CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT The C/OH Instruction Guide explains how to complete this form.

FORM C/OH COVER SHEET PG 1

	Guide explains how to complete		1 Filer ID (Ethics Commi 00088071		2 Total pages f	iiled: 25
3 CANDIDATE /	MS / MRS / MR FI	IRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	Mr. W	/ade			Date Received	
					ELECTRONIC	ALLY FILED
	NIOZALANE				01/16/2024	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		AST		SUFFIX	01/10/2024	
		owan				
4 CANDIDATE /	ADDRESS / PO BOX; APT / SI	UITE#; CITY	Υ;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING	2002 CR 7560					
ADDRESS					Receipt #	Amount
Change of Address	Lubbock, TX 79423					
					Date Processed	
					Date Imaged	
					Date imaged	
5 CAMPAIGN	MS / MRS / MR FII	RST		MI		
TREASURER		elly A.		1411		
NAME	Wis.	ziiy A.				
		\ST		SUFFIX		
	La	awler				
				_,		
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BO	X PLEASE);	AP'	T / SUITE #; CIT	Y; ST	ATE; ZIP CODE
ADDRESS	9460 Tegner Road					
(Residence or Business)						
	Hilmar, CA 95324					
7 CAMPAIGN	AREA CODE PHONE N	ULIMBED E	VTENCION			
7 CAMPAIGN TREASURER		NOMBER E	XTENSION			
PHONE	(209) 656-1542					
8 REPORT						
TYPE	X January 15	30th day before	election \square	Runoff	15th day after ca	ampaign treasurer
	Sandary 15	oour day before		ranon	appointment (of	ficeholder only)
	July 15	8th day before e	lection	Exceeded modified	Final Report (At	tach C/OH-FR)
				reporting limit		
9 PERIOD	Month Day Year			Month Day	/ Year	
COVERED	07/01/2023	TH	ROUGH	12/31/20	023	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	XPr	imary	Runoff	Other	
	03/05/2023	☐ Ge	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	HT (if known)	
	GITTOL TILLE (II diriy)				ntative District 83	
					2.03.100.00	
		GO T	O PAGE 2			
I						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 25

13 C / OH NAME	Cowan, Wade (Mr.)		14 Filer ID (I 00088071	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to I officeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
	s)	\$ 14,500.00		
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 248.63
	4. TOTAL POLITION	AL EXPENDITURES		\$ 45,643.86
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$ 68,656.14
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 99,800.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		Mr	. Wade Cowan	
		Signature of	Candidate or Officehold	der
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	er administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			C	JVER .	3 of 25
	ER NAN wan, W	ME Vade (Mr.)	19 Filer ID 00088071	(Ethics C	Commission Filers)
l		E SUBTOTALS SCHEDULE		SU	BTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	14,500.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	X	SCHEDULE E: LOANS		\$	99,800.00
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	45,643.86
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 FOR TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTR	RIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to comp	lete this forr	n.	1	Total pages Schedule A1: Sch: 1/9 Rpt: 4/25	
2	FILER NAME Cowan, Wad	le (Mr.)			3	Filer ID (Ethics Commission 00088071	on Filers)
4	Date 12/18/2023	 Full name of contributor out-of-star out-of-st)	7	Amount of Contribution (\$)	\$100.00
_		Brownfield, TX 79316					
8	Principal occu Farmer	pation / Job title (See Instructions)	9	Employer (See Instructions Self Employed	5)		
	Date 10/20/2023	Avila, Efrain)		Amount of Contribution (\$)	\$50.00
	Principal occu	Lubbock, TX 79424 pation / Job title (See Instructions)		Employer (See Instructions	 		
	Industrial me			Spre	,		
	Date 12/18/2023	Full name of contributor out-of-sta Besler, Judy (Mrs.) Contributor address; City; State; Zip Cod	ate PAC (ID#:)		Amount of Contribution (\$)	\$100.00
		Brownfield, TX 79316					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/31/2023	Bruce, Robert)		Amount of Contribution (\$)	\$1,500.00
	Principal occu Narrator prod	pation / Job title (See Instructions) ducer		Employer (See Instructions Self	5)		
	Date 10/26/2023	Carlile, Jeff Chad				Amount of Contribution (\$)	\$500.00
	Principal occu Information F	pation / Job title (See Instructions) Requested		Employer (See Instructions	5)		
			I				

