		\$ 0.00				
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOA	NS)	\$ 11,575.00				
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00				
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 22,019.42				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 11,575.00				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A	AS OF THE LAST DAY	\$ 50,000.00				
17 AFFIDAVIT		I swear, or affirm, under pen true and correct and includes under Title 15, Election Code	all information required t					
		Mr	Vincent J. Gallo Jr.					
		Signature	of Candidate or Officeho	lder				
AFFIX NO	TARY STAMP / SEAL ABO	DVE						
Sworn to and subs	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	cer administering	Printed name of officer administering	Title of office	r administering oath				

SUBTOTALS - C/OH

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

				3 of 24
18 FILER NAM Gallo Jr., \	IE Vincent J. (Mr.)	19 Filer ID 00087975	(Ethics Com	nission Filers)
20 SCHEDULE NAME OF S			SUBTO	TAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	11,375.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	200.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4. X	SCHEDULE E: LOANS		\$	50,000.00
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	21,998.64
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	20.78
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$	
12. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	200.00

	MONET	ARY POLITICAL (SCHEDULE A1				
	The Instruc	ction Guide explains hov	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 1/5 Rpt: 4/24	
2	FILER NAME Gallo Jr., Vin	cent J. (Mr.)				3	Filer ID (Ethics Commission 00087975	n Filers)
4	Date 11/18/2023	5 Full name of contributor out-of-state PAC (ID#:) Achilli, Lincoln (Mr.) 6 Contributor address; City; State; Zip Code				7	Amount of Contribution (\$)	\$400.00
8	Principal occu	Carrollton, TX 75007 pation / Job title (See Instructions) 9 Employer (See Instructions)				<u> </u> S)		
	Date 11/22/2023	Full name of contributor out-of-state PAC (ID#:) Barnett, Marcia (Mrs.) Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$350.00
	Carrollton tx, TX 75007 Principal occupation / Job title (See Instructions) retired Employer (See Instructions)					<u> </u> S)		
	Date 11/10/2023	Full name of contributor out-of-state PAC (ID#:) Colton, Renee (Mrs.) Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$250.00	
		Flower, TX 75022 pation / Job title (See Instructions	5)		Employer (See Instructions	<u> </u> s)		
	counselor Date Full name of contributor out-of-state PAC (ID#:				Texas HHS		Amount of Contribution (\$)	\$250.00
	Principal occu	Flower, TX 75022 pation / Job title (See Instructions	5)		Employer (See Instructions	<u>l</u> S)		
	Date 10/06/2023	Full name of contributor out-of-state PAC (ID#:) Faber, Debra Contributor address; City; State; Zip Code Flower Mound, TX 75208			•	Amount of Contribution (\$)	\$250.00	
	Principal occu	pation / Job title (See Instructions			Employer (See Instructions	<u>1</u> S)		

	MONET	ARY POLITICAL CONTRIBI		SCHEDULE A1			
	The Instruc	ction Guide explains how to complete	this for	n.	1	Total pages Schedule A1: Sch: 2/5 Rpt: 5/24	
2	FILER NAME Gallo Jr., Vin	cent J. (Mr.)			3	Filer ID (Ethics Commission 00087975	on Filers)
4	Date 08/22/2023	5 Full name of contributor out-of-state PAC (ID#:) Gallo, vincent 6 Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00
_	Dringing Lagor	FLOWER MOUND, TX 75022	lo.	Franks on (Cook batturetiens			
8		rincipal occupation / Job title (See Instructions) 9 Employer (See Instruction self employed) self employed					
	Date 09/30/2023	O/2023 Hamilton, Monica Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00
	Principal occu	Boyd Tx, TX 76023 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)			
	N.A.			N. A.			
	Date 11/18/2023	Full name of contributor out-of-state PAC (ID#:) Jeanie, Beal (Mrs.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
		Frisco, TX 75036					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/22/2023 Lamb, Mellany (Mrs.) Contributor address; City; State; Zip Code Flower Mound, TX 75022					Amount of Contribution (\$)	\$1,000.00
	Principal occu N.A,	pation / Job title (See Instructions)		Employer (See Instructions N.A.	5)		
	Date 11/18/2023	Full name of contributor out-of-state PAC (ID#:) Lipscomb, Larry (Mr.) Contributor address; City; State; Zip Code Flower Mound, TX 75028				Amount of Contribution (\$)	\$250.00
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions DFWAP	s)		
			•				

