

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

**FORM C/OH  
COVER SHEET PG 1**

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00062288	<b>2</b> Total pages filed: 366
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Matthew M.	MI
	NICKNAME Dade	LAST Phelan	SUFFIX
		<b>OFFICE USE ONLY</b>	
		Date Received <b>ELECTRONICALLY FILED</b> 01/16/2024	
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; Post Office Box 5990		ZIP CODE
	Austin, TX 78763		Date Hand-delivered or Date Postmarked
	Receipt #	Amount	
	Date Processed		
Date Imaged			
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST William F.	MI
	NICKNAME	LAST Scott	SUFFIX
<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1735 West Cardinal Drive Beaumont, TX 77705		
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(409)	727-4801	
<b>8</b> 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)		
<b>9</b> PERIOD COVERED	Month	Day	Year
	07	01	2023
	THROUGH		Month Day Year
			12/31/2023
<b>10</b> ELECTION	ELECTION DATE Month Day Year 03/05/2024		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
<b>11</b> OFFICE	OFFICE HELD (if any) State Representative District 21		<b>12</b> OFFICE SOUGHT (if known) State Representative District 21

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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<b>13 C / OH NAME</b> Phelan, Matthew M. (The Honorable)	<b>14 Filer ID</b> (Ethics Commission Filers) 00062288
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <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.	
	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>
	<input type="checkbox"/> GENERAL	Texans for Dade
	<input checked="" type="checkbox"/> SPECIFIC	<b>COMMITTEE ADDRESS</b>
		PO Box 5990  Austin, TX 78763
	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>	Scott, William F.
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>	1735 W Cardinal Dr  Beaumont, TX 77705

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,508,603.28
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	2,797,341.94
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	5,341,369.78
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

**17 AFFIDAVIT**

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

\_\_\_\_\_  
 The Honorable Matthew M. Phelan  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

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

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<b>18 FILER NAME</b> Phelan, Matthew M. (The Honorable)	<b>19 Filer ID</b> (Ethics Commission Filers) 00062288
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<b>20 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
<b>NAME OF SCHEDULE</b>		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,439,815.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 68,788.28
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 2,736,410.66
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 3,233.76
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 57,697.52
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**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/116 Rpt: 4/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ARFEEN, QAMAR <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77706	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) MD		<b>9</b> Employer (See Instructions) HARBOR HEALTHCARE SYSTEM
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ARNOLD, PAULA <hr/> Contributor address; City; State; Zip Code  Jersey Village, TX 77064	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/10/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00406801 ) AVANGRID PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20005	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Abeyta, Shelby <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75201	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Communications Director		Employer (See Instructions) HALL Group
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Abrego, Stephanie <hr/> Contributor address; City; State; Zip Code  Shenandoah, TX 77380	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 2/116 Rpt: 5/366
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 10/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Acadian Ambulance Texas Employee PAC ..... 6 Contributor address; City; State; Zip Code  Lafayette, LA 70509	7 Amount of Contribution (\$)  \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adams, Crista ..... Contributor address; City; State; Zip Code  Katy, TX 77494	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adams, Frank ..... Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adams, John ..... Contributor address; City; State; Zip Code  Dallas, TX 75205	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adams, Phil D. ..... Contributor address; City; State; Zip Code  Bryan, TX 77802	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Phil Adams Company

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/116 Rpt: 6/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Albright, Morris <hr/> <b>6</b> Contributor address; City; State; Zip Code  Port Arthur, TX 77640	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alexander, Ross <hr/> Contributor address; City; State; Zip Code  Florence, AL 35634	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alfred, Everette <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allen Boone Humphries Robinson LLP <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$30,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allen, J. Brad <hr/> Contributor address; City; State; Zip Code  Stephenville, TX 76401	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Company of Rock House

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/116 Rpt: 7/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allen, Joshua <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77701	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions) President		<b>9</b> Employer (See Instructions) J. Allen Management Co.
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allen, Joshua <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) J. Allen Management Co.
Date 09/12/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00040253 ) Allstate PAC (ALLPAC) <hr/> Contributor address; City; State; Zip Code  Northbrook, IL 60062	Amount of Contribution (\$)  \$4,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Amegy Bank of Texas PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anawate, Ricardo <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77726	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) VP of Operations		Employer (See Instructions) Optimus Steel, LLC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 5/116 Rpt: 8/366
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 10/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Chad	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code  Nederland, TX 77627	
8 Principal occupation / Job title (See Instructions) Investments		9 Employer (See Instructions) Indorama Ventures
Date 10/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Starla	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Beaumont, TX 77706	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aplin III, Arch	Amount of Contribution (\$) \$25,000.00
	Contributor address; City; State; Zip Code  Lake Jackson, TX 77566	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arenaz, Pablo	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code  Laredo, TX 78041	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) TAMIU
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arnold, W.E. Eddie	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Beaumont, TX 77706	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/116 Rpt: 9/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ashley, Rita	<b>7</b> Amount of Contribution (\$) \$1,500.00
<b>6</b> Contributor address; City; State; Zip Code  Galveston, TX 77550		
<b>8</b> Principal occupation / Job title (See Instructions) Philanthropist		<b>9</b> Employer (See Instructions) Self
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Associations, Inc. PAC	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code  Dallas, TX 75205		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Augustine, Dwaine	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Beaumont, TX 77713		
Principal occupation / Job title (See Instructions) Superintendent		Employer (See Instructions) Hamshire-Fannett ISD
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Austin Fire Fighters PAC	Amount of Contribution (\$) \$25,000.00
Contributor address; City; State; Zip Code  Austin, TX 78752		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Autry Public Affairs LLC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Austin, TX 78739		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/116 Rpt: 10/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Avery, Pat <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77098	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) President/CEO		<b>9</b> Employer (See Instructions) Port Arthur Chamber of Commerce
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Avery, Richard <hr/> Contributor address; City; State; Zip Code  Bryan, TX 77807	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Texas A&M Agrilife Extension Service
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Avra, Ronald <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/26/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00340075</u> ) BASF Corporation Employees PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20005	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BNSF Railway Company RAILPAC <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76161	Amount of Contribution (\$)  \$30,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/116 Rpt: 11/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BSD Nihul LLC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Hollywood, FL 33021	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baggett, David <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Opportune
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bahr, Ronald <hr/> Contributor address; City; State; Zip Code  Montgomery, TX 77356	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) VP - Information Technology		Employer (See Instructions) CenterPoint Energy
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bailey, Guy <hr/> Contributor address; City; State; Zip Code  Edinburg, TX 78539	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) UT RGV
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baldwin, John <hr/> Contributor address; City; State; Zip Code  Marshall, TX 75670	Amount of Contribution (\$)  \$25,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Baldwin & Baldwin

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/116 Rpt: 12/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baltaoglu, Suleyman <hr/> <b>6</b> Contributor address; City; State; Zip Code  Leander, TX 78641	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) President		<b>9</b> Employer (See Instructions) DCOMM, Inc.
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barnes Jr., Robert <hr/> Contributor address; City; State; Zip Code  Lucas, TX 75002	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baron & Budd, P.C. <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219	Amount of Contribution (\$)  \$25,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barr, Richard <hr/> Contributor address; City; State; Zip Code  Edcouch, TX 78538	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Cardela Produce, LLC
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barrenechea, Luis <hr/> Contributor address; City; State; Zip Code  Tomball, TX 77375	Amount of Contribution (\$)  \$750.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Optimus Steel

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/116 Rpt: 13/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barry, William <hr/> <b>6</b> Contributor address; City; State; Zip Code  Texarkana, TX 75503	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Barry RV and Boat Storage
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bean, Lilli <hr/> Contributor address; City; State; Zip Code  La Porte, TX 77571-3506	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beaulieu, Larry <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bechtel, Michel <hr/> Contributor address; City; State; Zip Code  Morgan's Point, TX 77571	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Oil & Gas Executive		Employer (See Instructions) Bechtel Exploration
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beck, David <hr/> Contributor address; City; State; Zip Code  Houston, TX 77010	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Beck Redden, LLP

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/116 Rpt: 14/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bell, Jr, Borden <hr/> <b>6</b> Contributor address; City; State; Zip Code  Texarkana, TX 75503	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bellinger, John <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78258	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Food Safety Net Services
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bellinger, John <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78258	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Food Safety Net Services
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ben E. Keith Company Texas PAC <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76102	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benckenstein & Oxford LLP <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/116 Rpt: 15/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bernard, Meagan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77706	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Berthelot, Chip <hr/> Contributor address; City; State; Zip Code  Houston, TX 77056	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Laser Midstream
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bessent, Kody <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79416	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Plains Cotton Growers, Inc.
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bezecny, S.W. <hr/> Contributor address; City; State; Zip Code  Sugar Land, TX 77498	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bhargava, Raj <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75071	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Manner Polymers

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/116 Rpt: 16/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bingham, Erin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Spring, TX 77386	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bivins, Mark <hr/> Contributor address; City; State; Zip Code  Amarillo, TX 79105	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Corsino Cattle Company
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blevins, Bryan <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Provost Umphrey Law Firm
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bobby Howell for Bowie County Judge <hr/> Contributor address; City; State; Zip Code  Texarkana, TX 75503	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bohannon Jr., Thomas <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79912	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/116 Rpt: 17/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boling, Jeremiah <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) Boling Law Firm
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bonham, Jeff <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) VP Texas State Relations		Employer (See Instructions) CenterPoint Energy, Inc
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Borde, David <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boudreaux, Dwayne <hr/> Contributor address; City; State; Zip Code  Santa Fe, TX 77517	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bowling, IV, Robert L. <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79912	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Land Developer		Employer (See Instructions) Tropicana Homes

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/116 Rpt: 18/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bowling, Randall J.	<b>7</b> Amount of Contribution (\$) \$5,000.00
<b>6</b> Contributor address; City; State; Zip Code  El Paso, TX 79912		
<b>8</b> Principal occupation / Job title (See Instructions) Land Developer		<b>9</b> Employer (See Instructions) Tropicana Homes
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brady, Zach	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code  Lubbock, TX 79401		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Brady & Hamilton, LLP
Date 10/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brauer, Jr, Steve	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code  Fort Worth, TX 76107		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bresnen, Steven	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bresnen Associates
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brickman, James	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code  Dallas, TX 75205		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Green Brick Partners

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/116 Rpt: 19/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brooks, Jeri <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77254	<b>7</b> Amount of Contribution (\$)  \$750.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) One World Strategy Group
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brooks, Randy <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76903	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Wholesale fuel and investing		Employer (See Instructions) BNB Ventures
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brooks, Randy <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76904	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Fuel Sales and Investing		Employer (See Instructions) BNB Ventures
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Broussard, James <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Broussard, Martin <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77702	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) LeaseAll/RentAll

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/116 Rpt: 20/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Bradley <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77706	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Trust Manager		<b>9</b> Employer (See Instructions) First Financial Trust
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Joanne <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Major Gifts Officer		Employer (See Instructions) Lamar University
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Marcus <hr/> Contributor address; City; State; Zip Code  New Orleans, LA 70113	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Sanford <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75201	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Alston&Bird
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brownell, Nathan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77345	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) VP of TX Gas Operations		Employer (See Instructions) CenterPoint Energy

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/116 Rpt: 21/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brownsville Firefighters For Responsible Government <hr/> <b>6</b> Contributor address; City; State; Zip Code  Brownsville, TX 78523	<b>7</b> Amount of Contribution (\$)  \$1,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burrows, K Alan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78768	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burton, Jr., Bill <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79922	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Byrnes, Stan <hr/> Contributor address; City; State; Zip Code  Dimmitt, TX 79027	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Frontier Capital Group
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Callender MD, David L <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Physician/Executive		Employer (See Instructions) Memorial Hermann Health System

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/116 Rpt: 22/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cant, Steven <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77077	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 09/01/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00326595 ) Capital One Financial Corporation Associates Political Fund <hr/> Contributor address; City; State; Zip Code  McLean, VA 22102	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cardwell, Jr., James A. <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79912	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) Petro, Inc.
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carl Tepper for State Representative <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79493	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Dina <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/116 Rpt: 23/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carrier Law Group, P.C.	<b>7</b> Amount of Contribution (\$)  \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77701	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carroll, Katherine	Amount of Contribution (\$)  \$2,000.00
	Contributor address; City; State; Zip Code  Beaumont, TX 77713	
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carter, Bennett	Amount of Contribution (\$)  \$1,000.00
	Contributor address; City; State; Zip Code  Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Susser Bank
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Casselberry, Craig	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code  Austin, TX 78732-2460	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Quorum Public Affairs, Inc.
Date 10/05/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00084871 ) Celanese Corporation PAC	Amount of Contribution (\$)  \$7,000.00
	Contributor address; City; State; Zip Code  Irving, TX 75039	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/116 Rpt: 24/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chamblin, Patricia	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77706		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chandler, Bryan	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Nederland, TX 77627		
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) CHC
Date 09/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chapman, Jason	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  New Orleans, LA 70130		
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Entergy
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Charter Communications, Inc. Texas PAC	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chevron Phillips Chemical State PAC	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code  The Woodlands, TX 77380		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/116 Rpt: 25/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chick, Sade <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77707	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Corporate Affairs		<b>9</b> Employer (See Instructions) Port of Beaumont
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chimeno, Russell <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Choctaw Nation of Oklahoma <hr/> Contributor address; City; State; Zip Code  Durant, OK 74702	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, J. Rob <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Architect		Architectural Alliance Inc.
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, James <hr/> Contributor address; City; State; Zip Code  Galveston, TX 77550	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Director of Operations		Mosquito Cafe

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/116 Rpt: 26/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clement, Todd <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75287	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Clement Speer
<b>Date</b> 08/30/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Coats Rose, P.C. PAC <hr/> <b>Contributor address; City; State; Zip Code</b>  Houston, TX 77046	<b>Amount of Contribution (\$)</b>  \$10,000.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 10/09/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Coffin, Frank <hr/> <b>Contributor address; City; State; Zip Code</b>  Beaumont, TX 77706	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 10/23/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Coffin, Frank <hr/> <b>Contributor address; City; State; Zip Code</b>  Beaumont, TX 77706	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 09/07/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cokinos, Chris <hr/> <b>Contributor address; City; State; Zip Code</b>  Houston, TX 77005	<b>Amount of Contribution (\$)</b>  \$350.00
<b>Principal occupation / Job title (See Instructions)</b> Energy Trader		<b>Employer (See Instructions)</b> Cokinos Energy

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/116 Rpt: 27/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cokinos, Michael	<b>7</b> Amount of Contribution (\$) \$10,000.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77057		
<b>8</b> Principal occupation / Job title (See Instructions) President		<b>9</b> Employer (See Instructions) Cokinos Energy
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Darlene	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code  Beaumont, TX 77706		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Garnet	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  HOUSTON, TX 77004		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Comerica Inc. PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code  Dallas, TX 75201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Comerica Inc. PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code  Dallas, TX 75201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/116 Rpt: 28/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Conner, Matthew <hr/> <b>6</b> Contributor address; City; State; Zip Code  Cypress, TX 77433	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Conroe Professional Firefighters PAC <hr/> Contributor address; City; State; Zip Code  Conroe, TX 77305	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00041376 ) Constellation Energy Corporation PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20001	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00041376 ) Constellation Energy Corporation PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20001	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cook, Alan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78723	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/116 Rpt: 29/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cook-Nelson, Kimberly <hr/> <b>6</b> Contributor address; City; State; Zip Code  Madison, MS 39110	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cooper, Stephen <hr/> Contributor address; City; State; Zip Code  El Campo, TX 77437	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corona Sr., John <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Chairman/CEO		Employer (See Instructions) Associa
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corpus Christi Professional Fire Fighters Association Cope Fund <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78415	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) CovestroPAC A Political Action Committee of Covestro LLC <hr/> Contributor address; City; State; Zip Code  Pittsburgh, PA 15205	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/116 Rpt: 30/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cowart, Debbie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lumberton, TX 77657	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cox Jr., Joseph <hr/> Contributor address; City; State; Zip Code  Belton, TX 76513	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Craven, Mike <hr/> Contributor address; City; State; Zip Code  Texarkana, AR 71854	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Red River Lumber Co.
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Craver, Garrett <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crawford, III, Walter <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77702	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/116 Rpt: 31/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crawford, Walter <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77702	<b>7</b> Amount of Contribution (\$)  \$300.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Curbow, Kelly <hr/> Contributor address; City; State; Zip Code  San Marcos, TX 78666	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Govt' Relations Consultant		Employer (See Instructions) Self
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Curtis, Andy <hr/> Contributor address; City; State; Zip Code  Salado, TX 76571	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DEC PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77046	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daleo, Bernie <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Settlement Planner		Employer (See Instructions) Sage Settlement Planning

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/116 Rpt: 32/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daleo, Bernie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77706	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Settlement Planner		<b>9</b> Employer (See Instructions) Sage Settlement Consulting
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davies, Paul <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) The Cambria Group
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dawson, Eugene <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78230	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) Pape Dawson Engineers
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Deadrick, June <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Director GA		Employer (See Instructions)
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dedman Jr., Robert <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) DFI Management



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/116 Rpt: 33/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Del Bosque, Nora <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78731	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Self
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Delgado, Danielle <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Consultant/Lobbyist		Employer (See Instructions) Self
Date 11/30/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00211318 ) Deloitte PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20044	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00782292 ) DentaQuest PAC <hr/> Contributor address; City; State; Zip Code  Wellesley, MA 02481	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Denton, Frank <hr/> Contributor address; City; State; Zip Code  Conroe, TX 77304	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/116 Rpt: 34/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dewit, Harry <hr/> <b>6</b> Contributor address; City; State; Zip Code  Friona, TX 79035	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) High Plains Dairy LLC
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dick, IV, James A. <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79998	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) 
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diebel, Stephen <hr/> Contributor address; City; State; Zip Code  Victoria, TX 77904	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Diebel Cattle Company
Date 10/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dies, Martin <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dishman, Cindy <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/116 Rpt: 35/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dobbs, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tyler, TX 75707	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Dobbs and Porter
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donald N Morriss, LLC <hr/> Contributor address; City; State; Zip Code  Texarkana, TX 75503	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donalson, J. Alex <hr/> Contributor address; City; State; Zip Code  Lumberton, TX 77657	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions) Autodealer		Employer (See Instructions) Self
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doores, Scott <hr/> Contributor address; City; State; Zip Code  Copper Canyon, TX 75077	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Doores Aviation, LLC
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doornbos, Billy <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) C. Doornbos Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/116 Rpt: 36/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dorroh, Julia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Killeen, TX 76542	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dorsett Johnson, LLP <hr/> Contributor address; City; State; Zip Code  Austin, TX 78738	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dorsett Johnson, LLP <hr/> Contributor address; City; State; Zip Code  Austin, TX 78738	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doss, Justin <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Baptist Hospitals of Southeast Texas
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dow Inc. PAC <hr/> Contributor address; City; State; Zip Code  Midland, MI 48674	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/116 Rpt: 37/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duncan, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code  Horseshoe Bay, TX 78657	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dunning, Tom <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75201	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dykeman, Greg <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/01/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00523233</u> ) EDF Renewables, Inc. PAC <hr/> Contributor address; City; State; Zip Code  Portland, OR 97205	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Eastman PAC <hr/> Contributor address; City; State; Zip Code  Kingsport, TN 37662	Amount of Contribution (\$)  \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/116 Rpt: 38/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Edgar, Robert	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>6</b> Contributor address; City; State; Zip Code  Lumberton, TX 77657		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Edwards, D Kirk	Amount of Contribution (\$)  \$5,000.00
Contributor address; City; State; Zip Code  Odessa, TX 79765		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) MacLondon Energy
Date 08/24/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00197228 ) Elevance Health PAC	Amount of Contribution (\$)  \$25,000.00
Contributor address; City; State; Zip Code  Washington, DC 20004		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00082792 ) Eli Lilly & Company PAC	Amount of Contribution (\$)  \$5,000.00
Contributor address; City; State; Zip Code  Indianapolis, IN 46285		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Escudero, Edward	Amount of Contribution (\$)  \$750.00
Contributor address; City; State; Zip Code  El Paso, TX 79902		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) High Desert Capital

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/116 Rpt: 39/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Escudero, Edward <hr/> <b>6</b> Contributor address; City; State; Zip Code  El Paso, TX 79902	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Exxon Mobil Corporation PAC of Texas <hr/> Contributor address; City; State; Zip Code  Washington, DC 20037	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) FW Firefighters Committee for Responsible Gov. <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76107	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Faison, Jay <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28204	Amount of Contribution (\$)  \$20,000.00
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) ClearPath
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Farmer, Curtis <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Comerica Bank

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/116 Rpt: 40/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 07/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Faske, Sheila <hr/> <b>6</b> Contributor address; City; State; Zip Code  Vidor, TX 77662	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Accounts Manager		<b>9</b> Employer (See Instructions) American Office LLC
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Faske, Shiela <hr/> Contributor address; City; State; Zip Code  Vidor, TX 77662	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Faust, Tena <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Non-profit		Employer (See Instructions) Self
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Featherson, Brit <hr/> Contributor address; City; State; Zip Code  Lumberton, TX 77657	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fellbaum, Carl <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Touchstone Communities