	MONEI	ARY POLITICAL C	CONTRIBUTION	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 2/9 Rpt: 5/25	
2	FILER NAME Cowan, Wad				3	Filer ID (Ethics Commissio 00088071	n Filers)
4	Date 11/19/2023	5 Full name of contributor Carroll, DeAnna6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu Teacher	Marble Falls, TX 78654 pation / Job title (See Instructions		9 Employer (See Instruction Marble Falls ISD	s)		
	Date 12/14/2023	Full name of contributor Crowson, Wade Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu Nurse Practi	Lubbock, TX 79407 pation / Job title (See Instructions tioner)	Employer (See Instruction Texas Tech Physicians			
	Date 12/18/2023	Full name of contributor Crutcher, Kent Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Brownfield, TX 79316 pation / Job title (See Instructions)	Employer (See Instruction	s)		
	Cotton Farm	er		Self - cotton farmer ard	oun	d Wellman	
Date 10/24/2023		Full name of contributor DeVine, Gaylyn Contributor address; City; St Pearland, TX 77581	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu Entrepreneu	pation / Job title (See Instructions r)	Employer (See Instruction DeVine Promotions	s)		
	Date 11/05/2023	Full name of contributor Dickson, Donald Contributor address; City; St Friendswood, TX 77546	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions		Employer (See Instruction Retired	s)		
					_		

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to co	omplete this form	n.	1	Total pages Schedule A1: Sch: 3/9 Rpt: 6/25	
2	FILER NAME Cowan, Wad	le (Mr.)			3	Filer ID (Ethics Commission 00088071	n Filers)
4	Date 12/07/2023	Dingus, Sylvia	-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$500.00
_	Dringing agg	Brownfield, TX 79316	lo.	Employer (See Instructions	<u></u>		
8	Pharmacist	pation / Job title (See Instructions)	9	Clinic Pharmacy	•)		
	Date 10/18/2023	Fite, Ralph Contributor address; City; State; Zip	-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	SVP - Financ			Welcome Group, LLC	,		
	Date 12/12/2023	Full name of contributor out Franklin, Sandie Contributor address; City; State; Zip	-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
		Andrews, TX 79714					
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	5)		
	Date 12/12/2023	Franklin, Terry)		Amount of Contribution (\$)	\$100.00
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	5)		
	Date 10/20/2023	Fry, Jason	o Code			Amount of Contribution (\$)	\$25.00
	Principal occu Behavior and	pation / Job title (See Instructions)		Employer (See Instructions State of Texas HHS	5)		
	Schavior and	, o		Sale of Toxas IIIIo			

	MONET	ARY POLITICAL C	CONTRIBUTION	NS .		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 4/9 Rpt: 7/25	
2	FILER NAME Cowan, Wad	le (Mr.)			3	Filer ID (Ethics Commission 00088071	n Filers)
4	Date 10/19/2023	5 Full name of contributor Geoffroy, Joe6 Contributor address; City; Sta	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$25.00
_	Dringing Lagran	Amarillo, TX 79102	<u> </u>	Family on (Can Instructions			
8	Retired	pation / Job title (See Instructions) 9	Employer (See Instructions Retired	5)		
	Date 12/29/2023	Full name of contributor Hagood, Kent Contributor address; City; St)		Amount of Contribution (\$)	\$100.00
	Principal occu	Fort Worth, TX 76109 pation / Job title (See Instructions)	Employer (See Instructions	 s)		
	Insurance Ar		Self Employed				
	Date 10/18/2023	Full name of contributor Huckabee, Daniel Contributor address; City; St	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$50.00
		Katy, TX 77450					
	Principal occu Sales	pation / Job title (See Instructions		Employer (See Instructions Dlhbs	5)		
	Date 12/06/2023	Full name of contributor Hupe, Dennis Contributor address; City; St	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$100.00
	Principal occu Director of Fi	pation / Job title (See Instructions ield Services		Employer (See Instructions Kansas Soybean Assoc		on	
	Date 10/18/2023	Full name of contributor Jackson, Stoney Contributor address; City; St	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$500.00
	Principal occu Insurance	pation / Job title (See Instructions)	Employer (See Instructions Texas Agribusiness Inst		nce	
			-				