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 3/5 Rpt: 6/24	
2	FILER NAME Gallo Jr., Vin	cent J. (Mr.)			3	Filer ID (Ethics Commission 00087975	n Filers)
4	Date 10/01/2023					Amount of Contribution (\$)	\$250.00
8	Principal occu	Flower Mound, TX 75028 pation / Job title (See Instructions)	9	Employer (See Instructions	 - s)		
	Owner	Owner DFWAP					
	Date Full name of contributor out-of-state PAC (ID#:) 12/21/2023 Mason, Ajua Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$25.00
	Dallas, TX 75237						
	Principal occupation / Job title (See Instructions) N.A.			Employer (See Instructions N.A.	s)		
	Date 12/04/2023					Amount of Contribution (\$)	\$500.00
		Trophy Club Dr., TX 76262					
	Principal occu N.A.	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions N.A.	5)		
	Date 11/18/2023	Date Full name of contributor out-of-state PAC (ID#:)				Amount of Contribution (\$)	\$500.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions N.A.	. (5)		

	MONET	ARY POLITICAL CON		SCHEDULE A1			
	The Instruc	ction Guide explains how to co	omplete this form	n.	1	Total pages Schedule A1: Sch: 4/5 Rpt: 7/24	
2	FILER NAME Gallo Jr., Vin	cent J. (Mr.)			3	Filer ID (Ethics Commission 00087975	on Filers)
4	Date 12/11/2023	Full name of contributor out-of-state PAC (ID#:) Pendry, Darlene (Ms.) Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$2,500.00
8	Principal occur	FLOWER MOUND, TX 75022 pation / Job title (See Instructions)	ام	Employer (See Instructions			
•	Retired	Jalion 7 Job tille (See Instructions)		N.A.	,		
	Date 11/14/2023	Full name of contributor out-of-state PAC (ID#:) Regan, Mary (Ms.) Contributor address; City; State; Zip Code Flower Mound, TX 75022				Amount of Contribution (\$)	\$250.00
	Principal occu	Employer (See Instructions)				
	account executive			unk			
	Date 12/01/2023	Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$100.00
		Dallas, TX 75254					
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:					Amount of Contribution (\$)	\$200.00
	Principal occu Small Busine	pation / Job title (See Instructions) ess Owner		Employer (See Instructions Self)		
	Date 11/18/2023					Amount of Contribution (\$)	\$100.00
	Principal occu Retired	oation / Job title (See Instructions)		Employer (See Instructions)		
			,				

	MONET	TARY POLITICAL CONTRIBUTION	SCHEDULE A1	
	The Instru	action Guide explains how to complete this	1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/24	
2	FILER NAME Gallo Jr., Vii	ncent J. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087975	
4	Date 09/28/2023	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$) \$2,500.00
		FLOWER MOUND, TX 75022		
8	Principal occu business ow	upation / Job title (See Instructions) vner	9 Employer (See Instruction self	ns)

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 9/24 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Gallo Jr., Vincent J. (Mr.) 00087975 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 6 Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 12/10/2023 Avelano, Debrah (Mrs.) \$200.00 Tickets to Texas 7 Contributor address; City; State; Zip Code Scorecard awards dinner. Corinth, TX 76208 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) retired 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