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/116 Rpt: 41/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fernandez, Felipe <hr/> <b>6</b> Contributor address; City; State; Zip Code  Santa Fe, TX 77510	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Procurement		<b>9</b> Employer (See Instructions) INEOS US Chemical
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fernandez, Felipe <hr/> Contributor address; City; State; Zip Code  Santa Fe, TX 77510	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Procurement		Employer (See Instructions) INEOS US Chemical
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fernandez, Miguel <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79902	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Flo Networks
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fertitta, Joseph <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) TexJoy
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fields, Cynthia <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79912	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/116 Rpt: 42/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fisher, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77706	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Port Director & CEO		<b>9</b> Employer (See Instructions) Port of Beaumont
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fisher II, Joseph Jefferson <hr/> Contributor address; City; State; Zip Code  Lumberton, TX 77657	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Fisher Firm
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fontan, Kimberly <hr/> Contributor address; City; State; Zip Code  Mandeville, LA 70471	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Foster, Christopher <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) CenterPoint Energy
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Foster, Paul <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79901	Amount of Contribution (\$)  \$50,000.00
Principal occupation / Job title (See Instructions) President and CEO		Employer (See Instructions) Franklin Mountain Investments

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/116 Rpt: 43/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fox, Steve <hr/> <b>6</b> Contributor address; City; State; Zip Code  El Paso, TX 79922	<b>7</b> Amount of Contribution (\$)  \$10,000.00
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) Fox Auto Team
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Francis, L. Frederick <hr/> Contributor address; City; State; Zip Code  El Paso, TX 77902	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) West Star Bank
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Friedrichs, Edwin <hr/> Contributor address; City; State; Zip Code  Bellaire, TX 77401	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Friends of the Texas Tech University System PAC <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79409	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Friends of the University of Texas at Austin <hr/> Contributor address; City; State; Zip Code  Austin, TX 78763	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/116 Rpt: 44/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frisco Fire Fighters Committee for a Responsible Govt	<b>7</b> Amount of Contribution (\$) \$2,500.00
	<b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75034	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fuljenz, Michael	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Beaumont, TX 77706	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Universal Coin & Bullion
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) GHBA HOME-PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77064	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gallagher, Michael	Amount of Contribution (\$) \$20,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77098	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) The Gallagher Law Firm
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Galveston Firefighters PAC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code  Galveston, TX 77551	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 42/116 Rpt: 45/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garner, Jeremy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77024	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Real estate developer		<b>9</b> Employer (See Instructions) Trammell Crow Company
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gehring, Kerri <hr/> Contributor address; City; State; Zip Code  College Station, TX 77845	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gehring, Kerri <hr/> Contributor address; City; State; Zip Code  College Station, TX 77845	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Geysler, William <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gillispie, Billy <hr/> Contributor address; City; State; Zip Code  Stephenville, TX 76402	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 43/116 Rpt: 46/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Golovine, Ludmila <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77079	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) President & CEO		<b>9</b> Employer (See Instructions) MasterWord Services, Inc.
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gonzalez Public Affairs & Consulting <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gonzalez, Christina <hr/> Contributor address; City; State; Zip Code  Leander, TX 78641	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Government Affairs Manager		Employer (See Instructions) CenterPoint Energy
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goodman, III, Leonard A. <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79922	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, Patrick <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79912	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) GDJS PC		Employer (See Instructions) Attorney

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 44/116 Rpt: 47/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gottesman, Sandford L.	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grabowski, Theodore	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Cypress, TX 77429	
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Texas Brine Company LLC
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grace & McEwan Consulting LLC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grantham, Susan	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Beaumont, TX 77706	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Patricia	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Beaumont, TX 77705	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 45/116 Rpt: 48/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greenley, Steven <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77345	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Operations		<b>9</b> Employer (See Instructions) CenterPoint Energy
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Griffith, Carl <hr/> Contributor address; City; State; Zip Code  Winnie, TX 77665	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) CEO/President		Employer (See Instructions) Griffith, Moseley, Johnson & Associates
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gulf States Toyota Inc. State PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77077	Amount of Contribution (\$)  \$50,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HCA Texas Good Government Fund <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75240	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HOMEPAC of the Texas Assn. of Builders <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 46/116 Rpt: 49/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hahn, Harold W. <hr/> <b>6</b> Contributor address; City; State; Zip Code  El Paso, TX 79936	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Executive Chairman		<b>9</b> Employer (See Instructions) Rocky Mountain Mortgage
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haley, Anthony <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Govt Relations Consultant		Employer (See Instructions) HWK
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hall, Sheila <hr/> Contributor address; City; State; Zip Code  Groves, TX 77619	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Scendero Outfitters
Date 08/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hanna, Tycen <hr/> Contributor address; City; State; Zip Code  Weslaco, TX 78599	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Elite Real Estate Investments LLC
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hardin, Rocky <hr/> Contributor address; City; State; Zip Code  Georgetown, TX 78626	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) CEO/CFO		Employer (See Instructions) Embree Capital Markets

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 47/116 Rpt: 50/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harper, Woodrow <hr/> <b>6</b> Contributor address; City; State; Zip Code  Paris, TX 75460	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haschke, Justin <hr/> Contributor address; City; State; Zip Code  Stephenville, TX 76401	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) BY Wealth Management Group
Date 12/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hassenflu, Alan <hr/> Contributor address; City; State; Zip Code  Bellaire, TX 77401	Amount of Contribution (\$)  \$50,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Fidelis Realty Partners
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Health Care Service Corporation PAC - Texas <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60601	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Heeg, Peggy <hr/> Contributor address; City; State; Zip Code  Houston, TX 77008	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 48/116 Rpt: 51/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hefty, Alan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77706	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Heldenfels, Fred <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Chairman & CEO		Employer (See Instructions) Heldenfels Enterprises, inc.
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henderson, Elaine <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77726	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) 1st American Coin
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henderson, Elaine <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77726	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) 1st American Coin
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henderson, Vicky <hr/> Contributor address; City; State; Zip Code  Orange, TX 77632	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Executive Administration		Employer (See Instructions) Baptist Hospitals of Southeast Texas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 49/116 Rpt: 52/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henry, Ryan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79416	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henthorn, Chad <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79423	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Teinert Construction
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernandez, Daniel <hr/> Contributor address; City; State; Zip Code  Edinburg, TX 78539	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hernandez Law Firm
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hill, Marcus <hr/> Contributor address; City; State; Zip Code  Watauga, TX 76148	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions) Ag Workers Insurance
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HillCo PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$50,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 50/116 Rpt: 53/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobson, Lee	<b>7</b> Amount of Contribution (\$) \$5,000.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75219		
<b>8</b> Principal occupation / Job title (See Instructions) Investor		<b>9</b> Employer (See Instructions) Highside Capital Mgmt
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holland, Becky	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Beaumont, TX 77706		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) TDDC
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Ned S.	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Houston, TX 77007		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Holmes Investments
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopper, Sidney	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Lubbock, TX 79423		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Hollis	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code  Beaumont, TX 77706		
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions) State of Texas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 51/116 Rpt: 54/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Houseman, Gisela <hr/> <b>6</b> Contributor address; City; State; Zip Code  Orange, TX 77630	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Houston Apartment Association PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77041	Amount of Contribution (\$)  \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Houston Associated General Contractors PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77092	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hubbard, Sonja <hr/> Contributor address; City; State; Zip Code  Texarkana, TX 75503	Amount of Contribution (\$)  \$20,000.00
Principal occupation / Job title (See Instructions) Principal Owner		Employer (See Instructions) Yates Group
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huffines, James <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 52/116 Rpt: 55/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hughes, Carolyn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77085	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hughes Jr., Dan <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78212	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Dan A. Hughes Co
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Humphreys, John <hr/> Contributor address; City; State; Zip Code  Commerce, TX 75428	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Provost		Employer (See Instructions) Texas A&M Commerce
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hunt, Ray L. <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75201	Amount of Contribution (\$)  \$100,000.00
Principal occupation / Job title (See Instructions) Executive Chairman		Employer (See Instructions) Hunt Consolidated, Inc.
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hunt, Stacy <hr/> Contributor address; City; State; Zip Code  Houston, TX 77079	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 53/116 Rpt: 56/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hunt, Woody L.	<b>7</b> Amount of Contribution (\$) \$50,000.00
	<b>6</b> Contributor address; City; State; Zip Code  El Paso, TX 79913	
<b>8</b> Principal occupation / Job title (See Instructions) Sr. Chairman of the Board		<b>9</b> Employer (See Instructions) Hunt Companies, Inc.
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huntsman, Peter	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code  The Woodlands, TX 77382	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Huntsman Corporation
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hurley, James	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Stephenville, TX 76402	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) IAFF 399 Beaumont Political Action Committee	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code  Beaumont, TX 77701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Independent Bankers Association of Texas PAC	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code  Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 54/116 Rpt: 57/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) International Bank Of Commerce Committee for Improvement and <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78205	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Irving Fire Fighters PAC <hr/> Contributor address; City; State; Zip Code  Irving, TX 75017	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Isett, Carl <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79424	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Self
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jackson, Kaprina <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jaffe, Jr, Morris <hr/> Contributor address; City; State; Zip Code  Horseshoe Bay, TX 78657	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) JGI, LLC		Employer (See Instructions) Chairman

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 55/116 Rpt: 58/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Janicek, Chad <hr/> <b>6</b> Contributor address; City; State; Zip Code  Haslet, TX 76052	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Self
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Javed, Mohammad <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Starco Impex Inc
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jeanis, Cindy <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Job, Jennifer <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Senior Counsel		Employer (See Instructions) Exxon Mobil Corporation
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jobe, Stanley P. <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79928	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Jobe Concrete Products, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 56/116 Rpt: 59/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) John Lin Mccraw III, PC	<b>7</b> Amount of Contribution (\$) \$10,000.00
<b>6</b> Contributor address; City; State; Zip Code  McKinney, TX 75070		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, John	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code  Houston, TX 77007		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Silver Eagle Distributors
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Ronald	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code  Nederland, TX 77627		
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Architectural Alliance Inc.
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kastrin, Deborah	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code  El Paso, TX 79902		
Principal occupation / Job title (See Instructions) Steel fabrication		Employer (See Instructions) Kasco Structures LLC
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kaufman, Matthew	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Buna, TX 77612		
Principal occupation / Job title (See Instructions) Deputy Director		Employer (See Instructions) Sabine Neches Navigation District

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 57/116 Rpt: 60/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kays, Kelley <hr/> <b>6</b> Contributor address; City; State; Zip Code  Winnie, TX 77665	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Veterinarian		<b>9</b> Employer (See Instructions) Falconwood Vet
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Keller, Edward <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77720	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) President CEO		Employer (See Instructions) Beaumont Foundation
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kendrick, Jim <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75034	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) President & CEO		Employer (See Instructions) Community Hospital Corporation
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) King, Dustin <hr/> Contributor address; City; State; Zip Code  Killeen, TX 76542	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Estimator		Employer (See Instructions) C. Purser Holdings, LLC
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) King, Linda <hr/> Contributor address; City; State; Zip Code  Commerce, TX 75428	Amount of Contribution (\$)  \$1,250.00
Principal occupation / Job title (See Instructions) Chief of Staff		Employer (See Instructions) Texas A&M Commerce

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 58/116 Rpt: 61/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) King, Wendy	<b>7</b> Amount of Contribution (\$) \$500.00
<b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77009		
<b>8</b> Principal occupation / Job title (See Instructions) Vice President, Gulf Coast and Rockies		<b>9</b> Employer (See Instructions) ConocoPhillips
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Knight, Michael	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77070		
Principal occupation / Job title (See Instructions) Multifamily Real Estate		Employer (See Instructions) Better World Properties
Date 10/05/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00236489 ) Koch Industries, Inc. PAC (KOCHPAC)	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code  Wichita, KS 67220		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Korpai, Rakesh	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Silsbee, TX 77656		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kozmetsky, Aaron	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Dallas, TX 75219		
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) KMS Ventures

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 59/116 Rpt: 62/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 08/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LaMantia, Verna <hr/> <b>6</b> Contributor address; City; State; Zip Code  McAllen, TX 78501	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Partner		<b>9</b> Employer (See Instructions) LMF Distributors
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lamb, G. Cliff <hr/> Contributor address; City; State; Zip Code  College Station, TX 77845	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lanagan, Lindsay <hr/> Contributor address; City; State; Zip Code  Houston, TX 77009	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Legacy Community Health
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laredo Fire-PAC <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78041	Amount of Contribution (\$)  \$4,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Law Offices of Michael Guerra <hr/> Contributor address; City; State; Zip Code  McAllen, TX 78502	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 60/116 Rpt: 63/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ledwell, Steve <hr/> <b>6</b> Contributor address; City; State; Zip Code  Texarkana, TX 75501	<b>7</b> Amount of Contribution (\$)  \$20,000.00
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) Ledwell & Sons Enterprise
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ledwell Dukelow, Lesley <hr/> Contributor address; City; State; Zip Code  Texarkana, TX 75503	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Ledwell & Sons Enterprises
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lee, Stephen <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) First Financial Bank
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lewis, Richard <hr/> Contributor address; City; State; Zip Code  Nederland, TX 77627	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Linebarger Goggan Blair & Sampson, LLP <hr/> Contributor address; City; State; Zip Code  Austin, TX 78760	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 61/116 Rpt: 64/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Little, William ..... <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77725	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Livingston, Tina ..... Contributor address; City; State; Zip Code  Rockwall, TX 75087	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) Texas A&M Commerce
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lohse, Paula ..... Contributor address; City; State; Zip Code  Harker Heights, TX 76548	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lopez, Favio ..... Contributor address; City; State; Zip Code  Fairfax Station, VA 22039	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Trideum
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Love, Mike ..... Contributor address; City; State; Zip Code  Lufkin, TX 75901	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Mike Love & Associates, LLC



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 62/116 Rpt: 65/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lovo, Paula <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77706-4327	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lubbock Fire Fighters PAC Fund <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79464	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lyle, Bobby <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lyondell Chemical Company PAC <hr/> Contributor address; City; State; Zip Code  Houston, TX 77010	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Robert D. <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75201	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Locke Lord LLP

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 63/116 Rpt: 66/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mabry, Milam <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78731	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Mabry Public Affairs
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maibach investments LP <hr/> Contributor address; City; State; Zip Code  Arlington, TX 76001	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Malcolmson, Ken <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) North Dallas Chamber
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maloney, Donald <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Coburn Supply Co
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Manning, Sam <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Money Manager		Employer (See Instructions) Blagden Fund

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 64/116 Rpt: 67/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marsh, Andrew <hr/> <b>6</b> Contributor address; City; State; Zip Code  New Orleans, LA 70118	<b>7</b> Amount of Contribution (\$)  \$1,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Chairman & CEO		<b>9</b> Employer (See Instructions) Entergy
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martin Walker, P.C. <hr/> Contributor address; City; State; Zip Code  Tyler, TX 75702	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mason, Becky <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Matthews, Charles <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Matthews, Jack <hr/> Contributor address; City; State; Zip Code  Argyle, TX 76226	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Matthews Southwest

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 65/116 Rpt: 68/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) May, Phillip <hr/> <b>6</b> Contributor address; City; State; Zip Code  New Orleans, LA 70115	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mayfield, A. Dwain <hr/> Contributor address; City; State; Zip Code  Dublin, TX 76446	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Mayfield Farm
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McAllen Firefighters for Responsible Government <hr/> Contributor address; City; State; Zip Code  McAllen, TX 78501	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCabe, Roger <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) MeHaffy Weber
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McClendon, Mont <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79416	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) McDougal Companies

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 66/116 Rpt: 69/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCulloch, Buddy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Texarkana, TX 75503	<b>7</b> Amount of Contribution (\$)  \$10,000.00
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) Wholesale Electric Supply
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McFadden, Michael <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McGuire, Mike <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205	Amount of Contribution (\$)  \$15,000.00
Principal occupation / Job title (See Instructions) President & CEO		Employer (See Instructions) Andrews Distributing
Date 10/05/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00225342</u> ) McGuireWoods Federal PAC <hr/> Contributor address; City; State; Zip Code  Richmond, VA 23219	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/10/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00225342</u> ) McGuireWoods Federal PAC Fund <hr/> Contributor address; City; State; Zip Code  Richmond, VA 23219	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 67/116 Rpt: 70/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/24/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McKenzie, Mark <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76132	<b>7</b> Amount of Contribution (\$)  \$2,000.00
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) Focused Post Acute Care Partners
<b>Date</b> 11/30/2023	<b>Full name of contributor</b> <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00108035</u> ) McKesson Corporation Employee PAC <hr/> <b>Contributor address; City; State; Zip Code</b>  Washington, DC 20004	<b>Amount of Contribution (\$)</b>  \$5,000.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 11/09/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Meadows, Eric <hr/> <b>Contributor address; City; State; Zip Code</b>  Beaumont, TX 77707	<b>Amount of Contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/28/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Metropolitan Anesthesia Consultants, LLP PAC <hr/> <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75219	<b>Amount of Contribution (\$)</b>  \$5,000.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 11/09/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mihalopoulos, Frank <hr/> <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75205	<b>Amount of Contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b> Real Estate		<b>Employer (See Instructions)</b> Corinth Properties

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 68/116 Rpt: 71/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Tami <hr/> <b>6</b> Contributor address; City; State; Zip Code  Manvel, TX 77578	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Director of Govt Policy		<b>9</b> Employer (See Instructions) CenterPoint Energy
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mission Fire Fighters Committee for Responsible Government <hr/> Contributor address; City; State; Zip Code  Mission, TX 78572	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mitchell, James <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225-2707	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Self
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mitchell, Teddy <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79424	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Chancellor		Employer (See Instructions) State of Texas
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moak Casey PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 69/116 Rpt: 72/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Modica, J.C.	<b>7</b> Amount of Contribution (\$) \$1,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77702	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00430256 ) Molina Healthcare, Inc. PAC	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code  Long Beach, CA 90802	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Monroe, Sam	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Port Arthur, TX 77642	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Montford, John	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code  San Antonio, TX 78257	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) JTM Consulting LLC
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moran, Carla	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79416	
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Ramar Communications