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 5/9 Rpt: 8/25	
2	FILER NAME Cowan, Wad	de (Mr.)				3	Filer ID (Ethics Commission 00088071	on Filers)
4	Date 12/22/2023	5 Full name of contributor Kindred, Jayne6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$50.00
0	Dringing Loon	Atlanta, IL 61723		_	Employer (Coo Instructions	<u></u>		
8	Retired	pation / Job title (See Instructions) 	9	Employer (See Instructions Retired	s)		
	Date 12/22/2023	Full name of contributor Kindred, Ronald Contributor address; City; S)	•	Amount of Contribution (\$)	\$50.00
	Principal occu	Atlanta, IL 61723 pation / Job title (See Instructions	3)		Employer (See Instructions	;) 		
	Farmer	panon / oob the (occ mondenone	,,		Kindred Farms, Inc.	,,		
	Date 12/27/2023	Full name of contributor Lemmons, Angie Contributor address; City; S	out-of-state PAC (ID#:_			•	Amount of Contribution (\$)	\$100.00
		Boerne, TX 78006						
	Principal occu Retired	pation / Job title (See Instructions	s)		Employer (See Instructions Retired	s)		
	Date 12/27/2023	Full name of contributor Loredo, Edward Contributor address; City; S Beach City, TX 77523)		Amount of Contribution (\$)	\$50.00
	Principal occu Sales	pation / Job title (See Instructions	5)		Employer (See Instructions Self	5)		
	Date 12/18/2023	Full name of contributor Lucky Dime Farms JV Contributor address; City; Si Brownfield, TX 79316	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	(3)		Employer (See Instructions	5)		
			•					

	MONET	ARY POLITICAL (CONTRIBUTION	NS		SCHEDUI	LE A1
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 6/9 Rpt: 9/25	
2	FILER NAME Cowan, Wad	le (Mr.)			3	Filer ID (Ethics Commission 00088071	on Filers)
4	Date 11/27/2023	5 Full name of contributorMiller, Amber6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code		7	Amount of Contribution (\$)	\$500.00
8	Principal occur	Lubbock, TX 79424 pation / Job title (See Instructions) la	Employer (See Instructions	-, 		
0	Attorney	pation / Job title (See Instructions	9	Crenshaw, Dupree and	′	iam Law	
	Date 11/21/2023	Full name of contributor Miller, Tracy Contributor address; City; St)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Lubbock, TX 79407 pation / Job title (See Instructions	s)	Employer (See Instructions	 s)		
	Retired	,		Retired			
	Date 10/18/2023	Full name of contributor Minyard, Shellie Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code		•	Amount of Contribution (\$)	\$5.00
		Brownfield, TX 79316					
	Principal occu Inventory	pation / Job title (See Instructions	(i)	Employer (See Instructions Brownfield Seed Delint	-		
	Date 12/10/2023	Full name of contributor Ragland, Caleb Contributor address; City; St Magnolia, KY 42757)		Amount of Contribution (\$)	\$100.00
	Principal occu Farmer	pation / Job title (See Instructions)	Employer (See Instructions Self Employed	5)		
	Date 11/27/2023	Full name of contributor Ricketts, Pam Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code		•	Amount of Contribution (\$)	\$1,000.00
	Principal occu Counselor	pation / Job title (See Instructions)	Employer (See Instructions Floydada ISD	<u>.</u> S)		

	MONET	ARY POLITICAL CONTR	IBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to comp	lete this forr	n.	1	Total pages Schedule A1: Sch: 7/9 Rpt: 10/25	
2	FILER NAME Cowan, Wad	e (Mr.)			3	Filer ID (Ethics Commission 00088071	on Filers)
4	Date 11/28/2023	 Full name of contributor out-of-star Nidenour, James Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$250.00
_	Dringing! aggs	Brownfield, TX 79316-7147	lo.	Employer (See Instructions			
8	Vetrinarian	pation / Job title (See Instructions)	9	Employer (See Instructions Terry County Vet Hospit			
	Date 10/22/2023	Runnels, Ann)		Amount of Contribution (\$)	\$25.00
	Deinstead	Garland, TX 75093	1	Formula van (Coo la struction	Ĺ		
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	;)		
	Date 10/27/2023	Full name of contributor out-of-state PAC (ID#:) Singleton, Shari Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00	
		Lubbock, TX 79423					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	i)		
	Date 12/18/2023	Stallings, Kyle)		Amount of Contribution (\$)	\$2,500.00
	Principal occu Oil And Gas	pation / Job title (See Instructions) Investments		Employer (See Instructions Self-Employed)		
	Date 12/18/2023	Steele, James)		Amount of Contribution (\$)	\$200.00
	Principal occu Farmer	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	<u> </u>		
			'				

