

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

| | | | |
|---|---|--|--|
| 1 Filer ID (Ethics Commission Filers) 00084254 | 2 Total pages filed: 58 | OFFICE USE ONLY | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR The Honorable | FIRST Cody T. | MI MI |
| | NICKNAME | LAST Vasut | SUFFIX |
| 4 ORIGINAL REPORT TYPE | <input checked="" type="checkbox"/> January 15 | <input type="checkbox"/> Runoff | <input type="checkbox"/> Other (specify) |
| | <input type="checkbox"/> July 15 | <input type="checkbox"/> Exceeded modified reporting limit | |
| | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) | |
| | <input type="checkbox"/> 8th day before election | <input type="checkbox"/> Final Report (Attach C/OH-FR) | |
| 5 ORIGINAL PERIOD COVERED | Month Day Year 07/01/2023 | THROUGH | Month Day Year 12/31/2023 |
| 6 EXPLANATION OF CORRECTION On initial review, the UTC time of a donation I made to Wes Virdell stated 1/1/24, but on further inspection, the donation had actually been made on the evening of 12/31/23 CST. I have added it to my F4. | | | |

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

The Honorable Cody T. Vasut

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

| | | | | | |
|---|---|---|--|--|--|
| The C/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00084254 | 2 Total pages filed: 58 | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR The Honorable | FIRST Cody T. | MI | OFFICE USE ONLY | |
| | NICKNAME | LAST Vasut | SUFFIX | | Date Received ELECTRONICALLY FILED 01/17/2024 |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; P O BOX 2724 | | ZIP CODE | Date Hand-delivered or Date Postmarked | |
| | ANGLETON, TX 77516 | | | Receipt # | |
| | | | | Amount | |
| | | | | Date Processed | |
| | | | | Date Imaged | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR Mr. | FIRST Cody Thane | MI | | |
| | NICKNAME | LAST Vasut | SUFFIX | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); P.O. Box 2724 | | APT / SUITE #; | CITY; | |
| | Angleton, TX 77516 | | | STATE; ZIP CODE | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION | | |
| | (979) | 481-0715 | | | |
| 8 REPORT TYPE | <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) | | | | |
| | <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR) | | | | |
| 9 PERIOD COVERED | Month | Day | Year | Month | |
| | 07 | 01 | 2023 | 12 | |
| | | THROUGH | 12/31/2023 | | |
| 10 ELECTION | ELECTION DATE | | ELECTION TYPE | | |
| | Month | Day | Year | <input type="checkbox"/> Primary | <input type="checkbox"/> Runoff |
| | | | <input type="checkbox"/> General | <input type="checkbox"/> Special | <input type="checkbox"/> Other |
| 11 OFFICE | OFFICE HELD (if any) State Representative District 25 | | 12 OFFICE SOUGHT (if known) State Representative District 25 | | |
| | | | | | |

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

3 of 58

| | |
|--|---|
| 13 C / OH NAME Vasut, Cody T. (The Honorable) | 14 Filer ID (Ethics Commission Filers) 00084254 |
|--|---|

| | | |
|---|--|--|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | |
| | <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE TYPE COMMITTEE NAME Texas Alliance for Life PAC |
| | | COMMITTEE ADDRESS 8000 Centre Park Drive Suite 380 Austin, TX 78754 |
| | | COMMITTEE CAMPAIGN TREASURER NAME Shaw, James |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS 4505 Corazon Cv Round Rock, TX 78681 |

| | | |
|--------------------------------|---|--------------|
| 16 CONTRIBUTION TOTALS | 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) | \$ 69,110.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 59,138.05 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 47,191.88 |
| OUTSTANDING LOAN TOTALS | 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 Cody T. Vasut
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

SUBTOTALS - C/OH

| | |
|--|---|
| 18 FILER NAME Vasut, Cody T. (The Honorable) | 19 Filer ID (Ethics Commission Filers) 00084254 |
|--|---|

| 20 SCHEDULE SUBTOTALS | | SUBTOTAL AMOUNT |
|------------------------------|--|-----------------|
| NAME OF SCHEDULE | | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 50,410.00 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 18,700.00 |
| 3. | <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ 2,500.00 |
| 4. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 55,521.34 |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 5,686.49 |
| 9. | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ 285.00 |
| 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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 42.47 |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/3 Rpt: 5/58 |
| 2 FILER NAME Vasut, Cody T. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 11/28/2023 | 5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00829713) CareSource Mission PAC <hr/> 6 Contributor address; City; State; Zip Code Columbus, OH 43215-4255 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 12/26/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, David <hr/> Contributor address; City; State; Zip Code Mansfield, TX 76063-1705 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) State Representative | | Employer (See Instructions) State of Texas |
| Date 12/11/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cordoba, Jason <hr/> Contributor address; City; State; Zip Code Lake Jackson, TX 77566 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Cordoba Law Firm |
| Date 09/19/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Clark <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Sound Designer | | Employer (See Instructions) Self |
| Date 09/25/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davenport, Tobey <hr/> Contributor address; City; State; Zip Code Freeport, TX 77541 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/3 Rpt: 6/58 |
| 2 FILER NAME Vasut, Cody T. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 12/16/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fratila, Barbara <hr/> 6 Contributor address; City; State; Zip Code Lake Jackson, TX 77566 | 7 Amount of Contribution (\$) \$60.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) Furey Law Firm |
| Date 11/10/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Invenergy Investment Company, LLC <hr/> Contributor address; City; State; Zip Code Chicago, IL 60606 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/23/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Donald <hr/> Contributor address; City; State; Zip Code Lake Jackson, TX 77566 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) County Commissioner, Precinct 1 | | Employer (See Instructions) Brazoria County |
| Date 11/09/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartz, Page & Harding, L.L.P. <hr/> Contributor address; City; State; Zip Code Houston, TX 77056 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 08/10/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$45,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/3 Rpt: 7/58 |
| 2 FILER NAME Vasut, Cody T. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 10/18/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Chemical Council / Association of Chemical Industry of Texas | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code Austin, TX 78701-1586 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|---|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 1/1 Rpt: 8/58 | |
| 2 FILER NAME Vasut, Cody T. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084254 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 12/07/2023 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulanek, Kristin | 8 Amount of contribution (\$) \$200.00 | 9 In-kind contribution description Shrimp stuff dinner and dessert for auction |
| | 7 Contributor address; City; State; Zip Code Freeport, TX 77541 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Tax Assessor Collector | | 11 Employer (FOR NON-JUDICIAL) (See instructions) Brazoria County | |
| 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 09/27/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phelan, Dade | Amount of contribution (\$) \$18,500.00 | In-kind contribution description Polling. Not at direction of candidate. |
| | Contributor address; City; State; Zip Code Austin, TX 78763 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Speaker of the House | | Employer (FOR NON-JUDICIAL) (See instructions) State of Texas | |
| Contributor's principal occupation (FOR JUDICIAL) | | Contributor's job title (FOR JUDICIAL) (See instructions) | |
| Contributor's employer/law firm (FOR JUDICIAL) | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