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 70/116 Rpt: 73/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mun, James <hr/> <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75023	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Traub
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Munoz, Lindsay <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Whitmire & Munoz LLC
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Myers, Dan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Myers, Michael <hr/> Contributor address; City; State; Zip Code  Aledo, TX 76008	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Adjuster		Employer (See Instructions) Independent Adjuster
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) NRG Entergy Inc PAC <hr/> Contributor address; City; State; Zip Code  Princeton, NJ 78540	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 71/116 Rpt: 74/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nau III, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77219	<b>7</b> Amount of Contribution (\$) \$50,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Chairman & CEO		<b>9</b> Employer (See Instructions) Silver Eagle Distributors
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Neal, Thomas <hr/> Contributor address; City; State; Zip Code  Groves, TX 77619	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Museum if the Gulf aCoasrn
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nelson, Eric <hr/> Contributor address; City; State; Zip Code  Arlington, TX 76017	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Self Employed
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nettles, David A <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Property Tax Consultant		Employer (See Instructions) Nettles & Co Property Tax Consulting
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Norgeot, Marie <hr/> Contributor address; City; State; Zip Code  Magnolia, TX 77354	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 72/116 Rpt: 75/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Norris, Gina <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75219	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Investment Manager		<b>9</b> Employer (See Instructions) Matthews Southwest
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nye, Erle <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75225	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) EN Consulting
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ONE Gas, Inc. PAC <hr/> Contributor address; City; State; Zip Code  Tulsa, OK 74103	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oden, Stephen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78716	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) OHT Partners
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Offices of Marc A. Rodriguez <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 73/116 Rpt: 76/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Offices of Marc A. Rodriguez <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$10,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ogle School Management, LLC <hr/> Contributor address; City; State; Zip Code  Arlington, TX 76013	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Olson, David <hr/> Contributor address; City; State; Zip Code  Bridge City, TX 77611	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Self
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) One World Strategy Group <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Operator's Pol. Ed. & Recruitment Awareness Towards Elections <hr/> Contributor address; City; State; Zip Code  Mont Belvieu, TX 77580	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 74/116 Rpt: 77/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Orbetuck PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77704	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Oscar J. Currie MD PLLC <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Owens, Bart <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions) Energy Consultant		Employer (See Instructions) Self
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) PAC of Winstead PC <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75201	Amount of Contribution (\$)  \$15,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pack, Sam H. <hr/> Contributor address; City; State; Zip Code  Carrollton, TX 75011	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 75/116 Rpt: 78/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parigi Jr, Sam C <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77702	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Broker		<b>9</b> Employer (See Instructions) Self Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parker, Carl <hr/> Contributor address; City; State; Zip Code  Port Arthur, TX 77642	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parkinson, Thomas <hr/> Contributor address; City; State; Zip Code  San antonio, TX 78217	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pate, Robert <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77708	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Executive Mgmt		Employer (See Instructions) Pate Industrial
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patel, Ashwin <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 76/116 Rpt: 79/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patel, Keval	<b>7</b> Amount of Contribution (\$) \$250.00
<b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77707		
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Patel Law
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patterson, Cary	Amount of Contribution (\$) \$20,000.00
Contributor address; City; State; Zip Code  Texarkana, TX 75503		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nix Patterson
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patterson, Chad	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code  Texarkana, TX 75503		
Principal occupation / Job title (See Instructions) Owner/Dentist		Employer (See Instructions) Patterson Dental Clinic
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patterson, Ty	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code  Texarkana, TX 75503		
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Orr Patterson Autogroup
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patterson III, William	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code  Texarkana, TX 75503		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Patterson One Wholesale LLC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 77/116 Rpt: 80/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paxson, Kurt <hr/> <b>6</b> Contributor address; City; State; Zip Code  El Paso, TX 79912	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) Mounce Green Myers
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Payne, James <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Provost Umphrey Law Firm
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pearlman, Trevor <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75220	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Venture Capital		Employer (See Instructions) Tregan Partners
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pena, Emil <hr/> Contributor address; City; State; Zip Code  Houston, TX 77056	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Global Energy Safety Institute
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pena, Emilio <hr/> Contributor address; City; State; Zip Code  Pearland, TX 77056	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 78/116 Rpt: 81/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perdue, Jim <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77056	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Self
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perot Jr., Ross <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219	Amount of Contribution (\$)  \$50,000.00
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) The Perot Group
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petersen, Linda <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petkovsek, Heather <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Advocacy		Employer (See Instructions) Self
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Petkovsek, Mark <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 79/116 Rpt: 82/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pflugerville Firefighters PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Pflugerville, TX 78694	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pfyza Entities, LLC <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phelan, James <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77702	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Phelan Hearing Center
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phelan, John <hr/> Contributor address; City; State; Zip Code  Lynchburg, SC 29080	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Argagh Group
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pierce, Vernon <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 80/116 Rpt: 83/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/05/2023	<b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00686287 ) Plains All American GP LLC PAC - Texas <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Plank, Michael J <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Chairman & CEO		Employer (See Instructions) The Plank Companies
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Plano Firefighters Committee for EG Local State PAC <hr/> Contributor address; City; State; Zip Code  Plano, TX 75074	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pontikes, George <hr/> Contributor address; City; State; Zip Code  Houston, TX 77079	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Satterfield & Pontikes
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Popolo, Joe <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219	Amount of Contribution (\$)  \$25,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Charles & Potomac Capital, LLC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 81/116 Rpt: 84/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Populus Financial Group Inc. Texas PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Irving, TX 75062	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Porras, Gary <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79912	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pruet, William <hr/> Contributor address; City; State; Zip Code  Texarkana, TX 75503	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Pruet Timber
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Quinn, Matthew <hr/> Contributor address; City; State; Zip Code  Lumberton, TX 77657	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) RS&H PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759	Amount of Contribution (\$)  \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 82/116 Rpt: 85/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rabin, Stanley <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75230	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsay, Ellen <hr/> Contributor address; City; State; Zip Code  Midland, TX 79707	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Ramsay Petroleum
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramzel, Julie & Andy <hr/> Contributor address; City; State; Zip Code  The Woodlands, TX 77380	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ray, Harvey <hr/> Contributor address; City; State; Zip Code  Horseshoe Bay, TX 78657	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) LCRA
Date 09/18/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00035683 ) Raytheon Technologies Corporation PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20004	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 83/116 Rpt: 86/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reagan, William K.	<b>7</b> Amount of Contribution (\$) \$5,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Salt Lake City, UT 84116	
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) The Reagan Companies
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reese, Randall	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code  Beaumont, TX 77706	
Principal occupation / Job title (See Instructions) Executive CEO		Employer (See Instructions) Sabine Neches Navigation District
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reger, Gary	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77019	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Reger Law Firm
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reisman, Lonn	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Stephenville, TX 76401	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Renteria, Antonio	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79413	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 84/116 Rpt: 87/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Richmond, Clyde <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77706	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ricky Rod Law Group PLLC <hr/> Contributor address; City; State; Zip Code  Edinburg, TX 78539	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Riojas III, Gilbert <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78412	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rivero, Hector <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions) President/CEO		Employer (See Instructions) Texas Chemical Council
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robertson, Jared <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79415	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 85/116 Rpt: 88/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robichau, Rodney	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77703		
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) R&P Employer Solutions
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robison, J. Kirk	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code  El Paso, TX 79902		
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Pizza Properties Inc
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rodriguez, Deanna	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  New Orleans, LA 70130		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roebuck, Mike	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code  Nederland, TX 77627		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Echo Group
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Routh, Todd	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code  Austin, TX 78733		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 86/116 Rpt: 89/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rowling, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75219	<b>7</b> Amount of Contribution (\$)  \$50,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Founder		<b>9</b> Employer (See Instructions) TRT Holdings
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rubin, Gerald <hr/> Contributor address; City; State; Zip Code  El Paso, TX 79912	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rudin, Mark <hr/> Contributor address; City; State; Zip Code  Commerce, TX 75428	Amount of Contribution (\$)  \$3,000.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Texas A&M Commerce
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rulfs, Marnie <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75205	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Policy Consultant		Employer (See Instructions) Self
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Russell, James <hr/> Contributor address; City; State; Zip Code  Texarkana, TX 75503	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Sr VP		Employer (See Instructions) The Arnold Companies

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 87/116 Rpt: 90/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ryan, Jason <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77021	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions) attorney		<b>9</b> Employer (See Instructions) CenterPoint Energy
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) SRR Ranches LLC <hr/> Contributor address; City; State; Zip Code  Galveston, TX 77552	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Saba, Jeremy <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77726	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Senior VP -- Wealth Management		Employer (See Instructions) UBS Financial Services
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sabine Pilots (PAC) <hr/> Contributor address; City; State; Zip Code  Port Arthur, TX 77640	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sabine Pilots (PAC) <hr/> Contributor address; City; State; Zip Code  Port Arthur, TX 77706	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 88/116 Rpt: 91/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 08/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Salinas III, JD <hr/> <b>6</b> Contributor address; City; State; Zip Code  McAllen, TX 78501	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) VP External and Legislative Affairs		<b>9</b> Employer (See Instructions) AT&T
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanders, Joshua <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Government Affairs		Employer (See Instructions) Joshua Sanders LLC
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Savell, Jeffrey <hr/> Contributor address; City; State; Zip Code  College Station, TX 77845	Amount of Contribution (\$)  \$1,650.00
Principal occupation / Job title (See Instructions) Vice Chancellor & Dean Ag Life Sciences		Employer (See Instructions) Texas A&M University
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schaeffer, David <hr/> Contributor address; City; State; Zip Code  Dimmitt, TX 79027	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Buffalo Council
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schaeffer, Jerry <hr/> Contributor address; City; State; Zip Code  Happy, TX 79042	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions) Coach		Employer (See Instructions) West Texas A&M University

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 89/116 Rpt: 92/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schaeffer, Stanley <hr/> <b>6</b> Contributor address; City; State; Zip Code  Amarillo, TX 79119	<b>7</b> Amount of Contribution (\$)  \$2,000.00
<b>8</b> Principal occupation / Job title (See Instructions) CPA		<b>9</b> Employer (See Instructions) Alliance Financial Group
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schatte, Andrew <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Stonehenge Holdings
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schulgen, Seth <hr/> Contributor address; City; State; Zip Code  Katy, TX 77494	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Williams Brothers Construction Company
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scoggin, Ann <hr/> Contributor address; City; State; Zip Code  Lumberton, TX 77657	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Scott, James <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Trans-Global Solutions

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 90/116 Rpt: 93/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seger, Andrew <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79416	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seidel, Vic <hr/> Contributor address; City; State; Zip Code  College Station, TX 77845	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sharp, John <hr/> Contributor address; City; State; Zip Code  College Station, TX 77840	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Chancellor		Employer (See Instructions) TAMU
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shaver, Don <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) BD Advisors LLC
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shaw, Mike <hr/> Contributor address; City; State; Zip Code  Denver, CO 80206	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Mike Shaw Automotive

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 91/116 Rpt: 94/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shelby, Aaron <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75225	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Banking		<b>9</b> Employer (See Instructions) Prosperity Bank
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sheridan, Andrea <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Deputy to President for Government Affairs and Initiatives		Employer (See Instructions) University of Texas
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherlock, Pat <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sherwin, Gene <hr/> Contributor address; City; State; Zip Code  Stephenville, TX 76401	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shovanec, Lawrence <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79410	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 92/116 Rpt: 95/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 08/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Siembra Y Cosecha LLC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Weslaco, TX 78599	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simmons, Lea <hr/> Contributor address; City; State; Zip Code  Sugar Land, TX 77498	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Candidate for HD 76		Employer (See Instructions) Self-employed
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sims, Allen <hr/> Contributor address; City; State; Zip Code  Port Neches, TX 77651	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Skaggs, Chris <hr/> Contributor address; City; State; Zip Code  Bryan, TX 77805	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Skaggs, Jason <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76132	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Texas Southwestern Cattle Raisers Association

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 93/116 Rpt: 96/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Skov, Robert Scott ..... <b>6</b> Contributor address; City; State; Zip Code  Fabens, TX 79838	<b>7</b> Amount of Contribution (\$)  \$7,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Farmer		<b>9</b> Employer (See Instructions) SK2 Farms, LLC
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Slack, Michael ..... Contributor address; City; State; Zip Code  Austin, TX 78746	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Slack Davis Sanger
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Alan ..... Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Rockcliff Energy
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Loyd ..... Contributor address; City; State; Zip Code  Texarkana, TX 75503	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Mitchell ..... Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Germer PLLC



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 94/116 Rpt: 97/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Southwest Airlines Co. Freedom Fund <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75235	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spamer, Joaquin <hr/> Contributor address; City; State; Zip Code  McAllen, TX 78503	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Ci Logistics LLC
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sparrow, Shawn <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spence, Logan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Hance Scarborough
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Srinanthakumar, Dr. Saku <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Internist		Employer (See Instructions) S. Srinanthakumar MDPA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 95/116 Rpt: 98/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stanis, Grant <hr/> <b>6</b> Contributor address; City; State; Zip Code  West Lake Hills, TX 78746	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) Unemployed
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stark, William <hr/> Contributor address; City; State; Zip Code  Kirbyville, TX 75956	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stedman, Stuart <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) President/Investor		Employer (See Instructions) Stedman West Interests
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Steel Painters LLC <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77720	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Steinhagen, Roy <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77720	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 96/116 Rpt: 99/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stepp, Ronald <hr/> <b>6</b> Contributor address; City; State; Zip Code  Harker Heights, TX 76548	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stern, Andy <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75248	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) Club Oaks Consulting
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stinnett, Riley <hr/> Contributor address; City; State; Zip Code  Austin, TX 78737	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Management		Employer (See Instructions) CenterPoint Energy
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stovall, Scott <hr/> Contributor address; City; State; Zip Code  Troup, TX 75789	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) SDS Petroleum Consultants
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Subhani, Abdul <hr/> Contributor address; City; State; Zip Code  Harker Heights, TX 76548	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) President/CEO		Employer (See Instructions) Centex Technologies

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 97/116 Rpt: 100/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sullivan, Mary	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75229		
<b>8</b> Principal occupation / Job title (See Instructions) CFO		<b>9</b> Employer (See Instructions) Sasser Holdings
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sullivan, Van	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code  Huntsville, AL 35806		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Trideum Corp
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Swinbank, Joseph	Amount of Contribution (\$)  \$10,000.00
Contributor address; City; State; Zip Code  Houston, TX 77043		
Principal occupation / Job title (See Instructions) Owner/CEO		Employer (See Instructions) Sprint Companies
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Swinford, Amy	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code  College Station, TX 77845		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/01/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00361758 ) T-Mobile US, Inc. PAC	Amount of Contribution (\$)  \$2,500.00
Contributor address; City; State; Zip Code  Washington, DC 20004		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 98/116 Rpt: 101/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) TREPAC/Texas Association of Realtors PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78768	<b>7</b> Amount of Contribution (\$) \$25,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tanus, Abraham <hr/> Contributor address; City; State; Zip Code  Weslaco, TX 78599	Amount of Contribution (\$) \$7,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Mountain Side Investments
Date 09/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Telleen, Sam <hr/> Contributor address; City; State; Zip Code  Houston, TX 77009	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Just Energy
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Terrell, Adam <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77704	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) B. Terrell Attorney at Law
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texans for Responsible Government <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$) \$100,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 99/116 Rpt: 102/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Apartment Association <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Association of Benefits Administrators PAC <hr/> Contributor address; City; State; Zip Code  Plano, TX 75093	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/02/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00353144 ) Texas Association of Health Underwriters PAC <hr/> Contributor address; City; State; Zip Code  Cranford, NJ 07076	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Building Branch AGC PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Chemical Council/Assn. Of Chemical Industry Of TX Free <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 100/116 Rpt: 103/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Chemical Council/Assn. Of Chemical Industry Of TX Free	<b>7</b> Amount of Contribution (\$) \$5,000.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Court Reporters Association Funds Available for Involved	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Athens, TX 75751		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Deer Association PAC	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code  Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Farm Bureau AGFUND	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code  Waco, TX 76702		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Lobby Partners LLC	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 101/116 Rpt: 104/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Medical Association PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Oil and Gas Association Good Government Committee <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Society Of Anesthesiologists PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Society of Certified Public Accountants <hr/> Contributor address; City; State; Zip Code  Houston, TX 75023	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Sport PAC <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 102/116 Rpt: 105/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Star Alliance <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77019	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas State Association of Firefighters Action Committee <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Veterinary Medical Assn. PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78754	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00123612</u> ) Textron Inc. PAC <hr/> Contributor address; City; State; Zip Code  Providence, RI 02903-2525	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/30/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00142711</u> ) The Boeing Company PAC <hr/> Contributor address; City; State; Zip Code  Arlington, VA 22202	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 103/116 Rpt: 106/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) The Law Offices of Steve Ortega, PLLC	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>6</b> Contributor address; City; State; Zip Code  El Paso, TX 79901		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) The Margo Living Trust	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  El Paso, TX 79922		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) The Texas State University System PAC	Amount of Contribution (\$) \$20,000.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00339655</u> ) The US Oncology Network PAC	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code  The Woodlands, TX 77380		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00040394</u> ) The Williams Companies, Inc. PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Tulsa, OK 74172		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 104/116 Rpt: 107/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas Jr., Clifton L.	<b>7</b> Amount of Contribution (\$) \$10,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Victoria, TX 77902	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) C.L. Thomas, Inc.
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thurber, Todd	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Bellaire, TX 77401	
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) LJA Engineering, Inc.
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Timmerman, Timothy	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code  Hutto, TX 78634	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tomblin, Kelly	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  El Paso, TX 79912	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Toon, Tracy	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  Beaumont, TX 77706	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 105/116 Rpt: 108/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torn, Roland S.	<b>7</b> Amount of Contribution (\$) \$2,500.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77024	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) CampOTX
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Gerard	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77023	
Principal occupation / Job title (See Instructions) Director, Government Affairs		Employer (See Instructions) CenterPoint Energy
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Troutman, Gary	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Orange, TX 77630	
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) Baptist Hospitals of Southeast Texas
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tucker, Brad	Amount of Contribution (\$) \$25,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77056	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Mustang Cat
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tucker, William	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  League City, TX 77573	
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Ohmstede Industrial Services

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 106/116 Rpt: 109/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Turner Industries Group LLC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Baton Rouge, LA 70809	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tutunjian, Brad <hr/> Contributor address; City; State; Zip Code  Houston, TX 77018	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) CenterPoint Energy
Date 12/01/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00169821 ) Tyson Foods inc. PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20004	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Union Pacific Corporation Fund for Effective Govt <hr/> Contributor address; City; State; Zip Code  Washington, DC 20004	Amount of Contribution (\$)  \$7,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) United Supermarkets PAC <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79493	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 107/116 Rpt: 110/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/30/2023	<b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00274431 ) UnitedHealth Group Inc PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20004	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Urrabazo, John <hr/> Contributor address; City; State; Zip Code  Austin, TX 78739	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Valach, Ken <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Crow Holdings Development
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Valentine, Sidney <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77707	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Valero Energy Corporation PAC <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78269	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 108/116 Rpt: 111/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Valero Energy Corporation PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78269	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vaswani, Priya <hr/> Contributor address; City; State; Zip Code  Laredo, TX 78041	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Senior Manager		Employer (See Instructions) Abacus Financial Services
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vaughn, Jr, John <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vaughn, Tom <hr/> Contributor address; City; State; Zip Code  Bellaire, TX 77401	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Builder		Employer (See Instructions) Vaughn
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Viamontes, Eliecer <hr/> Contributor address; City; State; Zip Code  Miramar, FL 33027	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Viator, Mark <hr/> <b>6</b> Contributor address; City; State; Zip Code  Beaumont, TX 77706	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Villery, Sean <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77701	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vise, Mark <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vistra Employee PAC of Vistra Corp <hr/> Contributor address; City; State; Zip Code  Irving, TX 75039	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00093054 ) Wal-mart Inc PAC for Responsible Government (WALPAC) <hr/> Contributor address; City; State; Zip Code  Bentonville, AK 72716	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 110/116 Rpt: 113/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/11/2023	<b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00160770 ) Walgreen Co PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20005	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walker, David <hr/> Contributor address; City; State; Zip Code  Arlington, TX 76017	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Consolidated traffic Controls, inc.
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wall, Keith <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Director of Regulatory Affairs		Employer (See Instructions) CenterPoint Energy
Date 08/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, Donald <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Focused Solutions, LLC
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Watkins, Mario <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75235	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 111/116 Rpt: 114/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Watkins, Nathan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Carriere, MS 39426	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Watts, Mikal <hr/> Contributor address; City; State; Zip Code  Doeaso 646 Puerto Rico	Amount of Contribution (\$)  \$25,000.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Watts Guerra
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Way, Michael <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77705	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Webster, Jason <hr/> Contributor address; City; State; Zip Code  Houston, TX 77036	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weekley, Richard <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Weekley Properties

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 112/116 Rpt: 115/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weitzman, Herbert <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75201	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate		<b>9</b> Employer (See Instructions) Weitzman
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weller, Green, Toups & Terrell, LLP <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77704	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wells, Jason <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) CenterPoint Energy
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wheeler, R. Scott <hr/> Contributor address; City; State; Zip Code  Addison, TX 75001	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) White, James <hr/> Contributor address; City; State; Zip Code  Woodville, TX 75979	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Executive Mgmt		Employer (See Instructions) State of Texas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 113/116 Rpt: 116/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whitley, Gregory <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Self
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whitten, Todd <hr/> Contributor address; City; State; Zip Code  Stephenville, TX 76401	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wholesale Beer Distributors of Texas PAC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$15,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Willard, David <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77701	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Joe <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) insurance consultant		Employer (See Instructions) Pozmantier, Williams & Stone Ins Consulting Services, LLC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 114/116 Rpt: 117/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, John Eddie ..... <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77017	<b>7</b> Amount of Contribution (\$)  \$10,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer/Managing Partner		<b>9</b> Employer (See Instructions) Williams Hart & Bounas
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Mark ..... Contributor address; City; State; Zip Code  Austin, TX 78756	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Thomas ..... Contributor address; City; State; Zip Code  Navasota, TX 77868	Amount of Contribution (\$)  \$25,000.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Williams Public Affairs
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wolfe, Tracey ..... Contributor address; City; State; Zip Code  Terrell, TX 75160	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Mel ..... Contributor address; City; State; Zip Code  Beaumont, TX 77706	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Pres		Employer (See Instructions) Wright's Scrap & Recycling

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 115/116 Rpt: 118/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wysong, Margaret <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75225	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yantis, Jr., Mike <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78231	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) President/CEO		Employer (See Instructions) Yantis Land
Date 12/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yarbrough, Jace <hr/> Contributor address; City; State; Zip Code  Cedar Hill, TX 75104	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) SL LW Firm
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Young, Brandon <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76147	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yowell Anderson, Sherrie <hr/> Contributor address; City; State; Zip Code  Austin, TX 78749	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 116/116 Rpt: 119/366
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yowell Farley, Debbie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Killeen, TX 76542	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zacek, John <hr/> Contributor address; City; State; Zip Code  Inez, TX 77968	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zachry, John B. <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78224	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Zachry Group
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zena for Sheriff <hr/> Contributor address; City; State; Zip Code  Beaumont, TX 77701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/7 Rpt: 120/366	
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
<b>5</b> Date 10/28/2023	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A&M PAC	<b>8</b> Amount of contribution (\$) \$2,647.40	<b>9</b> In-kind contribution description Event food and beverage
<b>7</b> Contributor address; City; State; Zip Code  Austin, TX 78701		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Republicans of Texas Campaign Fund	Amount of contribution (\$) \$2,424.25	In-kind contribution description Campaign digital advertising
Contributor address; City; State; Zip Code  Austin, TX 78701		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
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)			
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Republicans of Texas Campaign Fund	Amount of contribution (\$) \$1,000.00	In-kind contribution description Campaign digital advertising
Contributor address; City; State; Zip Code  Austin, TX 78701		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
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)			



# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 2/7 Rpt: 121/366	
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 09/27/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CenterPoint Energy Political Action Committee (CNP PAC)	8 Amount of contribution (\$) \$636.26	9 In-kind contribution description Fundraising lunch event at CenterPoint Energy in Houston, TX
	7 Contributor address; City; State; Zip Code  Houston, TX 77210	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
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 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daleo, Bernie	Amount of contribution (\$) \$1,142.04	In-kind contribution description Fundraising reception expenses
	Contributor address; City; State; Zip Code  Beaumont, TX 77706	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Settlement Planner		Employer (FOR NON-JUDICIAL) (See instructions) Sage Settlement Consulting	
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)			
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dustin R. Burrows Campaign	Amount of contribution (\$) \$2,348.00	In-kind contribution description Food and beverage expense for campaign event
	Contributor address; City; State; Zip Code  Lubbock, TX 79408	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
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)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 3/7 Rpt: 122/366	
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/06/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Jim	8 Amount of contribution (\$) \$4,533.04	9 In-kind contribution description Catering for campaign fundraising event
	7 Contributor address; City; State; Zip Code  Dallas, TX 75205		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See instructions) Retired	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Carl (The Honorable)	Amount of contribution (\$) \$3,277.77	In-kind contribution description Equipment and catering expenses for campaign event
	Contributor address; City; State; Zip Code  Winnie, TX 77665		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CEO/President		Employer (FOR NON-JUDICIAL) (See instructions) Griffith, Moseley, Johnson & Associates	
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)			
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillco PAC	Amount of contribution (\$) \$3,355.52	In-kind contribution description Fundraising reception expenses
	Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
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)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 4/7 Rpt: 123/366	
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
<b>5</b> Date 12/06/2023	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houghton, Ted	<b>8</b> Amount of contribution (\$) \$3,100.00	<b>9</b> In-kind contribution description Food and beverage cost for event
	<b>7</b> Contributor address; City; State; Zip Code  El Paso, TX 79902		
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) President		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) Houghton Financial	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<b>Date</b> 09/26/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Cary	<b>Amount of contribution (\$)</b> \$15,295.00	<b>In-kind contribution description</b> Flight services for campaign fundraiser
	<b>Contributor address; City; State; Zip Code</b>  Texarkana, TX 75503		
<b>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</b> Attorney		<b>Employer (FOR NON-JUDICIAL) (See instructions)</b> Nix Patterson	
<b>Contributor's principal occupation (FOR JUDICIAL)</b>		<b>Contributor's job title (FOR JUDICIAL) (See instructions)</b>	
<b>Contributor's employer/law firm (FOR JUDICIAL)</b>		<b>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</b>	
<b>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</b>			
<b>Date</b> 09/20/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Pontikes, George	<b>Amount of contribution (\$)</b> \$750.00	<b>In-kind contribution description</b> Food and beverage cost for event
	<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77056		
<b>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</b> CEO		<b>Employer (FOR NON-JUDICIAL) (See instructions)</b> Satterfield & Pontikes Construction	
<b>Contributor's principal occupation (FOR JUDICIAL)</b>		<b>Contributor's job title (FOR JUDICIAL) (See instructions)</b>	
<b>Contributor's employer/law firm (FOR JUDICIAL)</b>		<b>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</b>	
<b>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</b>			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 5/7 Rpt: 124/366	
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/04/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, William	8 Amount of contribution (\$) \$4,072.52	9 In-kind contribution description Plane and flight expenses for campaign travel
	7 Contributor address; City; State; Zip Code  Beaumont, TX 77705		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CEO		11 Employer (FOR NON-JUDICIAL) (See instructions) Transglobal Solutions	
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 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, William	Amount of contribution (\$) \$5,190.22	In-kind contribution description Plane and flight expenses for campaign travel
	Contributor address; City; State; Zip Code  Beaumont, TX 77705		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CEO		Employer (FOR NON-JUDICIAL) (See instructions) Transglobal Solutions	
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)			
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, William	Amount of contribution (\$) \$2,074.28	In-kind contribution description Plane and flight expenses for campaign travel
	Contributor address; City; State; Zip Code  Beaumont, TX 77705		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CEO		Employer (FOR NON-JUDICIAL) (See instructions) Transglobal Solutions	
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)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 6/7 Rpt: 125/366	
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 07/10/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, William	8 Amount of contribution (\$) \$3,454.82	9 In-kind contribution description Campaign fundraiser luncheon
	7 Contributor address; City; State; Zip Code  Beaumont, TX 77705		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CEO		11 Employer (FOR NON-JUDICIAL) (See instructions) Transglobal Solutions	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, William	Amount of contribution (\$) \$1,944.70	In-kind contribution description Plane and flight expenses for campaign travel
	Contributor address; City; State; Zip Code  Beaumont, TX 77705		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CEO		Employer (FOR NON-JUDICIAL) (See instructions) Transglobal Solutions	
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)			
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stiles, Mark	Amount of contribution (\$) \$2,898.00	In-kind contribution description Food and beverage cost for event
	Contributor address; City; State; Zip Code  Beaumont, TX 77706		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Owner		Employer (FOR NON-JUDICIAL) (See instructions) Stiles Land & Cattle	
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)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 7/7 Rpt: 126/366	
<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00062288	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
<b>5</b> Date 12/04/2023	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susser, Sam L.	<b>8</b> Amount of contribution (\$) \$8,644.46	<b>9</b> In-kind contribution description Fundraising reception expenses
	<b>7</b> Contributor address; City; State; Zip Code  Dallas, TX 75220	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Chairman/CEO		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) Susser Bank	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 07/14/2023	<b>5</b> Payee name AT&T Mobility	
<b>6</b> Amount (\$) \$74.62	<b>7</b> Payee address; City; State; Zip Code PO Box 537104  Atlanta, GA 30353	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 07/03/2023	Payee name AT&T Mobility	
Amount (\$) \$81.65	Payee address; City; State; Zip Code PO Box 537104  Atlanta, GA 30353	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 07/11/2023	Payee name AT&T Mobility	
Amount (\$) \$125.00	Payee address; City; State; Zip Code PO Box 537104  Atlanta, GA 30353	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 08/11/2023	<b>5</b> Payee name AT&T Mobility
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<b>6</b> Amount (\$) \$81.76	<b>7</b> Payee address; City; State; Zip Code PO Box 537104  Atlanta, GA 30353
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/11/2023	Payee name AT&T Mobility
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Amount (\$) \$81.76	Payee address; City; State; Zip Code PO Box 537104  Atlanta, GA 30353
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/11/2023	Payee name AT&T Mobility
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Amount (\$) \$81.76	Payee address; City; State; Zip Code PO Box 537104  Atlanta, GA 30353
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/11/2023	<b>5</b> Payee name AT&T Mobility	
<b>6</b> Amount (\$) \$81.92	<b>7</b> Payee address; City; State; Zip Code PO Box 537104  Atlanta, GA 30353	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/11/2023	Payee name AT&T Mobility	
Amount (\$) \$81.92	Payee address; City; State; Zip Code PO Box 537104  Atlanta, GA 30353	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/19/2023	Payee name Adams, Robert	
Amount (\$) \$200.00	Payee address; City; State; Zip Code PO Box 848  Nederland, TX 77627	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign event security
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/06/2023	<b>5</b> Payee name Ahart, Doug	
<b>6</b> Amount (\$) \$2,280.32	<b>7</b> Payee address; City; State; Zip Code 113 Cloverleaf Cove  Buda, TX 78610	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight services for campaign fundraising trip
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2023	Payee name Alpha A. Enterprises, LLC	
Amount (\$) \$800.00	Payee address; City; State; Zip Code 2023 FoxBorough Dr  Eagle Pass, TX 78852	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for photo/video services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/06/2023	Payee name Amazon	
Amount (\$) \$150.47	Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Amazon Prime subscription
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.

<b>1</b> Total pages Schedule F1: Sch: 5/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 07/11/2023	<b>5</b> Payee name American Bank of Commerce	
<b>6</b> Amount (\$) \$11,732.96	<b>7</b> Payee address; City; State; Zip Code PO Box 650789  Dallas, TX 75265-0789	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign credit card payment for expenditures reported on F4
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/11/2023	Payee name American Bank of Commerce	
Amount (\$) \$3,485.70	Payee address; City; State; Zip Code PO Box 650789  Dallas, TX 75265-0789	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign credit card payment for expenditures reported on F4
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/11/2023	Payee name American Bank of Commerce	
Amount (\$) \$8,709.84	Payee address; City; State; Zip Code PO Box 650789  Dallas, TX 75265-0789	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign credit card payment for expenditures reported on F4
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/12/2023	<b>5</b> Payee name American Bank of Commerce	
<b>6</b> Amount (\$) \$10,782.04	<b>7</b> Payee address; City; State; Zip Code PO Box 650789  Dallas, TX 75265-0789	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign credit card payment for expenditures reported on F4
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2023	Payee name American Bank of Commerce	
Amount (\$) \$18,813.69	Payee address; City; State; Zip Code PO Box 650789  Dallas, TX 75265-0789	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign credit card payment for expenditures reported on F4
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/12/2023	Payee name American Bank of Commerce	
Amount (\$) \$16,857.29	Payee address; City; State; Zip Code PO Box 650789  Dallas, TX 75265-0789	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign credit card payment for expenditures reported on F4
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.

<b>1</b> Total pages Schedule F1: Sch: 7/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/31/2023	<b>5</b> Payee name Atchley & Associates LLP	
<b>6</b> Amount (\$) \$6,053.75	<b>7</b> Payee address; City; State; Zip Code 1005 La Posuda Dr  Austin, TX 78752	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign accounting and reporting services
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2023	Payee name Austin Marriott Downlown	
Amount (\$) \$384.96	Payee address; City; State; Zip Code 304 E Cesar Chavez S  Austin, TX 78701	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging to attend political meetings
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2023	Payee name Ben Bumgarner Campaign	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code 5150 Kensington Ct  Flower Mound, TX 75022	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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.

<b>1</b> Total pages Schedule F1: Sch: 8/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/08/2023	<b>5</b> Payee name Ben E Keith	
<b>6</b> Amount (\$) \$163.92	<b>7</b> Payee address; City; State; Zip Code PO Box 1570  Fort Worth, TX 76101	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kitchen supplies for legislative purposes
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2023	Payee name Ben E Keith	
Amount (\$) \$566.47	Payee address; City; State; Zip Code PO Box 1570  Fort Worth, TX 76101	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kitchen supplies for legislative purposes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2023	Payee name Ben E Keith	
Amount (\$) \$369.09	Payee address; City; State; Zip Code PO Box 1570  Fort Worth, TX 76101	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kitchen supplies for legislative purposes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/02/2023	<b>5</b> Payee name Ben E Keith	
<b>6</b> Amount (\$) \$733.98	<b>7</b> Payee address; City; State; Zip Code PO Box 1570  Fort Worth, TX 76101	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kitchen supplies for legislative purposes
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2023	Payee name Ben E Keith	
Amount (\$) \$62.75	Payee address; City; State; Zip Code PO Box 1570  Fort Worth, TX 76101	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kitchen supplies for legislative purposes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/28/2023	Payee name Ben E Keith	
Amount (\$) \$692.26	Payee address; City; State; Zip Code PO Box 1570  Fort Worth, TX 76101	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kitchen supplies for legislative purposes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 12/08/2023	<b>5</b> Payee name Ben E Keith
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<b>6</b> Amount (\$) \$111.75	<b>7</b> Payee address; City; State; Zip Code PO Box 1570  Fort Worth, TX 76101
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kitchen supplies for legislative purposes
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/11/2023	Payee name Ben E Keith
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Amount (\$) \$72.27	Payee address; City; State; Zip Code PO Box 1570  Fort Worth, TX 76101
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kitchen supplies for legislative purposes
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/14/2023	Payee name Bergman, Maricruz M
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Amount (\$) \$4,257.68	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 07/31/2023	<b>5</b> Payee name Bergman, Maricruz M	
<b>6</b> Amount (\$) \$4,257.69	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/15/2023	Payee name Bergman, Maricruz M	
Amount (\$) \$4,257.69	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/31/2023	Payee name Bergman, Maricruz M	
Amount (\$) \$4,257.69	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 09/15/2023	<b>5</b> Payee name Bergman, Maricruz M
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<b>6</b> Amount (\$) \$4,257.68	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/29/2023	Payee name Bergman, Maricruz M
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Amount (\$) \$4,257.69	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/13/2023	Payee name Bergman, Maricruz M
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Amount (\$) \$4,257.69	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/31/2023	<b>5</b> Payee name Bergman, Maricruz M	
<b>6</b> Amount (\$) \$4,257.69	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2023	Payee name Bergman, Maricruz M	
Amount (\$) \$4,257.68	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Bergman, Maricruz M	
Amount (\$) \$4,257.69	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 12/15/2023	<b>5</b> Payee name Bergman, Maricruz M
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<b>6</b> Amount (\$) \$4,257.69	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2023	Payee name Bergman, Maricruz M
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Amount (\$) \$4,257.69	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/05/2023	Payee name Berry Communications
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Amount (\$) \$58,080.00	Payee address; City; State; Zip Code 1014 W Milton  Austin, TX 78704
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In?kind for political advertising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/30/2023	<b>5</b> Payee name Big Smiles Face Painting	
<b>6</b> Amount (\$) \$2,850.00	<b>7</b> Payee address; City; State; Zip Code Bolivia Dr  Austin, TX 78729	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Face painting for legislative family Christmas event
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2023	Payee name Brown, Autumn	
Amount (\$) \$170.51	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2023	Payee name Brown, Autumn	
Amount (\$) \$1,283.25	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 16/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/13/2023	<b>5</b> Payee name Brown, Autumn	
<b>6</b> Amount (\$) \$1,685.00	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/31/2023	Payee name Brown, Autumn	
Amount (\$) \$1,685.00	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/15/2023	Payee name Brown, Autumn	
Amount (\$) \$1,685.00	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 17/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/30/2023	<b>5</b> Payee name Brown, Autumn	
<b>6</b> Amount (\$) \$1,685.00	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/15/2023	Payee name Brown, Autumn	
Amount (\$) \$1,685.00	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/29/2023	Payee name Brown, Autumn	
Amount (\$) \$1,685.00	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 18/127 Rpt:	<b>2</b>	FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062288
<b>4</b>	Date 11/17/2023	<b>5</b>	Payee name Brown, Autumn		
<b>6</b>	Amount (\$) \$327.50	<b>7</b>	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 07/14/2023		Payee name Cardwell, Margaret A		
	Amount (\$) \$2,701.77		Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 07/31/2023		Payee name Cardwell, Margaret A		
	Amount (\$) \$2,701.77		Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 19/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 08/15/2023	<b>5</b> Payee name Cardwell, Margaret A	
<b>6</b> Amount (\$) \$2,701.76	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2023	Payee name Cardwell, Margaret A	
Amount (\$) \$2,701.78	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2023	Payee name Cardwell, Margaret A	
Amount (\$) \$2,701.76	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/29/2023	<b>5</b> Payee name Cardwell, Margaret A	
<b>6</b> Amount (\$) \$2,701.77	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2023	Payee name Cardwell, Margaret A	
Amount (\$) \$2,701.77	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2023	Payee name Cardwell, Margaret A	
Amount (\$) \$2,701.76	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 21/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/15/2023	<b>5</b> Payee name Cardwell, Margaret A	
<b>6</b> Amount (\$) \$14,532.02	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Cardwell, Margaret A	
Amount (\$) \$2,701.77	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name Cardwell, Margaret A	
Amount (\$) \$2,701.77	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 22/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/29/2023	<b>5</b> Payee name Cardwell, Margaret A	
<b>6</b> Amount (\$) \$2,701.76	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/11/2023	Payee name City of Austin	
Amount (\$) \$104.55	Payee address; City; State; Zip Code PO Box 2267  Austin, TX 78783	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign office utilities
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/14/2023	Payee name City of Austin	
Amount (\$) \$109.70	Payee address; City; State; Zip Code PO Box 2267  Austin, TX 78783	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign office utilities
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.

<b>1</b> Total pages Schedule F1: Sch: 23/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/12/2023	<b>5</b> Payee name City of Austin	
<b>6</b> Amount (\$) \$115.62	<b>7</b> Payee address; City; State; Zip Code PO Box 2267  Austin, TX 78783	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign office utilities
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2023	Payee name City of Austin	
Amount (\$) \$101.19	Payee address; City; State; Zip Code PO Box 2267  Austin, TX 78783	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign office utilities
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2023	Payee name City of Austin	
Amount (\$) \$84.84	Payee address; City; State; Zip Code PO Box 2267  Austin, TX 78783	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign office utilities
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 24/127 Rpt:	<b>2</b>	FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062288	
<b>4</b>	Date 12/12/2023	<b>5</b>	Payee name City of Austin			
<b>6</b>	Amount (\$) \$106.02	<b>7</b>	Payee address; City; State; Zip Code PO Box 2267  Austin, TX 78783			
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign office utilities			
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 09/25/2023		Payee name Cole Hefner Campaign			
	Amount (\$) \$15,000.00		Payee address; City; State; Zip Code PO Box 167  Mount Pleasant, TX 75456			
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 10/19/2023		Payee name Croley, Jim			
	Amount (\$) \$200.00		Payee address; City; State; Zip Code 10774 Loelemay Dr  Beaumont, TX 77705			
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign event security			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 25/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/23/2023	<b>5</b> Payee name Darling Promo	
<b>6</b> Amount (\$) \$2,363.55	<b>7</b> Payee address; City; State; Zip Code 5605 Winne Dr  Colleyville, TX 76034	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising materials for campaign event
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2023	Payee name Darling Promo	
Amount (\$) \$1,097.84	Payee address; City; State; Zip Code 5605 Winne Dr  Colleyville, TX 76034	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mirrors for Republican Women's Conference attendees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/10/2023	Payee name Designer Graphics	
Amount (\$) \$9,173.92	Payee address; City; State; Zip Code 12404 Hwy 155 S  Tyler, TX 75703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print services for political yard signs
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.

<b>1</b> Total pages Schedule F1: Sch: 26/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 11/07/2023	<b>5</b> Payee name Dominion Forms Inc
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<b>6</b> Amount (\$) \$769.05	<b>7</b> Payee address; City; State; Zip Code PO Box 859 - 2501 M.L. King Dr  Orange, TX 77631
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Customized campaign hats for supporters
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/25/2023	Payee name Drew Darby Campaign
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Amount (\$) \$15,000.00	Payee address; City; State; Zip Code PO Box 3284  San Angelo, TX 76902
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/14/2023	Payee name Dyer, James P.
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Amount (\$) \$1,154.37	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 27/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 07/31/2023	<b>5</b> Payee name Dyer, James P.	
<b>6</b> Amount (\$) \$1,154.38	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/15/2023	Payee name Dyer, James P.	
Amount (\$) \$1,154.37	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/31/2023	Payee name Dyer, James P.	
Amount (\$) \$1,154.38	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 28/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/15/2023	<b>5</b> Payee name Dyer, James P.	
<b>6</b> Amount (\$) \$1,154.37	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/29/2023	Payee name Dyer, James P.	
Amount (\$) \$1,154.38	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/13/2023	Payee name Dyer, James P.	
Amount (\$) \$1,154.37	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 29/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 10/31/2023	<b>5</b> Payee name Dyer, James P.
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<b>6</b> Amount (\$) \$1,154.38	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/15/2023	Payee name Dyer, James P.
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Amount (\$) \$1,154.37	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/30/2023	Payee name Dyer, James P.
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Amount (\$) \$1,154.38	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 30/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/15/2023	<b>5</b> Payee name Dyer, James P.	
<b>6</b> Amount (\$) \$1,154.37	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/29/2023	Payee name Dyer, James P.	
Amount (\$) \$1,154.38	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/30/2023	Payee name Elves Farm	
Amount (\$) \$850.00	Payee address; City; State; Zip Code 603 Harvey Ln  Denison, TX 75020	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tree for Capitol Christmas events
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 31/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 07/11/2023	<b>5</b> Payee name Enterprise Rent-A-Car	
<b>6</b> Amount (\$) \$458.97	<b>7</b> Payee address; City; State; Zip Code 4352 S IH 35  Austin, TX 78745-2023	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rental care for political travel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2023	Payee name Ernest Bailes Campaign	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code PO Box 1232  Shepherd, TX 77371	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Fitzpatrick, Kevin	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1288 Elm Pass Rd  Bandera, TX 78003	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Trick roper for legislative member Christmas party
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.