	MONET	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 8/9 Rpt: 11/25	
2	FILER NAME Cowan, Wad	le (Mr.)			3	Filer ID (Ethics Commissio 00088071	n Filers)
4	Date 10/31/2023	5 Full name of contributor Summers, Gayle6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$50.00
_		Snyder, TX 79549	,	5 1 (0 1 1 1			
8	Retired	pation / Job title (See Instructions	9	Employer (See Instruction Retired	is)		
	Date 10/18/2023	Full name of contributor Sweeten, Pamela Contributor address; City; St				Amount of Contribution (\$)	\$10.00
	Dringing! aggr	Lubbock, TX 79416	. I	Employer (Co.) Instruction	<u> </u>		
	Sales	pation / Job title (See Instructions)	Employer (See Instruction Paramount Broadcastin			
	Date 10/23/2023	Full name of contributor Terrell, Sterling Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$200.00
		Lubbock, TX 79424					
	Principal occu Cotton Trade	pation / Job title (See Instructions er	(3)	Employer (See Instruction Wilmeth Farms	is)		
	Date 11/09/2023	Full name of contributor Timmons, Howard Contributor address; City; St Brownfield, TX 79316				Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions	(3)	Employer (See Instruction	ns)		
	Date 10/18/2023	Full name of contributor Weaver, Shirley Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instructions	(3)	Employer (See Instruction Retired	ns)		

	MONET	ARY POLITICAL CONTRIBUT	ΓΙΟΝ	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	is for	m.	1	Total pages Schedule A1: Sch: 9/9 Rpt: 12/25	
2	FILER NAME Cowan, Wad	e (Mr.)			3	Filer ID (Ethics Commission 00088071	n Filers)
4	Date 12/18/2023	 Full name of contributor out-of-state PAC (Wheatley Jr., Herman Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$500.00
8	Principal occur	Brownfield, TX 79316 pation / Job title (See Instructions)	l _a	Employer (See Instructions	·/		
0	Farmer Farmer	valion 7 300 title (See instructions)		Self Employed	•)		
	Date 11/01/2023	Full name of contributor out-of-state PAC (Whitley, Laura Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	Lubbock, TX 79424 pation / Job title (See Instructions)	-	Employer (See Instructions	<u> </u>		
	Retired	,		Retired	,		
	Date 11/01/2023	Full name of contributor out-of-state PAC (Wigness, Jeff Contributor address; City; State; Zip Code	ID#:)		Amount of Contribution (\$)	\$25.00
		Lubbock, TX 79423					
	Principal occu Retired	oation / Job title (See Instructions)		Employer (See Instructions Retired	s)		
	Date 11/09/2023	Full name of contributor out-of-state PAC (Williams, Stephen Contributor address; City; State; Zip Code Lubbock, TX 79424)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/19/2023	Full name of contributor out-of-state PAC (Wuensche, Debra Contributor address; City; State; Zip Code Elgin, TX 78621				Amount of Contribution (\$)	\$25.00
	Principal occu Retired	oation / Job title (See Instructions)		Employer (See Instructions Retired	s)		
			•				