PLEGGED CONTRIBUTIONS

SCHEDULE B

| | | | |
|--|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule B: Sch: 1/1 Rpt: 9/58 | |
| 2 FILER NAME Vasut, Cody T. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084254 | |
| 4 TOTAL OF UNITEMIZED PLEDGES | | \$ 0.00 | |
| 5 Date 12/12/2023 | 6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dow, Inc. Political Action Committee <hr/> 7 Pledgor Address; City; State; Zip Code Midland, MI 48674 | 8 Amount of pledge (\$) \$2,500.00 | 9 In-kind description (If applicable) |
| 10 Principal occupation / Job title (See Instructions) | | 11 Employer (See Instructions) | |

Check if travel outside of Texas. Complete Schedule T.

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 1/31 Rpt: 10/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 10/24/2023 | 5 Payee name AHS Cheer Booster Club | |
| 6 Amount (\$) \$50.00 | 7 Payee address; City; State; Zip Code 1 Campus Drive Angleton, TX 77515 | |
| 8 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 Donation |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/26/2023 | Payee name Alvin Sun & Advertiser | |
| Amount (\$) \$112.17 | Payee address; City; State; Zip Code 570 Dula Street Alvin, TX 77511 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print ad |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/19/2023 | Payee name Anedot, Inc. | |
| Amount (\$) \$2.30 | Payee address; City; State; Zip Code 1340 Poydras St., Suite 1770 New Orleans, LA 70112-5204 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card 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.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 2/31 Rpt: 11/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
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|-----------------------------|-------------------------------------|
| 4 Date 12/11/2023 | 5 Payee name Anedot, Inc. |
|-----------------------------|-------------------------------------|

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|---------------------------------|---|
| 6 Amount (\$) \$40.30 | 7 Payee address; City; State; Zip Code 1340 Poydras St., Suite 1770 New Orleans, LA 70112-5204 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee |
|---------------------------------|---|--|

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|--|-----------------------------|---------------|-------------|
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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|--------------------|----------------------------|
| Date 12/16/2023 | Payee name Anedot, Inc. |
|--------------------|----------------------------|

| | |
|-----------------------|--|
| Amount (\$) \$2.70 | Payee address; City; State; Zip Code 1340 Poydras St., Suite 1770 New Orleans, LA 70112-5204 |
|-----------------------|--|

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

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

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|--------------------|--|
| Date 08/22/2023 | Payee name Angleton Danbury Lion's Club |
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|-------------------------|---|
| Amount (\$) \$100.00 | Payee address; City; State; Zip Code P.O. Box 1153 Angleton, TX 77516 |
|-------------------------|---|

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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 Donation |
|-------------------------------|--|--|

| | | | |
|---|-----------------------------|---------------|-------------|
| Complete ONLY 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.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 3/31 Rpt: 12/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 09/04/2023 | 5 Payee name Bank of America Center | |
| 6 Amount (\$) \$28.15 | 7 Payee address; City; State; Zip Code 700 Louisiana Street Houston, TX 77002 | |
| 8 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 Parking for legislative meeting |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/24/2023 | Payee name Bay Area Council | |
| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 3020 53rd St. Galveston, TX 77551 | |
| 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 Donation |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/29/2023 | Payee name Berry Communications | |
| Amount (\$) \$16,500.00 | Payee address; City; State; Zip Code 1014 W Milton St Austin, TX 78704 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 4/31 Rpt: 13/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
|---|---|--|

| | |
|-----------------------------|---|
| 4 Date 08/29/2023 | 5 Payee name Brazoria County Fair Association |
|-----------------------------|---|

| | |
|----------------------------------|--|
| 6 Amount (\$) \$150.00 | 7 Payee address; City; State; Zip Code 901 S. Downing Road Angleton, TX 77515 |
|----------------------------------|--|

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| 8 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 Tickets to fundraiser |
|---------------------------------|--|---|

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|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|--|
| Date 09/09/2023 | Payee name Brazoria County Fair Association |
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|-------------------------|---|
| Amount (\$) \$300.00 | Payee address; City; State; Zip Code 901 S. Downing Road Angleton, TX 77515 |
|-------------------------|---|