	LOANS				SCHEDULE E			
	The Instruction	on Guide explains how to complete this	s form.	1 Total pages Schedule E: Sch: 1/1 Rpt: 10/24				
2	FILER NAME Gallo Jr., Vincer	nt J. (Mr.)			(Ethics Commission Filers)			
4	TOTAL OF UN	IITEMIZED LOANS		·	\$			
5	Date of loan 10/16/2023	7 Name of lender out-of-state Gallo, vincent	PAC (ID#:		9 Loan Amount (\$) \$50,000.00			
6	Is lender a financial institution?	8 Lender address; City; State; FLOWER MOUND, TX 75022	Zip Code		10 Interest Rate 0.0 11 Maturity Date 06/30/2024			
12	Principal occupation	on / Job title (See Instructions)	13 Employer (See Instruction	s)	00/00/2024			
	Business owner		Self	- ,				
14	Description of Coll X None	ateral	15 Check if personal funds w	ere deposite	d into political account (See Instructions)			
16	GUARANTOR	17 Name of guarantor	<u> </u>		19 Amount Guaranteed (\$)			
	INFORMATION X not applicable	18 Guarantor address; City; State;	Zip Code					
20	Principal occupation	on	21 Employer (See Instruction	s)				

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor 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 complete this form.
1	Total pages Schedule F1: Sch: 1/12 Rpt: 11/24	2 FILER NAME Gallo Jr., Vincent J. (Mr.) 3 Filer ID (Ethics Commission Filers) 00087975
4	Date 10/23/2023	5 Payee name Academy Sports
6	Amount (\$) \$129.89	7 Payee address; City; State; Zip Code 3621 Justin Rd.
		Flower Mound, TX 75028
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Canopy
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/13/2023	Barons Catering
	Amount (\$) \$2,618.72	Payee address; City; State; Zip Code 1600 Heritage Dr.
		Mckinney, TX 75069
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 11/22/2023	Payee name Corbett, Stan
	Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 5104 Prarie Creeck Dr
		FLOWER MOUND, TX 75028
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Art work
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

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

Candidat Credit Card	te/Officeholder/Politica Payment	al Committee	Legal Services The Instruction Guid		-	cte this form.		OTHER (enter a	category not listed above)
1 Total page	es Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
Sch: 2/1	2 Rpt: 12/24	Gallo Jr., \	/incent J. (Mr.)					00087975	
4 Date		5 Payee nam	е						
10/06/202	23	Corbett, S	tan						
6 Amount (\$	3)	7 Payee addr	ess; City;	State; Zip	Code				
	\$2,500.00	5104 Prari	e Creeck Dr						
		FLOWER	MOUND, TX 7502	8	-				
8 PURP			See Categories listed at the	top of this schedule)	(b)	Description			
EXPEND		Consulting	Expense			_		de of Texas. Com officeholder living	
						video produc			, oxponed
						'			
	ONLY if direct re to benefit C/O		ficeholder name	Office s	 ought			Office he	eld
		ı							
Date	00	Payee nam							
11/20/202	23	Custom In	K						
Amount (\$	•	Payee addr		State; Zip	Code				
	\$371.51	1600 Lake	side Pkwy						
		Flower Mo	und, TX 75028						
PURP(OF			See Categories listed at the	top of this schedule)	(b)	Description			
EXPEND		Advertising	g Expense			=		de of Texas. Com officeholder living	
						T shirts	1, 170,	omeenoider iiviing	CAPCING
Complete	ONLY if direct	Candidate/O	ficeholder name	Office s	l			Office he	hld
	re to benefit C/O		noonolao. name	000 0	oug			000	
Date		Dayoo nom							
	າວ	Payee nam Denton Co							
10/16/202									
Amount (\$		Payee addr		State; Zip	Code				
	\$760.00	6101 Long	Prarie Rd						
		Flower Mo	und, TX 75028						
PURP		(a) Category	See Categories listed at the	top of this schedule)	(b)	Description			
OF EXPEND		Event Exp	ense					de of Texas. Com	
2/11/2						ш		officeholder living	expense
						Table purcha	ise		
0 1 :	ONII V if ii	0	x: - - - -	200				0‴ :	.1.1
	ONLY if direct re to benefit C/O		ficeholder name	Office s	ought			Office he	910