	LOANS							SCHEDULE E	
	The Instruction	n Guide explains ho	w to co	omplete this f	orm.	1		ges Schedule E: 2 Rpt: 13/25	
2	FILER NAME Cowan, Wade (N	л г.)				1	iler ID 000880	(Ethics Commission Filers)	
4	TOTAL OF UN	ITEMIZED LOANS						\$	
5	Date of loan 12/21/2023	7 Name of lender Cowan, Wade		out-of-state PA	C (ID#:)	9 Loan Amount (\$) \$69,900.00	
6	Is lender a financial institution?	8 Lender address;	City;	State;	Zip Code			10 Interest Rate 11 Maturity Date	
	No	Lubbock, TX 79407						II Maturity Date	
12	Principal occupation Farmer and Bus	on / Job title (See Instruction inessman	ns)		13 Employer (See Instructions Self Employed	s)			
14	Description of Coll X None	ateral			15 Check if personal funds we	ere de	eposited	into political account (See Instructions)	
16	GUARANTOR INFORMATION	17 Name of guarantor			<u> </u>			19 Amount Guaranteed (\$)	
	X not applicable	18 Guarantor address;	City;	State;	Zip Code				
20	Principal occupation	on			21 Employer (See Instructions	s)			
	Date of loan	Name of lender		out-of-state PA	C (ID#:)	Loan Amount (\$)	
	11/15/2023	Cowan, Wade						\$10,000.00	
	Is lender a financial institution?	Lender address;	City;	State;	Zip Code			Interest Rate	
	No	Lubbock, TX 79407						Maturity Date	
	Principal occupation	on / Job title (See Instruction	ns)		Employer (See Instructions	s)			
	Farmer and Bus	iness			Self Employed				
	Description of Coll X None	ateral			Check if personal funds were deposited into political account (See Instructions)				
	GUARANTOR INFORMATION	Name of guarantor						Amount Guaranteed (\$)	
	X not applicable	Guarantor address;	City;	State;	Zip Code				
	Principal occupation	on			Employer (See Instructions	5)		ı	

	LOANS							SCHEDULE E	
	The Instruction	on Guide explains hov	v to co	mplete this f	orm.	1		ges Schedule E: 2 Rpt: 14/25	
2	FILER NAME Cowan, Wade (N	Mr.)				3		(Ethics Commission Filers)	
4	TOTAL OF UN	IITEMIZED LOANS				<u> </u>		\$	
5	Date of loan 10/19/2023	7 Name of lender Cowan, Wade		out-of-state PA	C (ID#:)	9 Loan Amount (\$) \$10,000.00	
6	Is lender a financial institution?		City;	State;	Zip Code			10 Interest Rate 11 Maturity Date	
	No	Lubbock, TX 79407						II Maturity Date	
12	Principal occupation Farmer and Bus	on / Job title (See Instruction: inessman	s)		13 Employer (See Instructions Self Employed	s)			
14	Description of Coll X None	ateral			15 Check if personal funds we	ere c	eposited	into political account (See Instructions)	
16	GUARANTOR INFORMATION	17 Name of guarantor						19 Amount Guaranteed (\$)	
	X not applicable	18 Guarantor address;	City;	State;	Zip Code				
20	Principal occupation	on			21 Employer (See Instructions	5)			
	Date of loan	Name of lender		out-of-state PA	C (ID#:)	Loan Amount (\$)	
	10/27/2023	Cowan, Wade						\$9,900.00	
	Is lender a financial institution?	Lender address;	City;	State;	Zip Code			Interest Rate	
	No	Lubbock, TX 79407						Maturity Date	
	Principal occupation	on / Job title (See Instructions	s)		Employer (See Instructions)				
	Farmer and Bus	inessman			Self Employed				
	Description of Coll X None	ateral			Check if personal funds were deposited into political account (See Instructions)				
	GUARANTOR INFORMATION	Name of guarantor						Amount Guaranteed (\$)	
	X not applicable	Guarantor address;	City;	State;	Zip Code				
	Principal occupation	on			Employer (See Instructions	s)		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 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 Payment	The Instruction Guide explains how to complete this	s form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 1/11 Rpt: 15/25	Cowan, Wade (Mr.)	00088071
4	Date	5 Payee name	•
	12/27/2023	Action Printing	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$894.17	2407 82nd Street	
		Lubbock, TX 79423	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	ription
	OF EXPENDITURE	Printing Expense	neck if travel outside of Texas. Complete Schedule T.
			neck if Austin, TX, officeholder living expense NTING - Printing Expense
			VIIVO I IIIIIII EXPENSE
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Ccc
_	Date	Payee name	
	12/15/2023	Ad Venture Marketing	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$399.00	PO Box 286	
	φοσο.σσ	1 6 20% 200	
		Brownfield, TX 79316	
	PURPOSE		
	OF OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	ripuori neck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travertising Expense	neck if Austin, TX, officeholder living expense
		ADV	ERTISE - Advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	11/16/2023	Advanced Graphix	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$7,277.11	520 23rd Street	
		Lubbock, TX 79404	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	ription
	OF EXPENDITURE	Printing Expense	neck if travel outside of Texas. Complete Schedule T.
		,	neck if Austin, TX, officeholder living expense JTING - Printing
		PRIIV	TING - Pillung
L	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	•	Office field
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