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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 Donation |
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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 10/20/2023 | Payee name Brazoria County Fair Association |
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| Amount (\$) \$1,400.00 | Payee address; City; State; Zip Code 901 S. Downing Road Angleton, TX 77515 |
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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 Donation, purchase of art at student art auction for capitol 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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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: Sch: 5/31 Rpt: 14/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 07/29/2023 | 5 Payee name Brazoria County Hispanic Chamber of Commerce | |
| 6 Amount (\$) \$150.00 | 7 Payee address; City; State; Zip Code 200 West 2nd Street Suite #210 Freeport, TX 77541 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership dues |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/22/2023 | Payee name Brazoria County Hispanic Chamber of Commerce | |
| Amount (\$) \$40.00 | Payee address; City; State; Zip Code 200 West 2nd Street Suite #210 Freeport, TX 77541 | |
| 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 Ticket to county update |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/11/2023 | Payee name Brazoria County Republican Party | |
| Amount (\$) \$750.00 | Payee address; City; State; Zip Code 135 Spanish Oak Circle Lake Jackson, TX 77566 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing 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.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 6/31 Rpt: 15/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 07/15/2023 | 5 Payee name Brazoria Heritage Foundation | |
| 6 Amount (\$) \$500.00 | 7 Payee address; City; State; Zip Code 202 W Smith St, Brazoria, TX 77422 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Donation for auction purchase |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/25/2023 | Payee name Brazosport Area Chamber of Commerce | |
| Amount (\$) \$35.00 | Payee address; City; State; Zip Code 300 Abner Jackson Pkwy Lake Jackson, TX 77566 | |
| 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 Ticket to luncheon |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/21/2023 | Payee name Brazosport Cares | |
| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 916 N Gulf Blvd Freeport, TX 77541 | |
| 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 Donation |
| 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.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 7/31 Rpt: 16/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
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|-----------------------------|--|
| 4 Date 08/10/2023 | 5 Payee name Brazosport College Foundation |
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| 6 Amount (\$) \$300.00 | 7 Payee address; City; State; Zip Code 500 College Drive Lake Jackson, TX 77566 |
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| 8 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 Tickets to scholarship soiree |
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| 9 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 Brazosport College Foundation |
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| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 500 College Drive Lake Jackson, TX 77566 |
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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 Donation |
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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 09/24/2023 | Payee name Brazosport Republican Women |
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| Amount (\$) \$350.00 | Payee address; City; State; Zip Code 135 Spanish Oak Circle Lake Jackson, TX 77566 |
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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 Donation |
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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.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 8/31 Rpt: 17/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
|---|---|--|

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|-----------------------------|--|
| 4 Date 12/27/2023 | 5 Payee name Brazosport Republican Women |
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| 6 Amount (\$) \$15.00 | 7 Payee address; City; State; Zip Code 135 Spanish Oak Circle Lake Jackson, TX 77566 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Associate membership dues |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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|--------------------|---|
| Date 09/21/2023 | Payee name Campaign Advocacy Management Professionals, LLC |
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| Amount (\$) \$8,527.10 | Payee address; City; State; Zip Code 401 NE 46th Oklahoma City, OK 73105 |
|---------------------------|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailer |
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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 08/07/2023 | Payee name Chase Bank N.A. |
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|-------------------------|---|
| Amount (\$) \$602.00 | Payee address; City; State; Zip Code P.O. Box 15123 Wilmington, DE 19850-5123 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment - F4 7/5 and 8/1/23 |
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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.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 9/31 Rpt: 18/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 09/04/2023 | 5 Payee name Chase Bank N.A. | |
| 6 Amount (\$) \$1,440.00 | 7 Payee address; City; State; Zip Code P.O. Box 15123 Wilmington, DE 19850-5123 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense F4 8/16, 8/18 x 2, 8/25, 8/31 |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/20/2023 | Payee name Chase Bank N.A. | |
| Amount (\$) \$1,404.75 | Payee address; City; State; Zip Code P.O. Box 15123 Wilmington, DE 19850-5123 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense F4 9/10, 9/17, 9/18 |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/03/2023 | Payee name Chase Bank N.A. | |
| Amount (\$) \$444.83 | Payee address; City; State; Zip Code P.O. Box 15123 Wilmington, DE 19850-5123 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense F4 11/1 and 11/2 |
| 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.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 10/31 Rpt: 19/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 11/06/2023 | 5 Payee name Chase Bank N.A. | |
| 6 Amount (\$) \$146.00 | 7 Payee address; City; State; Zip Code P.O. Box 15123 Wilmington, DE 19850-5123 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense F4 11/2 |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/22/2023 | Payee name Chase Bank N.A. | |
| Amount (\$) \$1,140.20 | Payee address; City; State; Zip Code P.O. Box 15123 Wilmington, DE 19850-5123 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense F4 11/11, 11/14 x 2, 11/17, 11/18, 11/21 |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/13/2023 | Payee name Chase Bank N.A. | |
| Amount (\$) \$458.71 | Payee address; City; State; Zip Code P.O. Box 15123 Wilmington, DE 19850-5123 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense F4 11/29, 12/4 x 2, 12/5 |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 11/31 Rpt: 20/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 07/14/2023 | 5 Payee name Cirksena, MacKenzie | |
| 6 Amount (\$) \$125.00 | 7 Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/22/2023 | Payee name Cirksena, MacKenzie | |
| Amount (\$) \$125.00 | Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/31/2023 | Payee name Cirksena, MacKenzie | |
| Amount (\$) \$75.00 | Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
| 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.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 12/31 Rpt: 21/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 08/04/2023 | 5 Payee name Cirksena, MacKenzie | |
| 6 Amount (\$) \$75.00 | 7 Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/11/2023 | Payee name Cirksena, MacKenzie | |
| Amount (\$) \$75.00 | Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/18/2023 | Payee name Cirksena, MacKenzie | |
| Amount (\$) \$125.00 | Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 13/31 Rpt: 22/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 08/23/2023 | 5 Payee name Cirksena, MacKenzie | |
| 6 Amount (\$) \$75.00 | 7 Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/02/2023 | Payee name Cirksena, MacKenzie | |
| Amount (\$) \$75.00 | Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/08/2023 | Payee name Cirksena, MacKenzie | |
| Amount (\$) \$75.00 | Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
| 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.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 14/31 Rpt: 23/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 09/20/2023 | 5 Payee name Cirksena, MacKenzie | |
| 6 Amount (\$) \$75.00 | 7 Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/28/2023 | Payee name Cirksena, MacKenzie | |
| Amount (\$) \$150.00 | Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design. |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/06/2023 | Payee name Cirksena, MacKenzie | |
| Amount (\$) \$75.00 | Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 15/31 Rpt: 24/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 10/13/2023 | 5 Payee name Cirksena, MacKenzie | |
| 6 Amount (\$) \$75.00 | 7 Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/28/2023 | Payee name Cirksena, MacKenzie | |
| Amount (\$) \$150.00 | Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/04/2023 | Payee name Cirksena, MacKenzie | |
| Amount (\$) \$75.00 | Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
| 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.