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: 3/12 Rpt: 13/24	Gallo Jr., Vincent J. (Mr.) 00087975	
4	Date	5 Payee name	
	12/05/2023	Denton Co Rep Party	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$755.00	2921 Country Club Dr. #102	
		Denton Tx, TX 76210	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Filing Fee	
		T ming r cc	
_	Complete ONLY if direct	Condidate/Officeholder name Office county Office hold	_
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	•		_
	Date	Payee name	
	11/06/2023	Eventbrite	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$24.99	95 Third St 2d floor	
		San Francisco, CA 94103	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense event	
		CVCIII	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·	
			_
	Date	Payee name	
	12/12/2023	FedEx	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$20.58	2701 Cross Timbers Rd. #208	
		FLOWER MOUND, TX 75028	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Copies	
	Operation ONE VALUE	Overstidets (Office healther manner	_
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
			_
_			_

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 4/12 Rpt: 14/24	Gallo Jr., Vincent J. (Mr.) 00087975
4	Date	5 Payee name
	12/12/2023	FedEx
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.58	2701 Cross Timbers Rd. #208
		FLOWER MOUND, TX 75028
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense Copies
		Copies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_	Data	
	Date	Payee name
	12/18/2023	FedEx
	Amount (\$)	Payee address; City; State; Zip Code
	\$98.93	2701 Cross Timbers Rd. #208
		FLOWER MOUND, TX 75028
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense copies
		Copies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Data	
	Date 12/19/2023	Payee name FedEx
	Amount (\$)	Payee address; City; State; Zip Code
	\$98.93	2701 Cross Timbers Rd. #208
		FLOWER MOUND, TX 75028
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Copies
		Сорісь
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
l		

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: 5/12 Rpt: 15/24	Gallo Jr., Vincent J. (Mr.) 00087975
4	Date	5 Payee name
	11/13/2023	FedEx
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$208.36	2701 Cross Timbers Rd. #208
		FLOWER MOUND, TX 75028
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Copies
		σορισσ
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_		
	Date	Payee name
	10/02/2023	FedEx
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.24	2701 Cross Timbers Rd. #208
		FLOWER MOUND, TX 75028
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense cards
		Carus
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_		
	Date	Payee name
	10/19/2023	FedEx
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.89	2701 Cross Timbers Rd. #208
		FLOWER MOUND, TX 75028
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Cards
	0 1: 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment										
		The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer	s)								
	Sch: 6/12 Rpt: 16/24	Gallo Jr., Vincent J. (Mr.) 00087975									
4	Date	5 Payee name									
	10/24/2023	FedEx									
6	Amount (\$)	7 Payee address; City; State; Zip Code									
	\$129.67	2701 Cross Timbers Rd. #208									
		FLOWER MOUND, TX 75028									
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description									
	OF EXPENDITURE	Advertising Expense									
	LXI LINDITORL	Check if Austin, TX, officeholder living expense									
		placards									
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held									
	experialitate to beliefit eroi										
	Date	Payee name									
	12/13/2023	First Graphic Services									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$2,332.79	229 Garvon St									
		Garland, TX 75040									
	PURPOSE										
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.									
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense									
		Signs									
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held									
	expenditure to benefit C/OI	H									
	Date	Payee name									
	10/25/2023	Flower Mound Cac									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$440.00	1200 Gerault Rd									
	Ψ+10.00	1200 Schaal Na									
		Florida Alexandra Alexandr									
		Flower Mound, TX 75022									
	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									
		Room rental									
		Noomienta									
	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 -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Finding Expense
Salarise/Mange/Contract Labor