sement Solicitation/Fundraising Expense

xpense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not 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: 2/11 Rpt: 16/25	Cowan, Wade (Mr.) 00088071
4	Date	5 Payee name
	11/15/2023	Catamaran Consulting
6	Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 1920 Hillhurst Avenue #1159 Los Angeles, CA 90027
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CONSULT - General Consulting
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/15/2023	Catamaran Consulting
	Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 1920 Hillhurst Avenue #1159 Los Angeles, CA 90027
	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 CONSULT - General Consulting
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 11/15/2023	Payee name Catamaran Consulting
	Amount (\$) \$450.00	Payee address; City; State; Zip Code 1920 Hillhurst Avenue #1159 Los Angeles, CA 90027
	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 CONSULT - General Consulting
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Vertising Expense Event Expense Loan Repayment/Reimbur

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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel out frict

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	•		/ages	/Contract Labor		OTHER (enter	a category not listed	above)
				The Instruction G	uide explains h	now to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	ssion Filers)
	Sch: 3/11 Rpt: 17/25		Cowan, Wad	de (Mr.)						00088071		
4	Date	5	Payee name									
	12/27/2023		Catamaran	Consulting								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$7,500.00		1920 Hillhur	st Avenue								
			#1159									
			Los Angeles	s, CA 90027								
8	PURPOSE	(a)		e Categories listed at	4l 4 6 4l-i l		(b)	Description				
ľ	OF	(-,	Polling Expe		tne top of this sche	eaule)	(~)	_ `	outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE		r oming Expe	7130				Check if Austin,	, TX,	officeholder livi	ng expense	
								POLLING - P	olli	ng		
9	Complete ONLY if direct		Candidate/Offic	ceholder name	0	ffice sou	ght			Office I	held	
	expenditure to benefit C/OI	Η										
	Date		Payee name									
	12/27/2023		Catamaran	Consulting								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$3,000.00		1920 Hillhur	st Avenue								
			#1159									
			Los Angeles	s, CA 90027								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Consulting E					=			mplete Schedule T.	
	2/11/2/10/12							CONCLUTION				
								CONSULT - S	Suc	alegic Cons	Sulling	
_	Complete ONLY if direct	<u>_</u>	Candidate/Offic	coholdor namo		ffice sou	aht			Office I	hold	
	expenditure to benefit C/OI		Januluale/Onic	centituel frame	O	ilice sou	grit			Office	ieiu	
_		1										
	Date		Payee name									
	11/08/2023		Cre8ive									
	Amount (\$)		Payee addres	•	State;	Zip Co	de					
	\$460.06		8008 Slide F	Road								
			Suite 5									
			Lubbock, TX	(79424								
	PURPOSE OF	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	EXPENDITURE		Photography	y and Editing							mplete Schedule T.	
								OTHER - Pho				
								CITIEN THE	٥٠٥	grapity will	. Lating	
\vdash	Complete ONLY if direct	<u> </u>	Candidate/Offic	ceholder name	<u> </u>	ffice sou	aht			Office I	held	
	expenditure to benefit C/OI			Jones Hame	Ü	00 000	ar.			Since		
l												