| | | |
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| 1 Total pages Schedule F1: Sch: 16/31 Rpt: 25/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
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| 4 Date 11/21/2023 | 5 Payee name Cirksena, MacKenzie |
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| 6 Amount (\$) \$100.00 | 7 Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
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| 9 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 Cirksena, MacKenzie |
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| Amount (\$) \$125.00 | Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
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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 12/27/2023 | Payee name Cirksena, MacKenzie |
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| Amount (\$) \$75.00 | Payee address; City; State; Zip Code 1817 Shanks Road Angleton, TX 77515 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting and graphic design |
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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.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 17/31 Rpt: 26/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
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|-----------------------------|---|
| 4 Date 08/16/2023 | 5 Payee name City of Angleton |
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| 6 Amount (\$) \$20.00 | 7 Payee address; City; State; Zip Code 121 S Velasco Angleton, TX 77515 |
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| 8 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 Ticket to BCCA dinner |
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| 9 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 Columbia Brazoria FFA Alumni |
|--------------------|--|

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|-------------------------|--|
| Amount (\$) \$700.00 | Payee address; City; State; Zip Code PO BOX 1354 West Columbia, TX 77486 |
|-------------------------|--|

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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 Donation for auction purchase |
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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 12/14/2023 | Payee name Economic Development Alliance of Brazoria County |
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|-------------------------|---|
| Amount (\$) \$250.00 | Payee address; City; State; Zip Code 4005 Technology Drive Angleton, TX 77515 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership dues |
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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.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 18/31 Rpt: 27/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 11/02/2023 | 5 Payee name Exchange Club of Angleton | |
| 6 Amount (\$) \$100.00 | 7 Payee address; City; State; Zip Code P.O. Box 1196 Angleton, TX 77516 | |
| 8 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 Donation |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/04/2023 | Payee name Express Self Storage | |
| Amount (\$) \$85.00 | Payee address; City; State; Zip Code 1804 E Mulberry St Angleton, TX 77515 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign storage |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/02/2023 | Payee name Express Self Storage | |
| Amount (\$) \$85.00 | Payee address; City; State; Zip Code 1804 E Mulberry St Angleton, TX 77515 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign storage |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 19/31 Rpt: 28/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 09/02/2023 | 5 Payee name Express Self Storage | |
| 6 Amount (\$) \$85.00 | 7 Payee address; City; State; Zip Code 1804 E Mulberry St Angleton, TX 77515 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign storage |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/03/2023 | Payee name Express Self Storage | |
| Amount (\$) \$85.00 | Payee address; City; State; Zip Code 1804 E Mulberry St Angleton, TX 77515 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign storage |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/02/2023 | Payee name Express Self Storage | |
| Amount (\$) \$85.00 | Payee address; City; State; Zip Code 1804 E Mulberry St Angleton, TX 77515 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign storage |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 20/31 Rpt: 29/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 12/02/2023 | 5 Payee name Express Self Storage | |
| 6 Amount (\$) \$85.00 | 7 Payee address; City; State; Zip Code 1804 E Mulberry St Angleton, TX 77515 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign storage |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/10/2023 | Payee name Friends of the River San Bernard | |
| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 3199 Bernard Oaks St Brazoria, TX 77422 | |
| 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 Donation |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/14/2023 | Payee name Friends of the River San Bernard | |
| Amount (\$) \$20.00 | Payee address; City; State; Zip Code 3199 Bernard Oaks St Brazoria, TX 77422 | |
| 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 Ticket to fundraiser |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 21/31 Rpt: 30/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 08/10/2023 | 5 Payee name Greater Angleton Chamber of Commerce | |
| 6 Amount (\$) \$125.00 | 7 Payee address; City; State; Zip Code 222 N Velasco St Angleton, TX 77515 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership dues and donation |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/31/2023 | Payee name Harland Clarke | |
| Amount (\$) \$23.40 | Payee address; City; State; Zip Code 15955 La Cantera Parkway San Antonio, TX 78256 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense New check fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/11/2023 | Payee name Harvest for the Hungry | |
| Amount (\$) \$1,950.00 | Payee address; City; State; Zip Code 4302 FM 523 Freeport, TX 77541 | |
| 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 Donation for live auction |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 22/31 Rpt: 31/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 07/11/2023 | 5 Payee name Jaax, Edward | |
| 6 Amount (\$) \$300.00 | 7 Payee address; City; State; Zip Code 12716 Bransford Circle Austin, TX 78753 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/19/2023 | Payee name Jaax, Edward | |
| Amount (\$) \$600.00 | Payee address; City; State; Zip Code 12716 Bransford Circle Austin, TX 78753 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/22/2023 | Payee name Lake Jackson Civic Center | |
| Amount (\$) \$3,234.50 | Payee address; City; State; Zip Code 333 TX-332 Lake Jackson, TX 77566 | |
| 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 Rental for fundraiser |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 23/31 Rpt: 32/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
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| 4 Date 08/10/2023 | 5 Payee name Our Lady Queen of Peace Catholic School |
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|----------------------------------|---|
| 6 Amount (\$) \$500.00 | 7 Payee address; City; State; Zip Code 1600 FM 2004 Richwood, TX 77531 |
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| 8 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 Donation |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 10/04/2023 | Payee name Plantation House |
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| Amount (\$) \$291.19 | Payee address; City; State; Zip Code 402 Plantation Dr. Lake Jackson, TX 77566 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Framing for Brazoria County map for district 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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| Date 10/05/2023 | Payee name Refuge for Women |
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| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 117 Hwy 332 West Suite J #159 Lake Jackson, TX 77566 |
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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 Donation |
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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.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 24/31 Rpt: 33/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
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| 4 Date 10/28/2023 | 5 Payee name Rosharon Volunteer Fire Department |
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| 6 Amount (\$) \$200.00 | 7 Payee address; City; State; Zip Code 16435 FM 521 Rosharon, TX 77583 |
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| 8 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 Donation |
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| 9 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 SquareSpace, Inc. |
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| Amount (\$) \$175.88 | Payee address; City; State; Zip Code 225 VARICK ST FL 12 New York, NY 10014 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Campaign E-mail | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign e-mail account bill |
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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 10/26/2023 | Payee name SquareSpace, Inc. |
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|-------------------------|---|
| Amount (\$) \$268.63 | Payee address; City; State; Zip Code 225 VARICK ST FL 12 New York, NY 10014 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website |
|-------------------------------|--|---|