	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: 7/12 Rpt: 17/24	Gallo Jr., Vincent J. (Mr.) 00087975
4	Date	5 Payee name
	10/27/2023	Flower Mound Cac
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$120.00	1200 Gerault Rd
		Flower Mound, TX 75022
8	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 Room Rental
		Room Rental
_	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/05/2023	Neel and Partners
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	8601 Ice House Dr #7108
		North Richland Hills, TX 76180
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Retainer
		Retaile
	Opening the ONII Wife discort	On did to 10 ff as hald a grant Off as a south
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/05/2023	Neel and Partners
	Amount (\$)	Payee address; City; State; Zip Code
	\$700.00	8601 Ice House Dr #7108
		North Richland Hills, TX 76180
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Data
_		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Superiorder to beliefft 6/01	•
1		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (E Sch: 8/12 Rpt: 18/24 Gallo Jr., Vincent J. (Mr.) 00087975	(Ethics Commission Filers)
Sch: 8/12 Rpt: 18/24 Gallo Jr., Vincent J. (Mr.) 00087975	
4 Date 5 Payee name	
12/05/2023 Neel and Partners	
6 Amount (\$) 7 Payee address; City; State; Zip Code	
\$285.64 8601 Ice House Dr #7108	
North Richland Hills, TX 76180	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxas Complete	
Advertising Expense Check if travel outside of Texas. Complet	
Push Cards	лрепас
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	1
Date Payee name	
12/20/2023 Neel and Partners	
Amount (\$) Payee address; City; State; Zip Code	
\$800.00 8601 Ice House Dr #7108	
4000.00 0001 100 110000 D1 1/1 1000	
North Richland Hills, TX 76180	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Advertising Expense Check if travel outside of Texas. Complet	
Check if Austin, TX, officeholder living ex	xpense
r usii Caius	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	1
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	1
Date Payee name	
11/02/2023 Neel and Partners	
Amount (\$) Payee address; City; State; Zip Code	
\$2,500.00 8601 Ice House Dr #7108	
North Richland Hills, TX 76180	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxas Complete	
EXPENDITURE Consulting Expense Consulting Expense Check if travel outside of Texas. Complet Check if Austin, TX, officeholder living ex	
Retainer	xpense
retuiler	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	1
expenditure to benefit C/OH	

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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (orders a cottogon pot listed above)

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/12 Rpt: 19/24	Gallo Jr., Vincent J. (Mr.) 00087975
4	Date	5 Payee name
	10/30/2023	Neel and Partners
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$476.28	8601 Ice House Dr #7108
		North Richland Hills, TX 76180
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Data
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/16/2023	Neel and Partners
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,290.00	8601 Ice House Dr #7108
		North Richland Hills, TX 76180
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense Pro rata fee
		The fatta fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/31/2023	Neel and Partners
	Amount (\$)	Payee address; City; State; Zip Code
	\$700.00	8601 Ice House Dr #7108
		North Richland Hills, TX 76180
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	ZAI ZABITORZ	Check if Austin, TX, officeholder living expense
		Data
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
l		

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: 10/12 Rpt: 20/24	Gallo Jr., Vincent J. (Mr.) 00087975
4	Date	5 Payee name
	11/20/2023	Nothing Bundt Cake
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$203.00	3634 Long Prarie Rd #114
		Flower Mound, TX 75022
8	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 Desert for catering
		Descritor edicting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	11/13/2023	Office Max
H	Amount (\$)	Payee address; City; State; Zip Code
	\$14.49	6060 Long Prarie Rd
	Ψ14.43	5000 Long Francisco
		FLOWER MOUND, TX 75028
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Cards
		Calas
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	11/14/2023	Party City
	Amount (\$)	Payee address; City; State; Zip Code
	\$51.96	6101 Long Prarie Rd
		Flower Mound, TX 75028
	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 Balloons
		Dallouris
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
l		