<b>1</b> Total pages Schedule F1: Sch: 32/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 10/19/2023	<b>5</b> Payee name Frederick, Kirk
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<b>6</b> Amount (\$) \$200.00	<b>7</b> Payee address; City; State; Zip Code PO Box 848  Nederland, TX 77627
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign event security
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/25/2023	Payee name Gary VanDeaver Campaign
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Amount (\$) \$15,000.00	Payee address; City; State; Zip Code PO Box 866  New Boston, TX 75570
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/25/2023	Payee name Glenn Rogers Campaign
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Amount (\$) \$15,000.00	Payee address; City; State; Zip Code 1832 Grassy Ridge Rd  Graford, TX 76449
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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.

<b>1</b> Total pages Schedule F1: Sch: 33/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/19/2023	<b>5</b> Payee name Goldman, Martin	
<b>6</b> Amount (\$) \$200.00	<b>7</b> Payee address; City; State; Zip Code 1839 Llano  Port Neches, TX 77651	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign event security
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/01/2023	Payee name Grant Public Strategies	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code PO Box 152  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political consulting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/11/2023	Payee name Grant Public Strategies	
Amount (\$) \$7,500.00	Payee address; City; State; Zip Code PO Box 152  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political consulting services
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.

<b>1</b> Total pages Schedule F1: Sch: 34/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 10/11/2023	<b>5</b> Payee name Grant Public Strategies
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<b>6</b> Amount (\$) \$7,500.00	<b>7</b> Payee address; City; State; Zip Code PO Box 152  Austin, TX 78767
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political consulting services
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2023	Payee name Grant Public Strategies
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Amount (\$) \$7,500.00	Payee address; City; State; Zip Code PO Box 152  Austin, TX 78767
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political consulting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/18/2023	Payee name Grant Public Strategies
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Amount (\$) \$7,500.00	Payee address; City; State; Zip Code PO Box 152  Austin, TX 78767
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political consulting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 35/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/15/2023	<b>5</b> Payee name HEB	
<b>6</b> Amount (\$) \$402.00	<b>7</b> Payee address; City; State; Zip Code 701 Capital of Texas HWY  West Lake Hills, TX 78745	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/14/2023	Payee name Hand, Braden A.	
Amount (\$) \$847.01	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2023	Payee name Hand, Braden A.	
Amount (\$) \$847.02	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 36/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 08/15/2023	<b>5</b> Payee name Hand, Braden A.	
<b>6</b> Amount (\$) \$847.02	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/31/2023	Payee name Hand, Braden A.	
Amount (\$) \$847.01	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/15/2023	Payee name Hand, Braden A.	
Amount (\$) \$847.03	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 37/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/29/2023	<b>5</b> Payee name Hand, Braden A.	
<b>6</b> Amount (\$) \$847.01	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2023	Payee name Hand, Braden A.	
Amount (\$) \$847.03	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2023	Payee name Hand, Braden A.	
Amount (\$) \$847.01	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 38/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/15/2023	<b>5</b> Payee name Hand, Braden A.	
<b>6</b> Amount (\$) \$6,473.01	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Hand, Braden A.	
Amount (\$) \$847.03	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name Hand, Braden A.	
Amount (\$) \$847.01	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 39/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/29/2023	<b>5</b> Payee name Hand, Braden A.	
<b>6</b> Amount (\$) \$847.02	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/10/2023	Payee name Hand, Braden A.	
Amount (\$) \$112.66	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/11/2023	Payee name Hand, Braden A.	
Amount (\$) \$433.61	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
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.

<b>1</b> Total pages Schedule F1: Sch: 40/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/26/2023	<b>5</b> Payee name Hand, Braden A.	
<b>6</b> Amount (\$) \$331.43	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2023	Payee name Hand, Braden A.	
Amount (\$) \$286.89	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/16/2023	Payee name Hand, Braden A.	
Amount (\$) \$150.65	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
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.

<b>1</b> Total pages Schedule F1: Sch: 41/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/05/2023	<b>5</b> Payee name Hobby Lobby #572	
<b>6</b> Amount (\$) \$69.16	<b>7</b> Payee address; City; State; Zip Code 2770 Hwy 365 Ste A  Port Arthur, TX 77640	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for political fundraiser
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/07/2023	Payee name Hobby Lobby #572	
Amount (\$) \$158.87	Payee address; City; State; Zip Code 2770 Hwy 365 Ste A  Port Arthur, TX 77640	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for political fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/16/2023	Payee name It's All 'N the Presentation	
Amount (\$) \$7,194.55	Payee address; City; State; Zip Code 3965 Phelan Blvd #106  Beaumont, TX 77707	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for political fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 42/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 09/25/2023	<b>5</b> Payee name Jacey Jetton Campaign
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<b>6</b> Amount (\$) \$15,000.00	<b>7</b> Payee address; City; State; Zip Code 1723 Hearthside Ct  Richmond, TX 77406
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/21/2023	Payee name Jason's Deli
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Amount (\$) \$229.37	Payee address; City; State; Zip Code 112 Gateway St  Beumont, TX 77701
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss campaign issues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/22/2023	Payee name Jasper's
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Amount (\$) \$320.73	Payee address; City; State; Zip Code 549 E Gibson St  Jasper, TX 75951
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss campaign issues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 43/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/05/2023	<b>5</b> Payee name John Kuempel Campaign	
<b>6</b> Amount (\$) \$15,000.00	<b>7</b> Payee address; City; State; Zip Code 902 E College St  Seguin, TX 78155	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2023	Payee name Justin Holland Campaign	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code 3021 Ridge Rd Ste A Box 79  Rockwall, TX 75032	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/01/2023	Payee name KUSA Aviation LLC	
Amount (\$) \$5,346.50	Payee address; City; State; Zip Code 4700 Hangar Drive, Hangar 5  Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pilot services for political fundraising travel
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.

<b>1</b> Total pages Schedule F1: Sch: 44/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 08/01/2023	<b>5</b> Payee name KUSA Aviation LLC	
<b>6</b> Amount (\$) \$9,586.55	<b>7</b> Payee address; City; State; Zip Code 4700 Hangar Drive, Hangar 5  Beaumont, TX 77705	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pilot services for political fundraising travel
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/07/2023	Payee name KUSA Aviation LLC	
Amount (\$) \$22,795.71	Payee address; City; State; Zip Code 4700 Hangar Drive, Hangar 5  Beaumont, TX 77705	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pilot services for political fundraising travel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 07/18/2023	Payee name Keel Systems LLC	
Amount (\$) \$7,012.95	Payee address; City; State; Zip Code 23812 Tres Coronas  Spicewood, TX 78669	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database management
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 45/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/31/2023	<b>5</b> Payee name Keel Systems LLC	
<b>6</b> Amount (\$) \$8,220.72	<b>7</b> Payee address; City; State; Zip Code 23812 Tres Coronas  Spicewood, TX 78669	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Database management
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2023	Payee name Krona Thimesch Campaign	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code 2516 Sir Tristram Ln  Lewisville, TX 75056	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2023	Payee name Lynn Stucky Campaign	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code P.O. Box 464  Denton, TX 76202	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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.

<b>1</b> Total pages Schedule F1: Sch: 46/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/15/2023	<b>5</b> Payee name MF Advisors	
<b>6</b> Amount (\$) \$12,500.00	<b>7</b> Payee address; City; State; Zip Code 2401 E 6th St, Ste 3037-205  Austin, TX 78702	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Public affairs consulting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2023	Payee name Mano DeAyala Campaign	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code 12335 Kingsride Ln #416  Houston, TX 77024	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/04/2023	Payee name Margo Cardwell PLLC	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 508 W 14th St  Austin, TX 78701	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office stipend
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.

<b>1</b> Total pages Schedule F1: Sch: 47/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/01/2023	<b>5</b> Payee name Margo Cardwell PLLC	
<b>6</b> Amount (\$) \$3,000.00	<b>7</b> Payee address; City; State; Zip Code 508 W 14th St  Austin, TX 78701	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office stipend
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/14/2023	Payee name Marquez, III, Enrique	
Amount (\$) \$832.37	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2023	Payee name Marquez, III, Enrique	
Amount (\$) \$832.38	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 48/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 08/15/2023	<b>5</b> Payee name Marquez, III, Enrique	
<b>6</b> Amount (\$) \$832.37	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2023	Payee name Marquez, III, Enrique	
Amount (\$) \$832.38	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2023	Payee name Marquez, III, Enrique	
Amount (\$) \$832.37	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 49/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 09/29/2023	<b>5</b> Payee name Marquez, III, Enrique
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<b>6</b> Amount (\$) \$832.38	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/13/2023	Payee name Marquez, III, Enrique
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Amount (\$) \$832.37	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/31/2023	Payee name Marquez, III, Enrique
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Amount (\$) \$832.38	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 50/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/15/2023	<b>5</b> Payee name Marquez, III, Enrique	
<b>6</b> Amount (\$) \$11,801.62	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Marquez, III, Enrique	
Amount (\$) \$832.38	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name Marquez, III, Enrique	
Amount (\$) \$832.37	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 51/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/29/2023	<b>5</b> Payee name Marquez, III, Enrique	
<b>6</b> Amount (\$) \$832.38	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name McLeroy, Barbara & Albie	
Amount (\$) \$525.00	Payee address; City; State; Zip Code 5943 Sapphire Cove  San Antonio, TX 78222	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Santa and Mrs. Claus services for legislative member Christmas event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name McLeroy, Barbara & Albie	
Amount (\$) \$525.00	Payee address; City; State; Zip Code 5943 Sapphire Cove  San Antonio, TX 78222	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Santa and Mrs. Claus services for legislative staff Christmas event
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.

<b>1</b> Total pages Schedule F1: Sch: 52/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 07/14/2023	<b>5</b> Payee name Meisenheimer, Caitlin E
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<b>6</b> Amount (\$) \$914.98	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/31/2023	Payee name Meisenheimer, Caitlin E
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Amount (\$) \$914.98	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/15/2023	Payee name Meisenheimer, Caitlin E
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Amount (\$) \$914.99	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 53/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 08/31/2023	<b>5</b> Payee name Meisenheimer, Caitlin E	
<b>6</b> Amount (\$) \$914.97	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2023	Payee name Meisenheimer, Caitlin E	
Amount (\$) \$914.99	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2023	Payee name Meisenheimer, Caitlin E	
Amount (\$) \$914.98	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 54/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/13/2023	<b>5</b> Payee name Meisenheimer, Caitlin E	
<b>6</b> Amount (\$) \$914.98	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/31/2023	Payee name Meisenheimer, Caitlin E	
Amount (\$) \$914.99	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/15/2023	Payee name Meisenheimer, Caitlin E	
Amount (\$) \$12,006.23	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 55/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 11/30/2023	<b>5</b> Payee name Meisenheimer, Caitlin E
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<b>6</b> Amount (\$) \$914.98	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2023	Payee name Meisenheimer, Caitlin E
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Amount (\$) \$914.98	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2023	Payee name Meisenheimer, Caitlin E
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Amount (\$) \$914.99	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 56/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 07/14/2023	<b>5</b> Payee name Michalk, Cole A	
<b>6</b> Amount (\$) \$411.75	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2023	Payee name Michalk, Cole A	
Amount (\$) \$411.75	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/15/2023	Payee name Michalk, Cole A	
Amount (\$) \$411.75	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 57/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 08/31/2023	<b>5</b> Payee name Michalk, Cole A	
<b>6</b> Amount (\$) \$411.75	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2023	Payee name Michalk, Cole A	
Amount (\$) \$72.05	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2023	Payee name Michalk, Cole A	
Amount (\$) \$411.75	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 58/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/29/2023	<b>5</b> Payee name Michalk, Cole A	
<b>6</b> Amount (\$) \$411.75	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2023	Payee name Michalk, Cole A	
Amount (\$) \$411.75	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2023	Payee name Michalk, Cole A	
Amount (\$) \$411.75	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 59/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/15/2023	<b>5</b> Payee name Michalk, Cole A	
<b>6</b> Amount (\$) \$411.75	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Michalk, Cole A	
Amount (\$) \$411.75	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name Michalk, Cole A	
Amount (\$) \$411.75	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 60/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/29/2023	<b>5</b> Payee name Michalk, Cole A	
<b>6</b> Amount (\$) \$411.75	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2023	Payee name Michalk, Cole A	
Amount (\$) \$36.03	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/20/2023	Payee name Michalk, Cole A	
Amount (\$) \$78.60	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
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.

<b>1</b> Total pages Schedule F1: Sch: 61/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/21/2023	<b>5</b> Payee name Michalk, Cole A	
<b>6</b> Amount (\$) \$78.60	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/14/2023	Payee name Mitchell, Kelly M.	
Amount (\$) \$3,437.96	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2023	Payee name Mitchell, Kelly M.	
Amount (\$) \$3,437.95	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 62/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 08/15/2023	<b>5</b> Payee name Mitchell, Kelly M.
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<b>6</b> Amount (\$) \$3,437.96	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/31/2023	Payee name Mitchell, Kelly M.
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Amount (\$) \$3,437.96	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/15/2023	Payee name Mitchell, Kelly M.
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Amount (\$) \$3,437.95	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 63/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/21/2023	<b>5</b> Payee name Mitchell, Kelly M.	
<b>6</b> Amount (\$) \$239.08	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2023	Payee name Mitchell, Kelly M.	
Amount (\$) \$3,437.95	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2023	Payee name Mitchell, Kelly M.	
Amount (\$) \$3,437.96	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 64/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/31/2023	<b>5</b> Payee name Mitchell, Kelly M.	
<b>6</b> Amount (\$) \$3,437.95	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2023	Payee name Mitchell, Kelly M.	
Amount (\$) \$15,124.21	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Mitchell, Kelly M.	
Amount (\$) \$3,437.96	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 65/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/15/2023	<b>5</b> Payee name Mitchell, Kelly M.	
<b>6</b> Amount (\$) \$3,437.95	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2023	Payee name Mitchell, Kelly M.	
Amount (\$) \$3,437.95	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/27/2023	Payee name Mitchell, Kelly M.	
Amount (\$) \$222.70	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
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.

<b>1</b> Total pages Schedule F1: Sch: 66/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 10/30/2023	<b>5</b> Payee name Mitchell, Kelly M.
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<b>6</b> Amount (\$) \$396.93	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/25/2023	Payee name Mittnach, Daniel L
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Amount (\$) \$259.38	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/13/2023	Payee name Mittnach, Daniel L
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Amount (\$) \$259.38	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 67/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 07/10/2023	<b>5</b> Payee name Mittnacht, Daniel L
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<b>6</b> Amount (\$) \$7,273.63	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/14/2023	Payee name Mittnacht, Daniel L
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Amount (\$) \$4,684.88	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/31/2023	Payee name Mittnacht, Daniel L
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Amount (\$) \$4,684.87	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 68/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 08/15/2023	<b>5</b> Payee name Mittnacht, Daniel L	
<b>6</b> Amount (\$) \$4,684.88	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2023	Payee name Mittnacht, Daniel L	
Amount (\$) \$4,684.87	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2023	Payee name Mittnacht, Daniel L	
Amount (\$) \$4,684.88	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 69/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/29/2023	<b>5</b> Payee name Mittnacht, Daniel L	
<b>6</b> Amount (\$) \$4,684.87	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2023	Payee name Mittnacht, Daniel L	
Amount (\$) \$4,684.88	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2023	Payee name Mittnacht, Daniel L	
Amount (\$) \$4,684.87	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 70/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/15/2023	<b>5</b> Payee name Mittnacht, Daniel L	
<b>6</b> Amount (\$) \$4,684.88	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Mittnacht, Daniel L	
Amount (\$) \$4,684.87	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name Mittnacht, Daniel L	
Amount (\$) \$4,684.88	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 71/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 12/29/2023	<b>5</b> Payee name Mittnacht, Daniel L
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<b>6</b> Amount (\$) \$4,684.87	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/16/2023	Payee name Mittnacht, Daniel L
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Amount (\$) \$217.46	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/18/2023	Payee name Modelo's Sports Cantina
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Amount (\$) \$222.76	Payee address; City; State; Zip Code 3871 Stagg Dr Ste 203  Beaumont, TX 77701
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff and volunteer meeting
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 72/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/03/2023	<b>5</b> Payee name Murphy Nasica	
<b>6</b> Amount (\$) \$12,481.53	<b>7</b> Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing materials for campaign use
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2023	Payee name Murphy Nasica	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Post production services for campaign use
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2023	Payee name Murphy Nasica	
Amount (\$) \$49,560.00	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad buy services for campaign use
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.

<b>1</b> Total pages Schedule F1: Sch: 73/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/21/2023	<b>5</b> Payee name Murphy Nasica	
<b>6</b> Amount (\$) \$15,000.00	<b>7</b> Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Broadcast ad buy consulting for campaign use
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2023	Payee name Murphy Nasica	
Amount (\$) \$20,501.00	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign communications consulting services and design
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2023	Payee name Murphy Nasica	
Amount (\$) \$8,004.26	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political text advertising services
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.

<b>1</b> Total pages Schedule F1: Sch: 74/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/18/2023	<b>5</b> Payee name Murphy Nasica	
<b>6</b> Amount (\$) \$27,032.76	<b>7</b> Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing materials for campaign use
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2023	Payee name Murphy Nasica	
Amount (\$) \$2,601.00	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online political advertising services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2023	Payee name Murphy Nasica	
Amount (\$) \$29,966.00	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Media advertising for campaign use
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.

<b>1</b> Total pages Schedule F1: Sch: 75/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/18/2023	<b>5</b> Payee name Murphy Nasica	
<b>6</b> Amount (\$) \$5,500.00	<b>7</b> Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Production services for campaign use
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/19/2023	Payee name Murphy Nasica	
Amount (\$) \$49,484.00	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political media advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2023	Payee name Murphy Nasica	
Amount (\$) \$104,988.52	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political communications consulting and design services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 76/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 07/05/2023	<b>5</b> Payee name Murphy Nasica	
<b>6</b> Amount (\$) \$25,450.00	<b>7</b> Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political consulting services
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/28/2023	Payee name Murphy Nasica	
Amount (\$) \$157,858.86	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political communications consulting services and production
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/11/2023	Payee name Murphy Nasica	
Amount (\$) \$10,250.00	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political consulting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 77/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/11/2023	<b>5</b> Payee name Murphy Nasica	
<b>6</b> Amount (\$) \$1,100.00	<b>7</b> Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political research services
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/11/2023	Payee name Murphy Nasica	
Amount (\$) \$1,750.00	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political marketing consulting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2023	Payee name Murphy Nasica	
Amount (\$) \$5,250.00	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Communications consulting for campaign use
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.

<b>1</b> Total pages Schedule F1: Sch: 78/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/16/2023	<b>5</b> Payee name Murphy Nasica	
<b>6</b> Amount (\$) \$5,125.00	<b>7</b> Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political marketing consulting services
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2023	Payee name Murphy Nasica	
Amount (\$) \$20,400.00	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Communications consulting for campaign use
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2023	Payee name Murphy Nasica	
Amount (\$) \$5,125.00	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political marketing consulting services
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.

<b>1</b> Total pages Schedule F1: Sch: 79/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/21/2023	<b>5</b> Payee name Murphy Nasica	
<b>6</b> Amount (\$) \$2,950.00	<b>7</b> Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political consulting services
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2023	Payee name Murphy Nasica	
Amount (\$) \$16,233.14	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political consulting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2023	Payee name Murphy Nasica	
Amount (\$) \$7,000.00	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political consulting services
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.

<b>1</b> Total pages Schedule F1: Sch: 80/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/18/2023	<b>5</b> Payee name Murphy Nasica	
<b>6</b> Amount (\$) \$20,500.00	<b>7</b> Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political consulting services
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2023	Payee name Murphy Nasica	
Amount (\$) \$5,250.00	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political consulting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2023	Payee name Murphy Nasica	
Amount (\$) \$5,683.13	Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political consulting services
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.