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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.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 25/31 Rpt: 34/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 08/24/2023 | 5 Payee name Stallman, Bo | |
| 6 Amount (\$) \$3,000.00 | 7 Payee address; City; State; Zip Code 110 Black Oak Angleton, TX 77515 | |
| 8 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 Donation for auction purchase |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/03/2023 | Payee name Sweeny Athletic Booster Club | |
| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 600 E Ashley-Wilson Road Sweeny, TX 77480 | |
| 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 Donation for helmet for capitol office |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/02/2023 | Payee name Sweeny Bulldog Athletics Booster | |
| Amount (\$) \$100.00 | Payee address; City; State; Zip Code 600 E Ashley-Wilson Rd Sweeny, TX 77480 | |
| 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 Donation |
| 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.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 26/31 Rpt: 35/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 07/20/2023 | 5 Payee name TJ Maxx | |
| 6 Amount (\$) \$36.78 | 7 Payee address; City; State; Zip Code 100 TX-332 Lake Jackson, TX 77566 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Decorations for district office |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held | |
| Date 11/17/2023 | Payee name Texas House of Representatives | |
| Amount (\$) \$33.12 | Payee address; City; State; Zip Code P.O. Box 2910 Austin, TX 78768 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Flags to donate to local non-profit or political auctions |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held | |
| Date 09/24/2023 | Payee name Texas Right to Life | |
| Amount (\$) \$259.07 | Payee address; City; State; Zip Code 4500 Bissonnet Street Suite 305 Bellaire, TX 77401 | |
| 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 Donation |
| | 9 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.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 27/31 Rpt: 36/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 11/21/2023 | 5 Payee name The Bulletin | |
| 6 Amount (\$) \$445.00 | 7 Payee address; City; State; Zip Code P.O. Box 2426 Angleton, TX 77516 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print ads |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/10/2023 | Payee name The Salvation Army | |
| Amount (\$) \$100.00 | Payee address; City; State; Zip Code 1618 N Avenue J Freeport, TX 77541 | |
| 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 Donation |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/26/2023 | Payee name The Salvation Army | |
| Amount (\$) \$100.00 | Payee address; City; State; Zip Code 1618 N Avenue J Freeport, TX 77541 | |
| 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 Donation |
| 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.

| | | |
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| 1 Total pages Schedule F1: Sch: 28/31 Rpt: 37/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
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| 4 Date 12/19/2023 | 5 Payee name Thimesch, Kronda |
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| 6 Amount (\$) \$250.00 | 7 Payee address; City; State; Zip Code 1301 Justin Road Suite 201-310 Lewisville, TX 75077 |
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| 8 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 Campaign contribution |
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| 9 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 True to Life Ministries |
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| Amount (\$) \$123.01 | Payee address; City; State; Zip Code 105 This Way Lake Jackson, TX 77566 |
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| 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 Tickets to 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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| Date 11/04/2023 | Payee name True to Life Ministries |
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| Amount (\$) \$1,000.00 | Payee address; City; State; Zip Code 105 This Way Lake Jackson, TX 77566 |
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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 Donation |
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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.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: Sch: 29/31 Rpt: 38/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 09/16/2023 | 5 Payee name Uprinting | |
| 6 Amount (\$) \$238.75 | 7 Payee address; City; State; Zip Code 8000 Haskell Ave. Van Nuys, CA 91406 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing 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 Printing for fundraiser |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/25/2023 | Payee name Uprinting | |
| Amount (\$) \$81.89 | Payee address; City; State; Zip Code 8000 Haskell Ave. Van Nuys, CA 91406 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing 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 Additional invitations to fundraiser |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/26/2023 | Payee name Vasut, Cody | |
| Amount (\$) \$10.00 | Payee address; City; State; Zip Code 4 Greystone Court Angleton, TX 77515 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Reimbursement | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement Schedule G December 11, 2021. |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 30/31 Rpt: 39/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 12/26/2023 | 5 Payee name Vasut, Cody | |
| 6 Amount (\$) \$180.00 | 7 Payee address; City; State; Zip Code 4 Greystone Court Angleton, TX 77515 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement Schedule G February 3, 2022 |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/26/2023 | Payee name Vasut, Cody | |
| Amount (\$) \$185.00 | Payee address; City; State; Zip Code 4 Greystone Court Angleton, TX 77515 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement Schedule G November 4, 2022 |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/20/2023 | Payee name Wal-Mart | |
| Amount (\$) \$110.91 | Payee address; City; State; Zip Code 702 SW 8TH ST Bentonville, AR 72716-6299 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing 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 Printer for district office |
| 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.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 31/31 Rpt: 40/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
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|-----------------------------|---|
| 4 Date 08/05/2023 | 5 Payee name West Pearland Republican Women PAC |
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| 6 Amount (\$) \$75.00 | 7 Payee address; City; State; Zip Code 8325 Broadway Suite 202, Box 27 Pearland, TX 77581-5773 |
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| 8 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 Donation |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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| Date 12/08/2023 | Payee name West Pearland Republican Women PAC |
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| Amount (\$) \$10.00 | Payee address; City; State; Zip Code 8325 Broadway Suite 202, Box 27 Pearland, TX 77581-5773 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Associate membership dues |
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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 09/09/2023 | Payee name Willing Workers 4-H of Brazoria County |
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| Amount (\$) \$200.00 | Payee address; City; State; Zip Code 21017 CR 171 Angleton, TX 77515 |
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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 Donation |
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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.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 1/12 Rpt: 41/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
|---|---|--|