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid	xpense Pri Sa	-	se es/Contract Labor	Tra	avel in District avel Out of Dis THER (enter a		
1	Total pages Schedule F1:							er ID	(Ethics Commission Filers)	
L	Sch: 11/12 Rpt: 21/24	Gallo Jr., \	/incent J. (Mr.)				00	0087975		
4	Date	5 Payee name								
L	08/24/2023	Point bank								
6	Amount (\$)	7 Payee addr	ess; City;	State; Z	ip Code	<u> </u>				
	\$102.55	200 S. Hw	y 377							
		Pilot Point	, TX 76258							
8	PURPOSE OF		See Categories listed at the	top of this schedule	e) (b)	Description				
	EXPENDITURE	Accounting	g/Banking			Check if travel			plete Schedule T. gexpense	
						business Che			, ,	
						Gallo for Tex	as acc	count		
9	Complete ONLY if direct		ficeholder name	Offic	e sough			Office he	eld	
L	expenditure to benefit C/OI									
	Date	Payee name								
	10/12/2023	Point bank								
	Amount (\$)	Payee addr	ess; City;	State; Z	ip Code					
	\$30.00	200 S. Hw	y 377							
		Pilot Point	, TX 76258							
	PURPOSE	(a) Category (See Categories listed at the	top of this schedule	e) (b)	Description				
OF EXPENDITURE		Accounting	g/Banking			<u> </u>			plete Schedule T.	
			ш	Check if Austin, TX, officeholder living expense Check Stop fee						
						3.0p i				
Complete ONLY if direct		Candidate/Of	ficeholder name	Offic	e sought			Office he	eld	_
	expenditure to benefit C/OI	4								
	Date	Payee name								=
	11/14/2023	Stickers ar	nd Banners							
	Amount (\$)	Payee addr	ess; City;	State; Z	ip Code					_
	\$138.24	2502 Cam	p Ave							
		Carrollton,	TX 75006							
	PURPOSE	(a) Category	See Categories listed at the	top of this schedule	e) (b)	Description				\neg
	OF EXPENDITURE	Advertisin							plete Schedule T.	
						Check if Austin Banner	, TX, offi	ceholder living	gexpense	
						Damis				
	Complete ONLY if direct	Candidate/Of	ficeholder name	Offic	e sought			Office he	eld	_
	expenditure to benefit C/OI			2.110	y					
										-

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 Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (other a cottographed listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Gift/Awards/Mem Legal Services The Instructic	orials Expense on Guide explair		Vages	/Contract Labor		Travel Out of Di OTHER (enter a	strict a category not listed above))
1	Total pages Schedule F1: Sch: 12/12 Rpt: 22/24	2	FILER NAME Gallo Jr., Vir	ncent J. (Mr	.)				3	Filer ID 00087975	(Ethics Commission	Filers)
4	Date 11/20/2023	5	Payee name Stickers and	Banners				,	ı			
6	Amount (\$) \$138.24		Payee address 2502 Camp Carrollton, T	Ave	Sta	te; Zip Co	de					
8	PURPOSE	—			d at the top of this s	schedule)	(b)	Description				
	OF EXPENDITURE		Advertising I			,		Check if travel		de of Texas. Con officeholder livin	nplete Schedule T. g expense	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	eholder nam	е	Office sou	ght			Office h	eld	
	Date		Payee name									
	11/17/2023		Walmart									
	Amount (\$) \$147.16		Payee addres 3060 Justin	-	Sta	te; Zip Co	de					
			Highland Vil	lage, TX 75	077							
	PURPOSE OF EXPENDITURE		Category _{(Se} Event Exper		d at the top of this s	schedule)		\Box	, TX,	officeholder livin	nplete Schedule T. g expense	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	eholder nam	е	Office sou	ght			Office h	eld	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Total pages Schedule G: Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 23/24 Gallo Jr., Vincent J. (Mr.) 00087975 Date Payee name 11/21/2023 FedEx 6 Amount (\$) Payee address; City; State; Zip Code \$20.78 2701 Cross Timbers Rd. #208 Reimbursement from political contributions intended FLOWER MOUND, TX 75028 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Copies Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 24/24 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Gallo Jr., Vincent J. (Mr.) 00087975 4 Date 5 Name of person from whom amount is received 8 Amount (\$) 11/22/2023 \$200.00 Flower Mound Rec 6 Address of person from whom amount is received; City; State; Zip Code Flower Mound, TX 75028 7 Purpose for which amount is received Check if political contribution returned to filer Security deposit