<b>1</b> Total pages Schedule F1: Sch: 81/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 12/18/2023	<b>5</b> Payee name Murphy Nasica
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<b>6</b> Amount (\$) \$713.24	<b>7</b> Payee address; City; State; Zip Code PO Box 1648  Austin, TX 78767
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing materials for campaign use
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/17/2023	Payee name MyRTIC
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Amount (\$) \$778.43	Payee address; City; State; Zip Code 24825 N 16th Ave Ste 100  Pheonix, AZ 85085
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Branded campaign materials
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/25/2023	Payee name Naedler, Jennifer
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Amount (\$) \$11,525.07	Payee address; City; State; Zip Code 12122 Cypress Creek Lakes Dr  Cypress, TX 77433
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political consulting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 82/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/25/2023	<b>5</b> Payee name Neal, Theresa	
<b>6</b> Amount (\$) \$595.00	<b>7</b> Payee address; City; State; Zip Code 2204 Indian Trl  Austin, TX 78703	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising materials for campaign event
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2023	Payee name Neal, Theresa	
Amount (\$) \$630.00	Payee address; City; State; Zip Code 2204 Indian Trl  Austin, TX 78703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic design services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/07/2023	Payee name Office Depot	
Amount (\$) \$36.81	Payee address; City; State; Zip Code 8455 Memorial Blvd Ste 300  Port Arthur, TX 77640	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for political fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 83/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/25/2023	<b>5</b> Payee name Oliver Kitzman Campaign	
<b>6</b> Amount (\$) \$15,000.00	<b>7</b> Payee address; City; State; Zip Code PO Box 553  Pattison, TX 77466	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2023	Payee name Parker, Ridge T	
Amount (\$) \$4,069.72	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Parker, Ridge T	
Amount (\$) \$2,608.38	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 84/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/15/2023	<b>5</b> Payee name Parker, Ridge T	
<b>6</b> Amount (\$) \$2,608.37	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2023	Payee name Parker, Ridge T	
Amount (\$) \$2,608.38	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/14/2023	Payee name Perkins, Lauren K	
Amount (\$) \$461.75	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 85/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 07/31/2023	<b>5</b> Payee name Perkins, Lauren K
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<b>6</b> Amount (\$) \$461.75	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/15/2023	Payee name Perkins, Lauren K
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Amount (\$) \$461.75	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/31/2023	Payee name Perkins, Lauren K
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Amount (\$) \$461.75	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 86/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/15/2023	<b>5</b> Payee name Perkins, Lauren K	
<b>6</b> Amount (\$) \$461.75	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2023	Payee name Perkins, Lauren K	
Amount (\$) \$461.75	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2023	Payee name Perkins, Lauren K	
Amount (\$) \$461.75	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 87/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/31/2023	<b>5</b> Payee name Perkins, Lauren K	
<b>6</b> Amount (\$) \$461.75	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2023	Payee name Perkins, Lauren K	
Amount (\$) \$461.75	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Perkins, Lauren K	
Amount (\$) \$461.75	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 88/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 12/15/2023	<b>5</b> Payee name Perkins, Lauren K
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<b>6</b> Amount (\$) \$461.75	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2023	Payee name Perkins, Lauren K
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Amount (\$) \$461.75	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/14/2023	Payee name Pollock, Cassandra J
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Amount (\$) \$914.98	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 89/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 07/31/2023	<b>5</b> Payee name Pollock, Cassandra J	
<b>6</b> Amount (\$) \$914.98	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/15/2023	Payee name Pollock, Cassandra J	
Amount (\$) \$914.99	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2023	Payee name Pollock, Cassandra J	
Amount (\$) \$914.97	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 90/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/15/2023	<b>5</b> Payee name Pollock, Cassandra J	
<b>6</b> Amount (\$) \$914.99	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2023	Payee name Pollock, Cassandra J	
Amount (\$) \$914.98	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2023	Payee name Pollock, Cassandra J	
Amount (\$) \$914.98	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 91/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/31/2023	<b>5</b> Payee name Pollock, Cassandra J	
<b>6</b> Amount (\$) \$914.99	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2023	Payee name Pollock, Cassandra J	
Amount (\$) \$914.98	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Pollock, Cassandra J	
Amount (\$) \$914.98	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 92/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 07/07/2023	<b>5</b> Payee name QuickBooks Payroll Service
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<b>6</b> Amount (\$) \$1.87	<b>7</b> Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing fee
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/13/2023	Payee name QuickBooks Payroll Service
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Amount (\$) \$24.25	Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/28/2023	Payee name QuickBooks Payroll Service
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Amount (\$) \$24.25	Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 93/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 08/14/2023	<b>5</b> Payee name QuickBooks Payroll Service	
<b>6</b> Amount (\$) \$24.25	<b>7</b> Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/30/2023	Payee name QuickBooks Payroll Service	
Amount (\$) \$22.39	Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/14/2023	Payee name QuickBooks Payroll Service	
Amount (\$) \$1.87	Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 94/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/14/2023	<b>5</b> Payee name QuickBooks Payroll Service	
<b>6</b> Amount (\$) \$26.12	<b>7</b> Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/28/2023	Payee name QuickBooks Payroll Service	
Amount (\$) \$26.12	Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/12/2023	Payee name QuickBooks Payroll Service	
Amount (\$) \$26.12	Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing fee
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.

<b>1</b> Total pages Schedule F1: Sch: 95/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/30/2023	<b>5</b> Payee name QuickBooks Payroll Service	
<b>6</b> Amount (\$) \$26.12	<b>7</b> Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2023	Payee name QuickBooks Payroll Service	
Amount (\$) \$27.98	Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/29/2023	Payee name QuickBooks Payroll Service	
Amount (\$) \$27.98	Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing fee
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.

<b>1</b> Total pages Schedule F1: Sch: 96/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 12/14/2023	<b>5</b> Payee name QuickBooks Payroll Service
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<b>6</b> Amount (\$) \$26.12	<b>7</b> Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing fee
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/28/2023	Payee name QuickBooks Payroll Service
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Amount (\$) \$26.12	Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2023	Payee name Ragnar Research Partners
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Amount (\$) \$350,850.00	Payee address; City; State; Zip Code 103 E St, SE  Washington, DC 20003
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense House candidates polling fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 97/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 12/31/2023	<b>5</b> Payee name Ragnar Research Partners
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<b>6</b> Amount (\$) \$350,850.00	<b>7</b> Payee address; City; State; Zip Code 103 E St, SE  Washington, DC 20003
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Polling for House candidates
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/06/2023	Payee name Ragnar Research Partners
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Amount (\$) \$102,200.00	Payee address; City; State; Zip Code 103 E St, SE  Washington, DC 20003
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Polling for House candidates
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/07/2023	Payee name Ragnar Research Partners
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Amount (\$) \$139,050.00	Payee address; City; State; Zip Code 103 E St, SE  Washington, DC 20003
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Polling for House candidates
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 98/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/07/2023	<b>5</b> Payee name Ragnar Research Partners	
<b>6</b> Amount (\$) \$30,500.00	<b>7</b> Payee address; City; State; Zip Code 103 E St, SE  Washington, DC 20003	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense District polling expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2023	Payee name Red Owl Strategies LLC	
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 271 Middle Crk  Buda, TX 78610	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for videographer for campaign purposes
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/06/2023	Payee name Red Owl Strategies LLC	
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code 271 Middle Crk  Buda, TX 78610	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for videographer for campaign purposes
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.

<b>1</b> Total pages Schedule F1: Sch: 99/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 07/14/2023	<b>5</b> Payee name Richmond, Kristie E	
<b>6</b> Amount (\$) \$230.87	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2023	Payee name Richmond, Kristie E	
Amount (\$) \$230.88	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/15/2023	Payee name Richmond, Kristie E	
Amount (\$) \$230.87	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 100/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 08/31/2023	<b>5</b> Payee name Richmond, Kristie E	
<b>6</b> Amount (\$) \$230.88	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2023	Payee name Richmond, Kristie E	
Amount (\$) \$230.87	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2023	Payee name Richmond, Kristie E	
Amount (\$) \$230.88	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 101/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/13/2023	<b>5</b> Payee name Richmond, Kristie E	
<b>6</b> Amount (\$) \$230.87	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2023	Payee name Richmond, Kristie E	
Amount (\$) \$230.88	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2023	Payee name Richmond, Kristie E	
Amount (\$) \$230.87	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 102/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/30/2023	<b>5</b> Payee name Richmond, Kristie E	
<b>6</b> Amount (\$) \$230.88	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name Richmond, Kristie E	
Amount (\$) \$230.87	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2023	Payee name Richmond, Kristie E	
Amount (\$) \$230.88	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 103/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/19/2023	<b>5</b> Payee name Roberts, Alan	
<b>6</b> Amount (\$) \$200.00	<b>7</b> Payee address; City; State; Zip Code 508 S 18th St  Nederland, TX 77628	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign event security
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name Sam's Club	
Amount (\$) \$421.33	Payee address; City; State; Zip Code 16151 I-10 S  Beaumont, TX 77701	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for political fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/21/2023	Payee name San Antonio St Partners LLC	
Amount (\$) \$7,650.00	Payee address; City; State; Zip Code 1402 San Antonio St Ste 200  Austin, TX 78701	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign office rent (July - Sept)
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.

<b>1</b> Total pages Schedule F1: Sch: 104/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/23/2023	<b>5</b> Payee name San Antonio St Partners LLC	
<b>6</b> Amount (\$) \$7,650.00	<b>7</b> Payee address; City; State; Zip Code 1402 San Antonio St Ste 200  Austin, TX 78701	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign office rent
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/30/2023	Payee name Sir Speedy	
Amount (\$) \$2,051.28	Payee address; City; State; Zip Code 1320 Arrow Point Dr Bldg 4, Ste 10  Cedar Park, TX 78613	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing materials for campaign use
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/26/2023	Payee name Sir Speedy	
Amount (\$) \$3,154.83	Payee address; City; State; Zip Code 1320 Arrow Point Dr Bldg 4, Ste 10  Cedar Park, TX 78613	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing materials for campaign use
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.

<b>1</b> Total pages Schedule F1: Sch: 105/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 08/17/2023	<b>5</b> Payee name Southwest Airlines	
<b>6</b> Amount (\$) \$8.00	<b>7</b> Payee address; City; State; Zip Code PO Box 36611  Dallas, TX 75235	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Inflight wifi fee for campaign work
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/20/2023	Payee name Southwest Airlines	
Amount (\$) \$8.00	Payee address; City; State; Zip Code PO Box 36611  Dallas, TX 75235	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Inflight wifi fee for campaign work
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/14/2023	Payee name Spectrum Mobile	
Amount (\$) \$102.00	Payee address; City; State; Zip Code 414 S Falkenburg Rd  Riverview, FL 77027	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 106/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 07/14/2023	<b>5</b> Payee name Spectrum Mobile	
<b>6</b> Amount (\$) \$102.00	<b>7</b> Payee address; City; State; Zip Code 414 S Falkenburg Rd  Riverview, FL 77027	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 07/21/2023	Payee name Spectrum Mobile	
Amount (\$) \$71.98	Payee address; City; State; Zip Code 414 S Falkenburg Rd  Riverview, FL 77027	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/21/2023	Payee name Spectrum Mobile	
Amount (\$) \$71.98	Payee address; City; State; Zip Code 414 S Falkenburg Rd  Riverview, FL 77027	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 107/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/21/2023	<b>5</b> Payee name Spectrum Mobile	
<b>6</b> Amount (\$) \$71.98	<b>7</b> Payee address; City; State; Zip Code 414 S Falkenburg Rd  Riverview, FL 77027	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/21/2023	Payee name Spectrum Mobile	
Amount (\$) \$71.98	Payee address; City; State; Zip Code 414 S Falkenburg Rd  Riverview, FL 77027	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2023	Payee name Spectrum Mobile	
Amount (\$) \$71.98	Payee address; City; State; Zip Code 414 S Falkenburg Rd  Riverview, FL 77027	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
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.

<b>1</b> Total pages Schedule F1: Sch: 108/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/21/2023	<b>5</b> Payee name Spectrum Mobile	
<b>6</b> Amount (\$) \$71.98	<b>7</b> Payee address; City; State; Zip Code 414 S Falkenburg Rd  Riverview, FL 77027	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2023	Payee name Stan Gerdes Campaign	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code PO Box 1060  Smithville, TX 78957	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/13/2023	Payee name Stan Gerdes Campaign	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code PO Box 1060  Smithville, TX 78957	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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.

<b>1</b>	Total pages Schedule F1: Sch: 109/127 Rpt:	<b>2</b>	FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00062288	
<b>4</b>	Date 09/25/2023	<b>5</b>	Payee name Stephanie Klick Campaign			
<b>6</b>	Amount (\$) \$15,000.00	<b>7</b>	Payee address; City; State; Zip Code PO Box 7592  Fort Worth, TX 76111			
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b>	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		<b>(b)</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
	Date 09/25/2023		Payee name Steve Allison Campaign			
	Amount (\$) \$15,000.00		Payee address; City; State; Zip Code 200 Morningside Dr  San Antonio, TX 78209			
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b>	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		<b>(b)</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
	Date 09/27/2023		Payee name T-Mobile			
	Amount (\$) \$247.81		Payee address; City; State; Zip Code 3870 College St Ste 100  Beaumont, TX 77701			
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b>	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 110/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/04/2023	<b>5</b> Payee name T-Mobile	
<b>6</b> Amount (\$) \$251.62	<b>7</b> Payee address; City; State; Zip Code 3870 College St Ste 100  Beaumont, TX 77701	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/26/2023	Payee name T-Mobile	
Amount (\$) \$55.13	Payee address; City; State; Zip Code 3870 College St Ste 100  Beaumont, TX 77701	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/16/2023	Payee name T-Mobile	
Amount (\$) \$55.13	Payee address; City; State; Zip Code 3870 College St Ste 100  Beaumont, TX 77701	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 111/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/13/2023	<b>5</b> Payee name Texas Alliance for Life	
<b>6</b> Amount (\$) \$25,000.00	<b>7</b> Payee address; City; State; Zip Code 8000 Centre Park Dr., Ste 380  Austin, TX 78754	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Texas Alliance for Life
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 07/21/2023	Payee name Texas Federation of Republican Women	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Texas Federation of Republican Women 34th Biennial Convention
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/10/2023	Payee name Texas Republican County Chairmen Association	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 1108 Lavaca St Ste 110 Box 658  Austin, TX 78701	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Texas Republican Chairmen Association
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 112/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/21/2023	<b>5</b> Payee name Texas Stage LLC	
<b>6</b> Amount (\$) \$750.00	<b>7</b> Payee address; City; State; Zip Code 6100 N FM 105  Vidor, TX 77662	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for political fundraiser
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2023	Payee name Texas Stage LLC	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 6100 N FM 105  Vidor, TX 77662	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for political fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/11/2023	Payee name The Sweet Cake	
Amount (\$) \$700.00	Payee address; City; State; Zip Code 4913 Bennet Ave  Austin, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for members/spouses Christmas event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 113/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/01/2023	<b>5</b> Payee name Thomas Graphics	
<b>6</b> Amount (\$) \$4,428.63	<b>7</b> Payee address; City; State; Zip Code PO Box 142226  Austin, TX 78714	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising materials for campaign event
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2023	Payee name Tractor Supply	
Amount (\$) \$184.78	Payee address; City; State; Zip Code 35580 US Hwy 96 S  Buna, TX 77612	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T posts for campaign signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/28/2023	Payee name Tractor Supply	
Amount (\$) \$93.68	Payee address; City; State; Zip Code 35580 US Hwy 96 S  Buna, TX 77612	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T posts for campaign signs
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.

<b>1</b> Total pages Schedule F1: Sch: 114/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 07/12/2023	<b>5</b> Payee name United Healthcare	
<b>6</b> Amount (\$) \$654.17	<b>7</b> Payee address; City; State; Zip Code 1250 S Capital of Texas Hwy #1  West Lake, TX 78746	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign healthcare insurance
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/10/2023	Payee name United Healthcare	
Amount (\$) \$3,772.38	Payee address; City; State; Zip Code 1250 S Capital of Texas Hwy #1  West Lake, TX 78746	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign healthcare insurance
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/12/2023	Payee name United Healthcare	
Amount (\$) \$1,962.51	Payee address; City; State; Zip Code 1250 S Capital of Texas Hwy #1  West Lake, TX 78746	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign healthcare insurance
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.

<b>1</b> Total pages Schedule F1: Sch: 115/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/12/2023	<b>5</b> Payee name United Healthcare	
<b>6</b> Amount (\$) \$1,962.51	<b>7</b> Payee address; City; State; Zip Code 1250 S Capital of Texas Hwy #1  West Lake, TX 78746	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign healthcare insurance
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2023	Payee name United Healthcare	
Amount (\$) \$3,270.85	Payee address; City; State; Zip Code 1250 S Capital of Texas Hwy #1  West Lake, TX 78746	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign healthcare insurance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/12/2023	Payee name United Healthcare	
Amount (\$) \$2,616.68	Payee address; City; State; Zip Code 1250 S Capital of Texas Hwy #1  West Lake, TX 78746	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign healthcare insurance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 116/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 07/06/2023	<b>5</b> Payee name United States Treasury	
<b>6</b> Amount (\$) \$3,802.18	<b>7</b> Payee address; City; State; Zip Code Internal Revenue Service  Ogden, UT 84201	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 07/12/2023	Payee name United States Treasury	
Amount (\$) \$7,458.54	Payee address; City; State; Zip Code Internal Revenue Service  Ogden, UT 84201	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 07/24/2023	Payee name United States Treasury	
Amount (\$) \$83.99	Payee address; City; State; Zip Code Internal Revenue Service  Ogden, UT 84201	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 117/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 07/27/2023	<b>5</b> Payee name United States Treasury	
<b>6</b> Amount (\$) \$7,458.50	<b>7</b> Payee address; City; State; Zip Code Internal Revenue Service  Ogden, UT 84201	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/11/2023	Payee name United States Treasury	
Amount (\$) \$7,458.48	Payee address; City; State; Zip Code Internal Revenue Service  Ogden, UT 84201	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2023	Payee name United States Treasury	
Amount (\$) \$7,458.50	Payee address; City; State; Zip Code Internal Revenue Service  Ogden, UT 84201	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
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.

<b>1</b> Total pages Schedule F1: Sch: 118/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/13/2023	<b>5</b> Payee name United States Treasury	
<b>6</b> Amount (\$) \$7,486.76	<b>7</b> Payee address; City; State; Zip Code Internal Revenue Service  Ogden, UT 84201	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/27/2023	Payee name United States Treasury	
Amount (\$) \$7,790.02	Payee address; City; State; Zip Code Internal Revenue Service  Ogden, UT 84201	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/11/2023	Payee name United States Treasury	
Amount (\$) \$7,926.48	Payee address; City; State; Zip Code Internal Revenue Service  Ogden, UT 84201	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
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.

<b>1</b> Total pages Schedule F1: Sch: 119/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/25/2023	<b>5</b> Payee name United States Treasury	
<b>6</b> Amount (\$) \$73.11	<b>7</b> Payee address; City; State; Zip Code Internal Revenue Service  Ogden, UT 84201	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2023	Payee name United States Treasury	
Amount (\$) \$7,926.48	Payee address; City; State; Zip Code Internal Revenue Service  Ogden, UT 84201	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/13/2023	Payee name United States Treasury	
Amount (\$) \$42,485.74	Payee address; City; State; Zip Code Internal Revenue Service  Ogden, UT 84201	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
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.

<b>1</b> Total pages Schedule F1: Sch: 120/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 11/28/2023	<b>5</b> Payee name United States Treasury
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<b>6</b> Amount (\$) \$8,922.30	<b>7</b> Payee address; City; State; Zip Code Internal Revenue Service  Ogden, UT 84201
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/20/2023	Payee name United States Treasury
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Amount (\$) \$8,716.06	Payee address; City; State; Zip Code Internal Revenue Service  Ogden, UT 84201
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/21/2023	Payee name United States Treasury
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Amount (\$) \$8,715.96	Payee address; City; State; Zip Code Internal Revenue Service  Ogden, UT 84201
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 121/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 07/14/2023	<b>5</b> Payee name Verizon	
<b>6</b> Amount (\$) \$125.00	<b>7</b> Payee address; City; State; Zip Code PO Box 489  Newark, NJ 77101	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 08/31/2023	Payee name Verizon	
Amount (\$) \$125.00	Payee address; City; State; Zip Code PO Box 489  Newark, NJ 77101	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/15/2023	Payee name Verizon	
Amount (\$) \$125.00	Payee address; City; State; Zip Code PO Box 489  Newark, NJ 77101	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 122/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 10/31/2023	<b>5</b> Payee name Verizon	
<b>6</b> Amount (\$) \$125.00	<b>7</b> Payee address; City; State; Zip Code PO Box 489  Newark, NJ 77101	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/30/2023	Payee name Verizon	
Amount (\$) \$125.00	Payee address; City; State; Zip Code PO Box 489  Newark, NJ 77101	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 12/29/2023	Payee name Verizon	
Amount (\$) \$125.00	Payee address; City; State; Zip Code PO Box 489  Newark, NJ 77101	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff cell phone
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 123/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/28/2023	<b>5</b> Payee name Walmart	
<b>6</b> Amount (\$) \$289.99	<b>7</b> Payee address; City; State; Zip Code 488 Highway 71 W  Bastrop, TX 78602	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative member Christmas event
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/14/2023	Payee name Watts, Sydney P.	
Amount (\$) \$577.19	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2023	Payee name Watts, Sydney P.	
Amount (\$) \$577.18	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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.