| | |
|--|----|
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ |
|--|----|

| | |
|-----------------------------|---|
| 5 Date 11/14/2023 | 6 Payee name Austin Convention Center Parking |
|-----------------------------|---|

| | |
|---------------------------------|--|
| 7 Amount (\$) \$10.00 | 8 Payee address; City; State; Zip Code 117 1/2 Brazos Street Austin, TX 78701 |
|---------------------------------|--|

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

| | | |
|----------------------------------|---|--|
| 10 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 Parking for meeting with legislators |
|----------------------------------|---|--|

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

| | |
|--------------------|--|
| Date 11/21/2023 | Payee name B.I.G. Love Cancer Care Services |
|--------------------|--|

| | |
|-------------------------|---|
| Amount (\$) \$255.00 | Payee address; City; State; Zip Code P.O. Box 90818 Austin, TX 78709-0818 |
|-------------------------|---|

| | |
|----------------------------|--|
| 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) 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 Donation |
|-------------------------------|--|--|

| | | | |
|--|-----------------------------|---------------|-------------|
| 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.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 2/12 Rpt: 42/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
|---|---|--|

| | |
|--|----|
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ |
|--|----|

| | |
|-----------------------------|---|
| 5 Date 08/18/2023 | 6 Payee name Bank of America Center |
|-----------------------------|---|

| | |
|---------------------------------|--|
| 7 Amount (\$) \$40.00 | 8 Payee address; City; State; Zip Code 700 Louisiana Street Houston, TX 77002 |
|---------------------------------|--|

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

| | | |
|----------------------------------|---|--|
| 10 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 Parking for meeting with legislators |
|----------------------------------|---|--|

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

| | |
|--------------------|--------------------------------|
| Date 08/01/2023 | Payee name Bay Area Council |
|--------------------|--------------------------------|

| | |
|-------------------------|--|
| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 3020 53rd St. Galveston, TX 77551 |
|-------------------------|--|

| | |
|----------------------------|--|
| 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) 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 Donation |
|-------------------------------|--|--|

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

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

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.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 3/12 Rpt: 43/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
|---|---|--|

| | |
|--|----|
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ |
|--|----|

| | |
|-----------------------------|---|
| 5 Date 08/16/2023 | 6 Payee name Brazoria County Republican Party |
|-----------------------------|---|

| | |
|---------------------------------|---|
| 7 Amount (\$) \$30.00 | 8 Payee address; City; State; Zip Code 135 Spanish Oak Circle Lake Jackson, TX 77566 |
|---------------------------------|---|

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

| | | |
|----------------------------------|--|---|
| 10 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 Ticket to event |
|----------------------------------|--|---|

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

| | |
|--------------------|--|
| Date 07/05/2023 | Payee name Brazoria Heritage Foundation |
|--------------------|--|

| | |
|-------------------------|---|
| Amount (\$) \$102.00 | Payee address; City; State; Zip Code 202 W Smith St, Brazoria, TX 77422 |
|-------------------------|---|

| | |
|----------------------------|--|
| 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) 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 Tickets to event |
|-------------------------------|--|--|

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

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

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 - 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.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 4/12 Rpt: 44/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
|---|---|--|

| | |
|--|----|
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ |
|--|----|

| | |
|-----------------------------|---|
| 5 Date 11/01/2023 | 6 Payee name Capitol Commission Texas |
|-----------------------------|---|

| | |
|----------------------------------|---|
| 7 Amount (\$) \$250.00 | 8 Payee address; City; State; Zip Code 12302 Marshall Dr. Magnolia, TX 77354 |
|----------------------------------|---|

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

| | | |
|----------------------------------|---|--|
| 10 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 Donation |
|----------------------------------|---|--|

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

| | |
|--------------------|--|
| Date 08/18/2023 | Payee name Columbia Brazoria FFA Alumni |
|--------------------|--|

| | |
|-------------------------|--|
| Amount (\$) \$120.00 | Payee address; City; State; Zip Code PO BOX 1354 West Columbia, TX 77486 |
|-------------------------|--|

| | |
|----------------------------|--|
| 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) 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 Tickets to fundraiser |
|-------------------------------|--|---|

| | | | |
|--|-----------------------------|---------------|-------------|
| 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.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 5/12 Rpt: 45/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
|---|---|--|

| | |
|--|----|
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ |
|--|----|

| | |
|-----------------------------|--|
| 5 Date 08/31/2023 | 6 Payee name Fulton, Michael |
|-----------------------------|--|

| | |
|------------------------------------|--|
| 7 Amount (\$) \$1,200.00 | 8 Payee address; City; State; Zip Code 119 Southern Oaks Dr. Lake Jackson, TX 77566 |
|------------------------------------|--|