SCHEDULE F1

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/11 Rpt: 18/25	Cowan, Wade (Mr.) 00088071
4	Date	5 Payee name
	11/09/2023	Edgerton Stratagies, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,353.13	1540 Keller Parkway
		#108-402
		Keller, TX 76248
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Website Development and Design Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense OTHER - Website Development and Design
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	expenditure to benefit Groi	
	Date	Payee name
	11/14/2023	Lubbock Area Republican Women PAC
	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	4411 7th St.
		Lubbock, TX 79416
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		DONATIONS - Contributions/Donations made By
		Candidate/Officeholder/Political Committee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/06/2023	Mexican Kitchen, PICOSO'S
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,623.75	7611 Milwaukee Avenue
		Lubbock, TX 79424
	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
		EVENT - Catering for Campaign Event
	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 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		Legal Services The Instruction Guide	Salaries	Wages	/Contract Labor		OTHER (enter a	a category not listed above)
1	Total pages Schedule F1:	2 FILER NAMI	Ē				3	Filer ID	(Ethics Commission Filers)
	Sch: 5/11 Rpt: 19/25	Cowan, Wa	ade (Mr.)					00088071	
4	Date	5 Payee name							
	11/09/2023	Numinar In	c.						
6	Amount (\$) \$675.00	7 Payee addre 1201 Wilso	ss; City; n Boulevard	State; Zip C	ode				
		Arlington, \	′A 22209						
8	PURPOSE OF		ee Categories listed at the t	op of this schedule)	(b)	Description			
	EXPENDITURE	Platform Su	ibscription			ш	, TX,	officeholder living	
9	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office so	ught			Office he	eld
	Date	Payee name							
	12/09/2023	Numinar In	c.						
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$675.00	1201 Wilso	n Boulevard						
		Arlington, \	'A 22209		1				
	PURPOSE OF		ee Categories listed at the t	op of this schedule)	(b)	Description		do of Toyon Com	anlete Cohodule T
	EXPENDITURE	Platform St	ibscription			=		officeholder living	plete Schedule T. g expense
						OTHER - Pla			
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office so	ught			Office he	eld
	Date	Payee name							
	12/27/2023	Office Depo	ot						
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$54.44	2504 50th	Street						
		Lubbock, T	X 79413						
	PURPOSE	(a) Category (S	ee Categories listed at the t	op of this schedule)	(b)	Description			
	OF EXPENDITURE	Printing Ex	pense			ш			pplete Schedule T.
						PRINTING - F		officeholder living	
						· IXIIVIIING - I	111	ming Expens	50
_	Complete ONLY if direct	Candidate/Off	iceholder name	Office so	<u>l</u> ught			Office h	eld
	expenditure to benefit C/O			200 00	J			200 11	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 6/11 Rpt: 20/25	Cowan, Wade (Mr.) 00088071
4	Date	5 Payee name
	11/14/2023	Sweeten, Pamela
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,800.00	105 N Troy Ave
		Apt C
		Lubbock, TX 79416
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		SALARIES - Campaign Management
		G. E. Wiles Sampaign Management
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	11/14/2023	Sweeten, Pamela
	Amount (\$)	Payee address; City; State; Zip Code
	\$509.59	105 N Troy Ave
		Apt C
		Lubbock, TX 79416
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Reimbursements: Mileage, Political Check if travel outside of Texas. Complete Schedule T.
		Contribution, Meeting and Website
		Contribution, Meeting and Website Subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	12/27/2023	Sweeten, Pamela
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	105 N Troy Ave
		Apt C
		Lubbock, TX 79416
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		SALARIES - Campaign Management
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/11 Rpt: 21/25	Cowan, Wade (Mr.) 00088071
4	Date	5 Payee name
	12/27/2023	Sweeten, Pamela
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$57.01	105 N Troy Ave
		Apt C
		Lubbock, TX 79416
_	DUDDOCE	· · · · · · · · · · · · · · · · · · ·
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Reimbursements: Name Tags Palm Cards Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Reimbursements: Name Tags, Palm cards, Flyers, Food/Beverage Check if Austin, TX, officeholder living expense
		OTHER - Reimbursements: Name Tags, Palm cards,
		Flyers, Food/Beverage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/27/2023	Texas Tech Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$107.21	2508 6th Street
	7201.22	
		Lubback TV 70400
		Lubbock, TX 79409
	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
		FOOD - Food/Beverage
		1 COD 1 COUNDEVERAGE
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Daving marks
	12/27/2023	Payee name Texas Tech Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$97.28	2508 6th Street
		Lubbock, TX 79409
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		FOOD - Food/Beverage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E Gift/Awards/Memorials Expense Printing		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 c	omplete this form.	
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 8/11 Rpt: 22/25	Cowan, Wade (Mr.)		00088071
4	Date	5 Payee name		•
	12/27/2023	The KAL Group, Inc.		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$1,188.30	9460 Tegner Road		
		-		
		Hilmar, CA 95324		
8	PURPOSE		(b) Decemention	
0	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Check if trave	el outside of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking		in, TX, officeholder living expense
			ACCOUNT	- Bookkeeping
9	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	11/02/2023	Vantage ROI, LLC		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$3,750.00	PO Box 340836	oue	
	φ3,730.00	FO BOX 340030		
		:		
		Austin, TX 78734	_	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
	EXPENDITURE	Research	l <u>L</u>	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
			OTHER - R	
	Complete ONLY if direct	Candidate/Officeholder name Office so	<u> </u> ught	Office held
	expenditure to benefit C/O		agiit	Cinico ficia
	Data			
	Date	Payee name		
	12/21/2023	Vantage ROI, LLC		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$3,915.43	PO Box 340836		
		Austin, TX 78734		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
	OF EXPENDITURE	Research	I 🗀	el outside of Texas. Complete Schedule T.
	ZA ZHOHORZ		_ 	in, TX, officeholder living expense
			OTHER - R	eseaiui
	Commission ONE V. C. P.	Condidate/Officels-14-77-77-77		Office hald
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ugnt	Office held
	,			
Foi	rms provided by Texas E	thics Commission www.ethics.state.tx.	us	Version V3.5.1.0bfcfb67