<b>1</b> Total pages Schedule F1: Sch: 124/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> Date 08/15/2023	<b>5</b> Payee name Watts, Sydney P.
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<b>6</b> Amount (\$) \$577.19	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
---------------------------------	--	--

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/31/2023	Payee name Watts, Sydney P.
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Amount (\$) \$577.19	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/15/2023	Payee name Watts, Sydney P.
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Amount (\$) \$577.19	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 125/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 09/29/2023	<b>5</b> Payee name Watts, Sydney P.	
<b>6</b> Amount (\$) \$577.18	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2023	Payee name Watts, Sydney P.	
Amount (\$) \$577.19	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2023	Payee name Watts, Sydney P.	
Amount (\$) \$577.19	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 126/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 11/15/2023	<b>5</b> Payee name Watts, Sydney P.	
<b>6</b> Amount (\$) \$1,144.37	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Watts, Sydney P.	
Amount (\$) \$1,144.38	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name Watts, Sydney P.	
Amount (\$) \$1,144.37	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 127/127 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
<b>4</b> Date 12/29/2023	<b>5</b> Payee name Watts, Sydney P.	
<b>6</b> Amount (\$) \$1,144.38	<b>7</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/19/2023	Payee name Wiggins, Charles	
Amount (\$) \$200.00	Payee address; City; State; Zip Code PO Box 848  Nederland, TX 77627	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign event security
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2023	Payee name Wood Aviation	
Amount (\$) \$15,841.11	Payee address; City; State; Zip Code 221 Stearman Dr  Georgetown, TX 78628	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight services for campaign travel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2: Sch: 1/2 Rpt: 254/366	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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<b>5</b> Date 12/15/2023	<b>6</b> Payee name Acme Partnership, LP
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<b>7</b> Amount (\$) \$1,900.00	<b>8</b> Payee address; City; State; Zip Code 3701 Bee Caves Rd Ste 101  Austin, TX 78746
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political advertisement production and installation
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/28/2023	Payee name Michalk, Cole A
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Amount (\$) \$963.92	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimburse campaign expenses
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2: Sch: 2/2 Rpt: 255/366	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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<b>5</b> Date 12/21/2023	<b>6</b> Payee name Mitchell, Kelly M.
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<b>7</b> Amount (\$) \$287.92	<b>8</b> Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimburse campaign expenses
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/11/2023	Payee name Mittnacht, Daniel L
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Amount (\$) \$81.92	Payee address; City; State; Zip Code PO Box 5990  Austin, TX 78763
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimburse campaign expenses
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 1/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/02/2023	<b>6</b> Payee name AAA Rentals
-----------------------------	------------------------------------

<b>7</b> Amount (\$) \$793.00	<b>8</b> Payee address; City; State; Zip Code 5805 Old Dowlen Rd  Beaumont, TX 77706
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rental fee for tables and chairs for fundraising event
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2023	Payee name AAA Rentals
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Amount (\$) \$144.45	Payee address; City; State; Zip Code 5805 Old Dowlen Rd  Beaumont, TX 77706
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rental fee for tables and chairs for fundraising event
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 2/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 09/06/2023	<b>6</b> Payee name Amazon
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<b>7</b> Amount (\$) \$40.68	<b>8</b> Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Event Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for legislative member and family Christmas event
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2023	Payee name Amazon
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Amount (\$) \$172.20	Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Event Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for legislative member and family Christmas event
-------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 3/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 09/07/2023	<b>6</b> Payee name Amazon
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<b>7</b> Amount (\$) \$72.16	<b>8</b> Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for legislative member and family Christmas event
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/18/2023	Payee name Amazon
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Amount (\$) \$87.66	Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for legislative member and family Christmas event
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 4/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 11/19/2023	<b>6</b> Payee name Amazon
-----------------------------	-------------------------------

<b>7</b> Amount (\$) \$241.38	<b>8</b> Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
----------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Event Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for legislative member and family Christmas event
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/19/2023	Payee name Amazon
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Amount (\$) \$102.83	Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Event Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for legislative member and family Christmas event
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 5/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 07/07/2023	<b>6</b> Payee name Amazon
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<b>7</b> Amount (\$) \$167.55	<b>8</b> Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/13/2023	Payee name Amazon
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Amount (\$) \$38.95	Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 6/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 07/14/2023	<b>6</b> Payee name Amazon
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<b>7</b> Amount (\$) \$123.41	<b>8</b> Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
----------------------------------	---	---

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/12/2023	Payee name Amazon
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Amount (\$) \$229.35	Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 7/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 08/12/2023	<b>6</b> Payee name Amazon
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<b>7</b> Amount (\$) \$5.73	<b>8</b> Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/13/2023	Payee name Amazon
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Amount (\$) \$21.99	Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 8/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 08/29/2023	<b>6</b> Payee name Amazon
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<b>7</b> Amount (\$) \$107.17	<b>8</b> Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/01/2023	Payee name Amazon
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Amount (\$) \$84.86	Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 9/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 09/29/2023	<b>6</b> Payee name Amazon
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<b>7</b> Amount (\$) \$42.18	<b>8</b> Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/16/2023	Payee name Amazon
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Amount (\$) \$52.92	Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 10/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/17/2023	<b>6</b> Payee name Amazon
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<b>7</b> Amount (\$) \$63.86	<b>8</b> Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/17/2023	Payee name Amazon
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Amount (\$) \$130.48	Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 11/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/31/2023	<b>6</b> Payee name Amazon
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<b>7</b> Amount (\$) \$75.50	<b>8</b> Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/01/2023	Payee name Amazon
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Amount (\$) \$228.28	Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 12/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 11/02/2023	<b>6</b> Payee name Amazon
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<b>7</b> Amount (\$) \$13.51	<b>8</b> Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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<b>Date</b> 11/04/2023	<b>Payee name</b> Amazon
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<b>Amount (\$)</b> \$13.51	<b>Payee address; City; State; Zip Code</b> PO Box 81226  Seattle, WA 98108-1226
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 13/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/09/2023	<b>6</b> Payee name Amazon
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<b>7</b> Amount (\$) \$195.90	<b>8</b> Payee address; City; State; Zip Code PO Box 81226  Seattle, WA 98108-1226
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/08/2023	Payee name Austin Proper Hotel
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Amount (\$) \$363.97	Payee address; City; State; Zip Code 600 W 2nd St  Austin, TX 78701
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Member meeting to discuss legislative issues
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 14/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/06/2023	<b>6</b> Payee name Austin-Bergstrom International Airport
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<b>7</b> Amount (\$) \$58.00	<b>8</b> Payee address; City; State; Zip Code 3600 Presidential Blvd  Austin, TX 78719
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Fees	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking for political event
----------------------------------	---	---

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 10/06/2023	Payee name Austin-Bergstrom International Airport
--------------------	--

Amount (\$) \$58.00	Payee address; City; State; Zip Code 3600 Presidential Blvd  Austin, TX 78719
------------------------	--

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	--

PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Fees	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking for political event
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 15/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/14/2023	<b>6</b> Payee name Austin-Bergstrom International Airport
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<b>7</b> Amount (\$) \$38.00	<b>8</b> Payee address; City; State; Zip Code 3600 Presidential Blvd  Austin, TX 78719
---------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Fees	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking for political event
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/03/2023	Payee name Austin-Bergstrom International Airport
--------------------	--

Amount (\$) \$6.50	Payee address; City; State; Zip Code 3600 Presidential Blvd  Austin, TX 78719
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff meal while traveling for political meetings
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 16/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/17/2023	<b>6</b> Payee name Austin-Bergstrom International Airport
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<b>7</b> Amount (\$) \$5.69	<b>8</b> Payee address; City; State; Zip Code 3600 Presidential Blvd  Austin, TX 78719
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff meal while traveling for political meetings
----------------------------------	--	---

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/17/2023	Payee name Austin-Bergstrom International Airport
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Amount (\$) \$33.80	Payee address; City; State; Zip Code 3600 Presidential Blvd  Austin, TX 78719
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff meal while traveling for political meetings
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 17/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/17/2023	<b>6</b> Payee name Austin-Bergstrom International Airport
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<b>7</b> Amount (\$) \$32.00	<b>8</b> Payee address; City; State; Zip Code 3600 Presidential Blvd  Austin, TX 78719
---------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff meal while traveling for political meetings
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/16/2023	Payee name Cajun Flavor Inc
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Amount (\$) \$4,300.00	Payee address; City; State; Zip Code 1744 Rose Ln  Beaumont, TX 77713
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for district fundraiser
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 18/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/20/2023	<b>6</b> Payee name Cajun Flavor Inc
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<b>7</b> Amount (\$) \$4,346.75	<b>8</b> Payee address; City; State; Zip Code 1744 Rose Ln  Beaumont, TX 77713
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for district fundraiser
----------------------------------	--	--

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/23/2023	Payee name Cambria Suites
--------------------	------------------------------

Amount (\$) \$217.35	Payee address; City; State; Zip Code 701 S Ware Rd  McAllen, TX 78501
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for political meetings
-------------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 19/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 11/29/2023	<b>6</b> Payee name Central Market #420
-----------------------------	--

<b>7</b> Amount (\$) \$518.97	<b>8</b> Payee address; City; State; Zip Code 4477 S Lamar Blvd  Austin, TX 78745
----------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for member/spouse Christmas event
----------------------------------	--	--

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/29/2023	Payee name City of Sulphur Springs
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Amount (\$) \$790.40	Payee address; City; State; Zip Code 1220 Cessna Dr  Sulphur Springs, TX 75482
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hangar fees for plane service
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 20/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/03/2023	<b>6</b> Payee name Cool River Cafe
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<b>7</b> Amount (\$) \$26.18	<b>8</b> Payee address; City; State; Zip Code 8091 Cedar Springs DR  Dallas, TX 75235
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch for campaign staff on political trip
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/13/2023	Payee name Cool River Cafe
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Amount (\$) \$87.82	Payee address; City; State; Zip Code 8091 Cedar Springs DR  Dallas, TX 75235
------------------------	---

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch for campaign staff on political trip
-------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 21/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/14/2023	<b>6</b> Payee name Cool River Cafe
-----------------------------	--

<b>7</b> Amount (\$) \$56.06	<b>8</b> Payee address; City; State; Zip Code 8091 Cedar Springs DR  Dallas, TX 75235
---------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch for campaign staff on political trip
----------------------------------	--	--

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/14/2023	Payee name Cool River Cafe
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Amount (\$) \$156.41	Payee address; City; State; Zip Code 8091 Cedar Springs DR  Dallas, TX 75235
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch for campaign staff on political trip
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 22/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 11/28/2023	<b>6</b> Payee name Cutter Aviation
-----------------------------	--

<b>7</b> Amount (\$) \$771.00	<b>8</b> Payee address; City; State; Zip Code 600 S Hangar Dr  Georgetown, TX 78628
----------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight services for campaign fundraiser
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/07/2023	Payee name Cutter Aviation
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Amount (\$) \$2,704.14	Payee address; City; State; Zip Code 600 S Hangar Dr  Georgetown, TX 78628
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight services for campaign fundraiser
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 23/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/27/2023	<b>6</b> Payee name DropBox Sign
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<b>7</b> Amount (\$) \$191.52	<b>8</b> Payee address; City; State; Zip Code 1800 Owens St  San Francisco, CA 94158
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign software subscription
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/28/2023	Payee name DropBox
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Amount (\$) \$212.13	Payee address; City; State; Zip Code 1800 Owens St  San Francisco, CA 94158
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign software subscription
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 24/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 09/02/2023	<b>6</b> Payee name El Alma Cafe y Cantina
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<b>7</b> Amount (\$) \$239.64	<b>8</b> Payee address; City; State; Zip Code 1025 Barton Springs Rd  Austin, TX 78704
----------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss campaign issues
----------------------------------	--	--

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/22/2023	Payee name Enterprise Rent-A-Car
--------------------	-------------------------------------

Amount (\$) \$491.74	Payee address; City; State; Zip Code 4352 I-35  Austin, TX 78745
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rental car for campaign staff on fundraising trip
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 25/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/06/2023	<b>6</b> Payee name Enterprise Rent-A-Car
-----------------------------	--

<b>7</b> Amount (\$) \$400.91	<b>8</b> Payee address; City; State; Zip Code 7366 Cedar Springs Rd  Dallas, TX 75235
----------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rental car for campaign staff on fundraising trip
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/14/2023	Payee name Flowers by Legacy
--------------------	---------------------------------

Amount (\$) \$214.26	Payee address; City; State; Zip Code 230 W Monroe St Ste 400  Evanston, IL 60606
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	--

PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Memorial flowers for staff family member
------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 26/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 07/05/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$15.37	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/11/2023	Payee name HEB #425
--------------------	------------------------

Amount (\$) \$126.15	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 27/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 08/21/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$69.64	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/23/2023	Payee name HEB #425
--------------------	------------------------

Amount (\$) \$337.07	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 28/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 08/24/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$39.02	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/07/2023	Payee name HEB #425
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Amount (\$) \$56.61	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 29/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 09/14/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$218.77	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/15/2023	Payee name HEB #425
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Amount (\$) \$273.19	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative member reception
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 30/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 09/21/2023	<b>6</b> Payee name HEB #425
-----------------------------	---------------------------------

<b>7</b> Amount (\$) \$327.09	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
----------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative member reception
----------------------------------	--	---

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/03/2023	Payee name HEB #425
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Amount (\$) \$380.16	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 31/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/03/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$142.95	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
----------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
----------------------------------	--	---

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/09/2023	Payee name HEB #425
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Amount (\$) \$34.64	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 32/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/11/2023	<b>6</b> Payee name HEB #425
-----------------------------	---------------------------------

<b>7</b> Amount (\$) \$37.02	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/12/2023	Payee name HEB #425
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Amount (\$) \$128.91	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 33/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/13/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$75.98	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/16/2023	Payee name HEB #425
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Amount (\$) \$39.21	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 34/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/17/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$176.04	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/19/2023	Payee name HEB #425
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Amount (\$) \$89.18	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 35/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 10/19/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$56.40	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for political fundraiser
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/23/2023	Payee name HEB #425
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Amount (\$) \$13.07	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 36/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/23/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$104.53	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/23/2023	Payee name HEB #425
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Amount (\$) \$40.71	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 37/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/23/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$154.37	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/25/2023	Payee name HEB #425
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Amount (\$) \$217.19	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 38/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 10/31/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$57.95	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/01/2023	Payee name HEB #425
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Amount (\$) \$243.00	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 39/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 11/01/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$68.52	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
----------------------------------	--	---

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/01/2023	Payee name HEB #425
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Amount (\$) \$94.01	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 40/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 11/03/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$16.94	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/06/2023	Payee name HEB #425
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Amount (\$) \$243.00	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78746
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 41/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 11/06/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$179.81	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/06/2023	Payee name HEB #425
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Amount (\$) \$87.89	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 42/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 11/07/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$60.21	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/08/2023	Payee name HEB #425
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Amount (\$) \$286.52	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 43/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 11/08/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$26.16	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2023	Payee name HEB #425
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Amount (\$) \$157.39	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 44/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 11/10/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$122.26	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/11/2023	Payee name HEB #425
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Amount (\$) \$275.11	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 45/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 11/13/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$266.35	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/13/2023	Payee name HEB #425
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Amount (\$) \$22.89	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 46/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 11/17/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$86.71	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/27/2023	Payee name HEB #425
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Amount (\$) \$122.38	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 47/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 11/27/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$194.99	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/27/2023	Payee name HEB #425
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Amount (\$) \$222.68	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 48/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 11/28/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$252.85	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for member/spouse Christmas event
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/28/2023	Payee name HEB #425
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Amount (\$) \$103.92	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 49/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 11/29/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$830.79	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for member/spouse Christmas event
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/30/2023	Payee name HEB #425
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Amount (\$) \$302.38	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for member/spouse Christmas event
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 50/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 12/01/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$29.80	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative families Christmas event
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/05/2023	Payee name HEB #425
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Amount (\$) \$29.99	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
------------------------	--

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 51/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 12/07/2023	<b>6</b> Payee name HEB #425
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<b>7</b> Amount (\$) \$141.02	<b>8</b> Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
----------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/12/2023	Payee name HEB #425
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Amount (\$) \$12.21	Payee address; City; State; Zip Code 1000 E 41 St  Austin, TX 78751
------------------------	--

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	--

PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for legislative office
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 52/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/04/2023	<b>6</b> Payee name Hertz #0769001
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<b>7</b> Amount (\$) \$332.86	<b>8</b> Payee address; City; State; Zip Code 4300 Westgrove Dr  Addison, TX 75001
----------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rental car for campaign staff on fundraising trip
----------------------------------	---	---

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/17/2023	Payee name Hertz #0769002
--------------------	------------------------------

Amount (\$) \$405.95	Payee address; City; State; Zip Code 16250 Midway Rd  Addison, TX 75001
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rental car for political meetings
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 53/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 07/10/2023	<b>6</b> Payee name Hilton Garden Inn
-----------------------------	--

<b>7</b> Amount (\$) \$113.90	<b>8</b> Payee address; City; State; Zip Code 3755 I-10  Beaumont, TX 77705
----------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/10/2023	Payee name Hilton Garden Inn
--------------------	---------------------------------

Amount (\$) \$126.40	Payee address; City; State; Zip Code 3755 I-10  Beaumont, TX 77705
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 54/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 09/26/2023	<b>6</b> Payee name Homewood Suites
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<b>7</b> Amount (\$) \$234.22	<b>8</b> Payee address; City; State; Zip Code 3745 I-10 Access Rd  Beaumont, TX 77705
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/27/2023	Payee name Homewood Suites
--------------------	-------------------------------

Amount (\$) \$81.13	Payee address; City; State; Zip Code 3745 I-10 Access Rd  Beaumont, TX 77705
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 55/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/18/2023	<b>6</b> Payee name Homewood Suites
-----------------------------	--

<b>7</b> Amount (\$) \$151.03	<b>8</b> Payee address; City; State; Zip Code 3745 I-10 Access Rd  Beaumont, TX 77705
----------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel In District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/18/2023	Payee name Homewood Suites
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Amount (\$) \$151.03	Payee address; City; State; Zip Code 3745 I-10 Access Rd  Beaumont, TX 77705
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel In District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 56/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/20/2023	<b>6</b> Payee name Homewood Suites
-----------------------------	--

<b>7</b> Amount (\$) \$176.07	<b>8</b> Payee address; City; State; Zip Code 3745 I-10 Access Rd  Beaumont, TX 77705
----------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel In District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/20/2023	Payee name Homewood Suites
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Amount (\$) \$155.07	Payee address; City; State; Zip Code 3745 I-10 Access Rd  Beaumont, TX 77705
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel In District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 57/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 08/09/2023	<b>6</b> Payee name Hyatt Hill Country Resort
-----------------------------	--

<b>7</b> Amount (\$) \$352.17	<b>8</b> Payee address; City; State; Zip Code 9800 Hyatt Resort Dr  San Antonio, TX 78251
----------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging while traveling for political fundraising
----------------------------------	--	--

<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/10/2023	Payee name Hyatt Hill Country Resort
--------------------	---

Amount (\$) \$522.08	Payee address; City; State; Zip Code 9800 Hyatt Resort Dr  San Antonio, TX 78251
-------------------------	---

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 58/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 08/10/2023	<b>6</b> Payee name Hyatt Hill Country Resort
-----------------------------	--

<b>7</b> Amount (\$) \$141.20	<b>8</b> Payee address; City; State; Zip Code 9800 Hyatt Resort Dr  San Antonio, TX 78251
----------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/20/2023	Payee name JOEY Uptown
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Amount (\$) \$191.28	Payee address; City; State; Zip Code 5045 Westheimer Rd Ste X-01  Houston, TX 77056
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss campaign issues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 59/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 09/28/2023	<b>6</b> Payee name JetsuiteX
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<b>7</b> Amount (\$) \$374.00	<b>8</b> Payee address; City; State; Zip Code 4561 W Empire Ave  Burbank, CA 91505
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airfare for campaign staff for political event
----------------------------------	---	--

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/24/2023	Payee name John Carver's
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Amount (\$) \$218.72	Payee address; City; State; Zip Code 509 Rio Grande St  Austin, TX 78701
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Member meeting to discuss legislative issues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 60/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 11/01/2023	<b>6</b> Payee name KUSA Aviation LLC
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<b>7</b> Amount (\$) \$1,521.94	<b>8</b> Payee address; City; State; Zip Code 4700 Hangar Drive, Hangar 5  Beaumont, TX 77705
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pilot services for political fundraising travel
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/06/2023	Payee name Le Meridien
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Amount (\$) \$16.14	Payee address; City; State; Zip Code 13402 Noel Rd  Dallas, TX 75240
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner for campaign staff on political trip
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 61/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/06/2023	<b>6</b> Payee name Le Meridien
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<b>7</b> Amount (\$) \$7.92	<b>8</b> Payee address; City; State; Zip Code 13402 Noel Rd  Dallas, TX 75240
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner for campaign staff on political trip
----------------------------------	--	---