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

| | | |
|----------------------------------|--|---|
| 10 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 Campaign contribution at live auction |
|----------------------------------|--|---|

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

| | |
|--------------------|--|
| Date 11/11/2023 | Payee name Holiday Inn Austin Airport |
|--------------------|--|

| | |
|-------------------------|---|
| Amount (\$) \$328.21 | Payee address; City; State; Zip Code 6711 E Ben White Blvd Austin, TX 78741 |
|-------------------------|---|

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

| | | |
|-------------------------------|---|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel for special session |
|-------------------------------|---|--|

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

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

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.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 6/12 Rpt: 46/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
|---|---|--|

| | |
|--|-----------|
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ |
|--|-----------|

| | |
|-----------------------------|---|
| 5 Date 11/02/2023 | 6 Payee name Holiday Inn Express Austin Airport |
|-----------------------------|---|

| | |
|----------------------------------|---|
| 7 Amount (\$) \$194.83 | 8 Payee address; City; State; Zip Code 7601 E Ben White Blvd. Austin, TX 78741 |
|----------------------------------|---|

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

| | | |
|----------------------------------|---|--|
| 10 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel for special session |
|----------------------------------|---|--|

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

| | |
|--------------------|---|
| Date 11/17/2023 | Payee name Holiday Inn Express Austin Downtown |
|--------------------|---|

| | |
|-------------------------|---|
| Amount (\$) \$244.94 | Payee address; City; State; Zip Code 805 Neches Street Austin, TX 78701 |
|-------------------------|---|

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

| | | |
|-------------------------------|---|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel for special session |
|-------------------------------|---|--|

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

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

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.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 7/12 Rpt: 47/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
|---|---|--|

| | |
|--|-----------|
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ |
|--|-----------|

| | |
|-----------------------------|--|
| 5 Date 09/10/2023 | 6 Payee name Holiday Inn Express Sunset Valley |
|-----------------------------|--|

| | |
|----------------------------------|--|
| 7 Amount (\$) \$479.45 | 8 Payee address; City; State; Zip Code 4892 US Highway 290 West Sunset Valley, TX 78735 |
|----------------------------------|--|

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

| | | |
|----------------------------------|---|---|
| 10 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel stay for impeachment trial |
|----------------------------------|---|---|

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

| | |
|--------------------|---|
| Date 09/17/2023 | Payee name Holiday Inn Express Sunset Valley |
|--------------------|---|

| | |
|-------------------------|---|
| Amount (\$) \$774.25 | Payee address; City; State; Zip Code 4892 US Highway 290 West Sunset Valley, TX 78735 |
|-------------------------|---|

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

| | | |
|------------------------|---|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel stay for impeachment trial |
|------------------------|---|---|

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

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

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.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 8/12 Rpt: 48/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
|---|---|--|

| | |
|--|----|
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ |
|--|----|

| | |
|-----------------------------|--|
| 5 Date 11/14/2023 | 6 Payee name Holiday Inn Express Sunset Valley |
|-----------------------------|--|

| | |
|----------------------------------|--|
| 7 Amount (\$) \$132.05 | 8 Payee address; City; State; Zip Code 4892 US Highway 290 West Sunset Valley, TX 78735 |
|----------------------------------|--|

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

| | | |
|----------------------------------|---|--|
| 10 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel for special session |
|----------------------------------|---|--|

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

| | |
|--------------------|-----------------------------------|
| Date 09/18/2023 | Payee name Holiday Inn Express |
|--------------------|-----------------------------------|

| | |
|-------------------------|---|
| Amount (\$) \$151.05 | Payee address; City; State; Zip Code 4892 US Highway 290 West Sunset Valley, TX 78735 |
|-------------------------|---|

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

| | | |
|-------------------------------|---|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel stay for impeachment trial |
|-------------------------------|---|---|

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

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

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 - 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.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 9/12 Rpt: 49/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
|---|---|--|

| | |
|--|----|
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ |
|--|----|

| | |
|-----------------------------|-------------------------------------|
| 5 Date 08/25/2023 | 6 Payee name Stallman, Bo |
|-----------------------------|-------------------------------------|

| | |
|---------------------------------|--|
| 7 Amount (\$) \$50.00 | 8 Payee address; City; State; Zip Code 110 Black Oak Angleton, TX 77515 |
|---------------------------------|--|

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

| | | |
|----------------------------------|--|--|
| 10 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 Donation |
|----------------------------------|--|--|

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

| | |
|--------------------|----------------------------|
| Date 11/29/2023 | Payee name Texas Values |
|--------------------|----------------------------|

| | |
|-------------------------|---|
| Amount (\$) \$150.00 | Payee address; City; State; Zip Code 1005 Congress Avenue Suite 830 Austin, TX 78701 |
|-------------------------|---|

| | |
|----------------------------|--|
| 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) 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 Ticket to fundraiser |
|-------------------------------|--|--|

| | | | |
|--|-----------------------------|---------------|-------------|
| 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 - 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.

| | | |
|--|---|--|
| 1 Total pages Schedule F4: Sch: 10/12 Rpt: 50/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
|--|---|--|

| | |
|--|----|
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ |
|--|----|

| | |
|-----------------------------|-------------------------------------|
| 5 Date 12/05/2023 | 6 Payee name Texas Values |
|-----------------------------|-------------------------------------|

| | |
|----------------------------------|--|
| 7 Amount (\$) \$100.00 | 8 Payee address; City; State; Zip Code 1005 Congress Avenue Suite 830 Austin, TX 78701 |
|----------------------------------|--|

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

| | | |
|----------------------------------|--|--|
| 10 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 Donation |
|----------------------------------|--|--|