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to complete	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 9/11 Rpt: 23/25	Cowan, Wade (Mr.)	00088071
4 Date	5 Payee name	
11/14/2023	WP Engine	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$107.21	504 Lavaca Street	
	#1000	
	Austin, TX 78701	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	Description
OF EXPENDITURE	Website Hosting	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		THER - Other
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	Н	
Date	Payee name	
11/06/2023	eFundraising Connections	
Amount (\$)	Payee address; City; State; Zip Code	
\$13.88	2831 G Street	
	#120	
	Sacramento, CA 95816	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	Description
OF EXPENDITURE	Solicitation/Fundraising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	L	FUNDRAISE - Credit Card Processing Fees
		3
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	Н	
Date	Payee name	
11/14/2023	eFundraising Connections	
Amount (\$)	Payee address; City; State; Zip Code	
\$34.01	2831 G Street	
	#120	
	Sacramento, CA 95816	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Solicitation/Fundraising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	L	FUNDRAISE - Credit Card Processing Fees
		Ç
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	Н	

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Git/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	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/11 Rpt: 24/25	Cowan, Wade (Mr.) 00088071
4	Date	5 Payee name
	11/21/2023	eFundraising Connections
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5.00	2831 G Street
		#120
		Sacramento, CA 95816
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
Ŭ	OF	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		FUNDRAISE - Credit Card Processing Fees
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/28/2023	eFundraising Connections
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.63	2831 G Street
		#120
		Sacramento, CA 95816
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		FUNDRAISE - Credit Card Processing Fees
	Commission ONII V if dispost	Condidate/Officeholder name Office pought Office hold
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/04/2023	eFundraising Connections
	Amount (\$)	Payee address; City; State; Zip Code
	\$113.00	2831 G Street
		#120
		Sacramento, CA 95816
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		FUNDRAISE - Credit Card Processing Fees
	Occasilete ONIV."	Our didn't (Office helder name
	Complete ONLY if direct expenditure to benefit C/OH	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 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: 11/11 Rpt: 25/25	Cowan, Wade (Mr.) 00088071	
4	Date	5 Payee name	
	12/14/2023	eFundraising Connections	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$59.02	2831 G Street	
		#120	
		Sacramento, CA 95816	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense FUNDRAISE - Credit Card Processing Fees	
		FONDIVAISE - Credit Card Frocessing Fees	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
	Date	Payee name	
	12/19/2023	eFundraising Connections	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.00	2831 G Street	
		#120	
		Sacramento, CA 95816	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense FUNDRAISE - Credit Card Processing Fees	
		TONDIVISE Great Gara Frocessing Fees	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OH		
	Date	Payee name	
	12/27/2023	eFundraising Connections	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.00	2831 G Street	
		#120	
		Sacramento, CA 95816	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Solicitation/Fundraising Expense	
		Check if Austin, TX, officeholder living expense	
		FUNDRAISE - Credit Card Processing Fees	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	