<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/01/2023	Payee name Le Meridien
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Amount (\$) \$513.53	Payee address; City; State; Zip Code 13402 Noel Rd  Dallas, TX 75240
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 62/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/06/2023	<b>6</b> Payee name Le Meridien
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<b>7</b> Amount (\$) \$663.79	<b>8</b> Payee address; City; State; Zip Code 13402 Noel Rd  Dallas, TX 75240
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging while traveling for political fundraising
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/07/2023	Payee name Le Meridien
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Amount (\$) \$907.12	Payee address; City; State; Zip Code 13402 Noel Rd  Dallas, TX 75240
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 63/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 11/05/2023	<b>6</b> Payee name Lin Asian
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<b>7</b> Amount (\$) \$425.21	<b>8</b> Payee address; City; State; Zip Code 1203 W 6th St  Austin, TX 78703
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Member meeting to discuss legislative issues
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/03/2023	Payee name Marriott Dallas Quorum
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Amount (\$) \$302.98	Payee address; City; State; Zip Code 14901 Dallas Pkwy  Dallas, TX 75254
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 64/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/04/2023	<b>6</b> Payee name Marriott Dallas Quorum
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<b>7</b> Amount (\$) \$16.61	<b>8</b> Payee address; City; State; Zip Code 14901 Dallas Pkwy  Dallas, TX 75254
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/17/2023	Payee name Marriott Dallas Quorum
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Amount (\$) \$425.67	Payee address; City; State; Zip Code 14901 Dallas Pkwy  Dallas, TX 75254
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 65/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/17/2023	<b>6</b> Payee name Marriott Dallas Quorum
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<b>7</b> Amount (\$) \$371.42	<b>8</b> Payee address; City; State; Zip Code 14901 Dallas Pkwy  Dallas, TX 75254
----------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/05/2023	Payee name Marriott JW Houston
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Amount (\$) \$23.00	Payee address; City; State; Zip Code 5150 Westheimer Rd  Houston, TX 77056
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 66/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 09/05/2023	<b>6</b> Payee name Marriott JW Houston
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<b>7</b> Amount (\$) \$59.17	<b>8</b> Payee address; City; State; Zip Code 5150 Westheimer Rd  Houston, TX 77056
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/05/2023	Payee name Marriott JW Houston
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Amount (\$) \$163.34	Payee address; City; State; Zip Code 5150 Westheimer Rd  Houston, TX 77056
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 67/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 09/08/2023	<b>6</b> Payee name Marriott JW Houston
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<b>7</b> Amount (\$) \$25.36	<b>8</b> Payee address; City; State; Zip Code 5150 Westheimer Rd  Houston, TX 77056
---------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/20/2023	Payee name Marriott JW Houston
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Amount (\$) \$552.27	Payee address; City; State; Zip Code 5150 Westheimer Rd  Houston, TX 77056
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 68/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 09/20/2023	<b>6</b> Payee name Marriott JW Houston
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<b>7</b> Amount (\$) \$665.70	<b>8</b> Payee address; City; State; Zip Code 5150 Westheimer Rd  Houston, TX 77056
----------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging while traveling for political fundraising
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/20/2023	Payee name Marriott JW Houston
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Amount (\$) \$536.20	Payee address; City; State; Zip Code 5150 Westheimer Rd  Houston, TX 77056
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for campaign staff while traveling for political fundraising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 69/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 07/11/2023	<b>6</b> Payee name Microsoft
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<b>7</b> Amount (\$) \$27.06	<b>8</b> Payee address; City; State; Zip Code One Microsoft Way  Redmond, WA 98052
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign software subscription
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/25/2023	Payee name Microsoft
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Amount (\$) \$75.76	Payee address; City; State; Zip Code One Microsoft Way  Redmond, WA 98052
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign software subscription
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 70/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 08/11/2023	<b>6</b> Payee name Microsoft
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<b>7</b> Amount (\$) \$27.06	<b>8</b> Payee address; City; State; Zip Code One Microsoft Way  Redmond, WA 98052
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign software subscription
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/11/2023	Payee name Microsoft
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Amount (\$) \$27.06	Payee address; City; State; Zip Code One Microsoft Way  Redmond, WA 98052
------------------------	--

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	--

PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign software subscription
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 71/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/11/2023	<b>6</b> Payee name Microsoft
-----------------------------	----------------------------------

<b>7</b> Amount (\$) \$27.06	<b>8</b> Payee address; City; State; Zip Code One Microsoft Way  Redmond, WA 98052
---------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign software subscription
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/01/2023	Payee name Microsoft
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Amount (\$) \$75.76	Payee address; City; State; Zip Code One Microsoft Way  Redmond, WA 98052
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign software subscription
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 72/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 11/11/2023	<b>6</b> Payee name Microsoft
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<b>7</b> Amount (\$) \$27.06	<b>8</b> Payee address; City; State; Zip Code One Microsoft Way  Redmond, WA 98052
---------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign software subscription
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/11/2023	Payee name Microsoft
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Amount (\$) \$27.06	Payee address; City; State; Zip Code One Microsoft Way  Redmond, WA 98052
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign software subscription
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 73/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/07/2023	<b>6</b> Payee name Million Air El Paso
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<b>7</b> Amount (\$) \$1,939.95	<b>8</b> Payee address; City; State; Zip Code 1800 Hawkins Blvd  El Paso, TX 79925
------------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel and hangar fees for flight services for campaign fundraising trip
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/30/2023	Payee name Myweddingteam.com
--------------------	---------------------------------

Amount (\$) \$1,299.00	Payee address; City; State; Zip Code PO Box 20817  Beaumont, TX 77720
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Event Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies and equipment for political fundraiser
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 74/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 09/20/2023	<b>6</b> Payee name Nobu Houston
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<b>7</b> Amount (\$) \$200.05	<b>8</b> Payee address; City; State; Zip Code 5115 Westheimer rd Ste C-3515  Houston, TX 77056
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss campaign issues
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/17/2023	Payee name Office Depot
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Amount (\$) \$65.19	Payee address; City; State; Zip Code 2101 S Lamar Blvd  Austin, TX 78704
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 75/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/17/2023	<b>6</b> Payee name Office Depot
-----------------------------	-------------------------------------

<b>7</b> Amount (\$) \$250.45	<b>8</b> Payee address; City; State; Zip Code 9600 I-35  Austin, TX 78748
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies for campaign office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/28/2023	Payee name Party City
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Amount (\$) \$579.42	Payee address; City; State; Zip Code 5601 Brodie Ln  Austin, TX 78745
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Event Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for member/spouse Christmas event
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 76/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
--	----

<b>5</b> Date 08/19/2023	<b>6</b> Payee name Ready Refresh
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<b>7</b> Amount (\$) \$343.86	<b>8</b> Payee address; City; State; Zip Code PO Box 856680  Louisville, KY 40285-6680
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Water service of legislative office
----------------------------------	---	---

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/20/2023	Payee name Ready Refresh
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Amount (\$) \$487.71	Payee address; City; State; Zip Code PO Box 856680  Louisville, KY 40285-6680
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Water service of legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 77/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/19/2023	<b>6</b> Payee name Ready Refresh
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<b>7</b> Amount (\$) \$910.43	<b>8</b> Payee address; City; State; Zip Code PO Box 856680  Louisville, KY 40285-6680
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Water service of legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/21/2023	Payee name Ready Refresh
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Amount (\$) \$428.75	Payee address; City; State; Zip Code PO Box 856680  Louisville, KY 40285-6680
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Water service of legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 78/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/20/2023	<b>6</b> Payee name Ready Refresh
-----------------------------	--------------------------------------

<b>7</b> Amount (\$) \$209.63	<b>8</b> Payee address; City; State; Zip Code PO Box 856680  Louisville, KY 40285-6680
----------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Water service of legislative office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/06/2023	Payee name Sam's Packing Store
--------------------	-----------------------------------

Amount (\$) \$503.63	Payee address; City; State; Zip Code 4350 E Lucas Dr  Beaumont, TX 77708
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Provisions for political fundraiser
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 79/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 09/06/2023	<b>6</b> Payee name Save on Crafts
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<b>7</b> Amount (\$) \$618.71	<b>8</b> Payee address; City; State; Zip Code 106 Tc-1-235  Piedmont, SC 29673
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ornaments for legislative member Christmas event
----------------------------------	--	--

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/05/2023	Payee name Second Bar + Kitchen
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Amount (\$) \$156.65	Payee address; City; State; Zip Code 3600 Presidential Blvd  Austin, TX 78719
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff luncheon
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 80/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/03/2023	<b>6</b> Payee name Second Bar + Kitchen
-----------------------------	---

<b>7</b> Amount (\$) \$73.71	<b>8</b> Payee address; City; State; Zip Code 3600 Presidential Blvd  Austin, TX 78719
---------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff luncheon
----------------------------------	--	---

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/13/2023	Payee name Shoal Creek Saloon
--------------------	----------------------------------

Amount (\$) \$205.91	Payee address; City; State; Zip Code 909 N Lamar Blvd  Austin, TX 78703
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Member meeting to discuss legislative issues
-------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 81/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 11/14/2023	<b>6</b> Payee name Shoal Creek Saloon
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<b>7</b> Amount (\$) \$221.78	<b>8</b> Payee address; City; State; Zip Code 909 N Lamar Blvd  Austin, TX 78703
----------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Member meeting to discuss legislative issues
----------------------------------	--	--

<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/05/2023	Payee name Sienna Tavern
--------------------	-----------------------------

Amount (\$) \$161.95	Payee address; City; State; Zip Code 51 W Kinzie St  Chicago, IL 60654
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss campaign issues
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 82/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 09/06/2023	<b>6</b> Payee name Sienna Tavern
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<b>7</b> Amount (\$) \$82.06	<b>8</b> Payee address; City; State; Zip Code 51 W Kinzie St  Chicago, IL 60654
---------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss campaign issues
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/26/2023	Payee name SimpliSafe Inc
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Amount (\$) \$18.18	Payee address; City; State; Zip Code 100 Summer St Ste 300  Boston, MA 02110-2151
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security expense for campaign office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 83/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 08/17/2023	<b>6</b> Payee name SimpliSafe Inc
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<b>7</b> Amount (\$) \$32.46	<b>8</b> Payee address; City; State; Zip Code 100 Summer St Ste 300  Boston, MA 02110-2151
---------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security expense for campaign office
----------------------------------	---	--

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/26/2023	Payee name SimpliSafe Inc
--------------------	------------------------------

Amount (\$) \$30.30	Payee address; City; State; Zip Code 100 Summer St Ste 300  Boston, MA 02110-2151
------------------------	--

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security expense for campaign office
-------------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 84/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
--	----

<b>5</b> Date 09/17/2023	<b>6</b> Payee name SimpliSafe Inc
-----------------------------	---------------------------------------

<b>7</b> Amount (\$) \$32.46	<b>8</b> Payee address; City; State; Zip Code 100 Summer St Ste 300  Boston, MA 02110-2151
---------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security expense for campaign office
----------------------------------	---	--

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 10/17/2023	Payee name SimpliSafe Inc
--------------------	------------------------------

Amount (\$) \$32.46	Payee address; City; State; Zip Code 100 Summer St Ste 300  Boston, MA 02110-2151
------------------------	--

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security expense for campaign office
-------------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 85/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 11/17/2023	<b>6</b> Payee name SimpliSafe Inc
-----------------------------	---------------------------------------

<b>7</b> Amount (\$) \$32.46	<b>8</b> Payee address; City; State; Zip Code 100 Summer St Ste 300  Boston, MA 02110-2151
---------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security expense for campaign office
----------------------------------	---	--

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 12/17/2023	Payee name SimpliSafe Inc
--------------------	------------------------------

Amount (\$) \$32.46	Payee address; City; State; Zip Code 100 Summer St Ste 300  Boston, MA 02110-2151
------------------------	--

<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security expense for campaign office
-------------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 86/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 09/17/2023	<b>6</b> Payee name Southwest Airlines
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<b>7</b> Amount (\$) \$8.00	<b>8</b> Payee address; City; State; Zip Code PO Box 36611  Dallas, TX 75235
--------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Inflight wifi fee for campaign work
----------------------------------	---	---

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 10/05/2023	Payee name Southwest Airlines
--------------------	----------------------------------

Amount (\$) \$8.00	Payee address; City; State; Zip Code PO Box 36611  Dallas, TX 75235
-----------------------	--

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	--

PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Inflight wifi fee for campaign work
------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 87/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
--	----

<b>5</b> Date 10/05/2023	<b>6</b> Payee name Southwest Airlines
-----------------------------	---

<b>7</b> Amount (\$) \$8.00	<b>8</b> Payee address; City; State; Zip Code PO Box 36611  Dallas, TX 75235
--------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Fees	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Inflight wifi fee for campaign work
----------------------------------	---	---

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/05/2023	Payee name Southwest Airlines
--------------------	----------------------------------

Amount (\$) \$8.00	Payee address; City; State; Zip Code PO Box 36611  Dallas, TX 75235
-----------------------	--

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	--

PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Fees	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Inflight wifi fee for campaign work
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 88/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 07/31/2023	<b>6</b> Payee name Southwest Airlines
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<b>7</b> Amount (\$) \$487.96	<b>8</b> Payee address; City; State; Zip Code PO Box 36611  Dallas, TX 75235
----------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airfare for campaign staff for political event
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/05/2023	Payee name Southwest Airlines
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Amount (\$) \$320.86	Payee address; City; State; Zip Code PO Box 36611  Dallas, TX 75235
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airfare for campaign staff for political event
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 89/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 09/28/2023	<b>6</b> Payee name Southwest Airlines
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<b>7</b> Amount (\$) \$258.98	<b>8</b> Payee address; City; State; Zip Code PO Box 36611  Dallas, TX 75235
----------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airfare for campaign staff for political event
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/03/2023	Payee name Southwest Airlines
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Amount (\$) \$281.90	Payee address; City; State; Zip Code PO Box 36611  Dallas, TX 75235
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airfare for campaign staff for political event
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 90/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/11/2023	<b>6</b> Payee name Southwest Airlines
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<b>7</b> Amount (\$) \$313.90	<b>8</b> Payee address; City; State; Zip Code PO Box 36611  Dallas, TX 75235
----------------------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airfare for campaign staff for political event
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/11/2023	Payee name Southwest Airlines
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Amount (\$) \$386.98	Payee address; City; State; Zip Code PO Box 36611  Dallas, TX 75235
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airfare for campaign staff for political event
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 91/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/13/2023	<b>6</b> Payee name Southwest Airlines
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<b>7</b> Amount (\$) \$669.79	<b>8</b> Payee address; City; State; Zip Code PO Box 36611  Dallas, TX 75235
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airfare for campaign staff for political event
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/09/2023	Payee name Spectrum
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Amount (\$) \$302.07	Payee address; City; State; Zip Code 400 Atlantic St  Stamford, CT 06901
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet for campaign office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 92/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 08/09/2023	<b>6</b> Payee name Spectrum
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<b>7</b> Amount (\$) \$302.07	<b>8</b> Payee address; City; State; Zip Code 400 Atlantic St  Stamford, CT 06901
----------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet for campaign office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/09/2023	Payee name Spectrum
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Amount (\$) \$302.07	Payee address; City; State; Zip Code 400 Atlantic St  Stamford, CT 06901
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet for campaign office
------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 93/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/09/2023	<b>6</b> Payee name Spectrum
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<b>7</b> Amount (\$) \$296.07	<b>8</b> Payee address; City; State; Zip Code 400 Atlantic St  Stamford, CT 06901
----------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet for campaign office
----------------------------------	---	--

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2023	Payee name Spectrum
--------------------	------------------------

Amount (\$) \$302.07	Payee address; City; State; Zip Code 400 Atlantic St  Stamford, CT 06901
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	--

PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet for campaign office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 94/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/09/2023	<b>6</b> Payee name Spectrum
-----------------------------	---------------------------------

<b>7</b> Amount (\$) \$302.07	<b>8</b> Payee address; City; State; Zip Code 400 Atlantic St  Stamford, CT 06901
----------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet for campaign office
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/13/2023	Payee name Tumble 22
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Amount (\$) \$85.19	Payee address; City; State; Zip Code 2304 Lake Austin Blvd  Austin, TX 78703
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss campaign issues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 95/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 10/16/2023	<b>6</b> Payee name Tumble 22
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<b>7</b> Amount (\$) \$127.86	<b>8</b> Payee address; City; State; Zip Code 2304 Lake Austin Blvd  Austin, TX 78703
----------------------------------	--

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting to discuss campaign issues
----------------------------------	--	--

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/06/2023	Payee name USPS
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Amount (\$) \$388.00	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW  Washington, DC 20260
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense USPS PO box fee for campaign office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 96/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 07/11/2023	<b>6</b> Payee name Uber
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<b>7</b> Amount (\$) \$19.20	<b>8</b> Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
----------------------------------	---	---

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/20/2023	Payee name Uber
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Amount (\$) \$31.04	Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 97/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 09/23/2023	<b>6</b> Payee name Uber
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<b>7</b> Amount (\$) \$5.00	<b>8</b> Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
----------------------------------	---	---

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/23/2023	Payee name Uber
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Amount (\$) \$14.91	Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 98/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 09/28/2023	<b>6</b> Payee name Uber
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<b>7</b> Amount (\$) \$9.09	<b>8</b> Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/28/2023	Payee name Uber
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Amount (\$) \$45.48	Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 99/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/06/2023	<b>6</b> Payee name Uber
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<b>7</b> Amount (\$) \$16.10	<b>8</b> Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/06/2023	Payee name Uber
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Amount (\$) \$23.41	Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 100/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/06/2023	<b>6</b> Payee name Uber
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<b>7</b> Amount (\$) \$3.91	<b>8</b> Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/06/2023	Payee name Uber
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Amount (\$) \$19.57	Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 101/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/21/2023	<b>6</b> Payee name Uber
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<b>7</b> Amount (\$) \$44.94	<b>8</b> Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/22/2023	Payee name Uber
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Amount (\$) \$6.74	Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 102/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 10/22/2023	<b>6</b> Payee name Uber
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<b>7</b> Amount (\$) \$50.98	<b>8</b> Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2023	Payee name Uber
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Amount (\$) \$38.40	Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 103/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 12/05/2023	<b>6</b> Payee name Uber
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<b>7</b> Amount (\$) \$7.38	<b>8</b> Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/13/2023	Payee name Uber
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Amount (\$) \$4.47	Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 104/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/13/2023	<b>6</b> Payee name Uber
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<b>7</b> Amount (\$) \$27.53	<b>8</b> Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/13/2023	Payee name Uber
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Amount (\$) \$30.02	Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 105/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 12/14/2023	<b>6</b> Payee name Uber
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<b>7</b> Amount (\$) \$36.45	<b>8</b> Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/14/2023	Payee name Uber
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Amount (\$) \$15.03	Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel Out of District	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 106/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/14/2023	<b>6</b> Payee name Uber
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<b>7</b> Amount (\$) \$8.14	<b>8</b> Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/14/2023	Payee name Uber
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Amount (\$) \$34.12	Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 107/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/14/2023	<b>6</b> Payee name Uber
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<b>7</b> Amount (\$) \$18.91	<b>8</b> Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/14/2023	Payee name Uber
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Amount (\$) \$18.72	Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 108/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 12/15/2023	<b>6</b> Payee name Uber
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<b>7</b> Amount (\$) \$41.70	<b>8</b> Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2023	Payee name Uber
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Amount (\$) \$2.56	Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 109/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 12/31/2023	<b>6</b> Payee name Uber
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<b>7</b> Amount (\$) \$0.58	<b>8</b> Payee address; City; State; Zip Code 1455 Market St Ste 400 4th Floor  San Francisco, CA 94103
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff rideshare fee for campaign travel
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/28/2023	Payee name University of Texas Center for Professional Development
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Amount (\$) \$3,899.00	Payee address; City; State; Zip Code 1616 Guadalupe St, UTA Bldg, Ste. 3.302,  Austin, TX 78701
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Professional training course for campaign staff
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 110/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 11/27/2023	<b>6</b> Payee name Uptown Sports Club
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<b>7</b> Amount (\$) \$252.65	<b>8</b> Payee address; City; State; Zip Code 1200 E 6th St  Austin, TX 78702
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Member meeting to discuss legislative issues
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/27/2023	Payee name Uptown Sports Club
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Amount (\$) \$42.32	Payee address; City; State; Zip Code 1200 E 6th St  Austin, TX 78702
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Member meeting to discuss legislative issues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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  
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.

<b>1</b> Total pages Schedule F4: Sch: 111/111 Rpt:	<b>2</b> FILER NAME Phelan, Matthew M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00062288
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>
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<b>5</b> Date 08/21/2023	<b>6</b> Payee name Zoom
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<b>7</b> Amount (\$) \$159.80	<b>8</b> Payee address; City; State; Zip Code 55 Almaden Blvd  San Jose, CA 95113
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software subscription for campaign use
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/27/2023	Payee name Zoom
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Amount (\$) \$159.80	Payee address; City; State; Zip Code 55 Almaden Blvd  San Jose, CA 95113
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software subscription for campaign use
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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