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

| | |
|--------------------|--|
| Date 11/02/2023 | Payee name United States Postal Service |
|--------------------|--|

| | |
|-------------------------|---|
| Amount (\$) \$146.00 | Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260 |
|-------------------------|---|

| | |
|----------------------------|--|
| 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) Office Overhead/Rental 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 Post office box rental |
|-------------------------------|---|--|

| | | | |
|--|-----------------------------|---------------|-------------|
| 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.

| | | |
|--|---|--|
| 1 Total pages Schedule F4: Sch: 11/12 Rpt: 51/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
|--|---|--|

| | |
|--|-----------|
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ |
|--|-----------|

| | |
|-----------------------------|---|
| 5 Date 12/04/2023 | 6 Payee name United States Postal Service |
|-----------------------------|---|

| | |
|----------------------------------|--|
| 7 Amount (\$) \$132.00 | 8 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260 |
|----------------------------------|--|

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

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

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

| | |
|--------------------|-------------------------|
| Date 12/04/2023 | Payee name Uprinting |
|--------------------|-------------------------|

| | |
|------------------------|---|
| Amount (\$) \$76.71 | Payee address; City; State; Zip Code 8000 Haskell Ave. Van Nuys, CA 91406 |
|------------------------|---|

| | |
|---------------------|--|
| 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) Printing 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 Additional printing for fundraiser |
|------------------------|---|--|

| | | | |
|--|-----------------------------|---------------|-------------|
| 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 - 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.

| | | |
|--|---|--|
| 1 Total pages Schedule F4: Sch: 12/12 Rpt: 52/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
|--|---|--|

| | |
|--|----|
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ |
|--|----|

| | |
|-----------------------------|--|
| 5 Date 12/31/2023 | 6 Payee name Virdell, Wesley |
|-----------------------------|--|

| | |
|---------------------------------|--|
| 7 Amount (\$) \$50.00 | 8 Payee address; City; State; Zip Code P.O. Box 147 Brady, TX 76825 |
|---------------------------------|--|

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

| | | |
|----------------------------------|---|---|
| 10 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 Campaign Contribution - Made late 12/31. E-mail receipt mistakenly identified UTC time as 1/1/24. |
|----------------------------------|---|---|

| | | | |
|---|-----------------------------|---------------|-------------|
| 11 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|--------------------------------------|
| Date 11/18/2023 | Payee name Wreaths Across America |
|--------------------|--------------------------------------|

| | |
|-------------------------|---|
| Amount (\$) \$170.00 | Payee address; City; State; Zip Code 328 Cemetery Road Angleton, TX 77515 |
|-------------------------|---|

| | |
|----------------------------|--|
| 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) 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 Donation to Angleton cemetery for wreaths for veterans |
|-------------------------------|---|--|

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

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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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.

| | | |
|--|--|--|
| 1 Total pages Schedule G: Sch: 1/1 Rpt: 53/58 | 2 FILER NAME Vasut, Cody T. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 11/17/2023 | 5 Payee name Stephanie Jenkins Photography | |
| 6 Amount (\$) \$285.00 <input type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code 3049 BRAZOS RIVER RD Freeport, TX 77541-8227 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Family photos. Some have been used on campaign social media, so listing. Address based on BCAD. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule K: Sch: 1/5 Rpt: 54/58 |
| 2 FILER NAME Vasut, Cody T. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 07/31/2023 | 5 Name of person from whom amount is received Texas Dow Employees Credit Union <hr/> 6 Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | 8 Amount (\$) \$1.82 |
| 7 Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | | |
| Date 07/31/2023 | Name of person from whom amount is received Texas Dow Employees Credit Union <hr/> Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | Amount (\$) \$2.23 |
| Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | | |
| Date 07/31/2023 | Name of person from whom amount is received Texas Dow Employees Credit Union <hr/> Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | Amount (\$) \$0.01 |
| Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | | |
| Date 08/31/2023 | Name of person from whom amount is received Texas Dow Employees Credit Union <hr/> Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | Amount (\$) \$3.02 |
| Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | | |
| Date 08/31/2023 | Name of person from whom amount is received Texas Dow Employees Credit Union <hr/> Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | Amount (\$) \$2.23 |
| Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | | |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule K: Sch: 2/5 Rpt: 55/58 |
| 2 FILER NAME Vasut, Cody T. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 08/31/2023 | 5 Name of person from whom amount is received Texas Dow Employees Credit Union <hr/> 6 Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | 8 Amount (\$) \$0.02 |
| 7 Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | | |
| Date 09/30/2023 | Name of person from whom amount is received Texas Dow Employees Credit Union <hr/> Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | Amount (\$) \$4.85 |
| Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | | |
| Date 09/30/2023 | Name of person from whom amount is received Texas Dow Employees Credit Union <hr/> Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | Amount (\$) \$2.16 |
| Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | | |
| Date 09/30/2023 | Name of person from whom amount is received Texas Dow Employees Credit Union <hr/> Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | Amount (\$) \$0.06 |
| Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | | |
| Date 10/31/2023 | Name of person from whom amount is received Texas Dow Employees Credit Union <hr/> Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | Amount (\$) \$4.07 |
| Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | | |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule K: Sch: 3/5 Rpt: 56/58 |
| 2 FILER NAME Vasut, Cody T. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 10/31/2023 | 5 Name of person from whom amount is received Texas Dow Employees Credit Union | 8 Amount (\$) \$2.23 |
| | 6 Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | |
| | 7 Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 10/31/2023 | Name of person from whom amount is received Texas Dow Employees Credit Union | Amount (\$) \$0.06 |
| | Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | |
| | Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 11/30/2023 | Name of person from whom amount is received Texas Dow Employees Credit Union | Amount (\$) \$3.43 |
| | Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | |
| | Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 11/30/2023 | Name of person from whom amount is received Texas Dow Employees Credit Union | Amount (\$) \$0.06 |
| | Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | |
| | Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 11/30/2023 | Name of person from whom amount is received Texas Dow Employees Credit Union | Amount (\$) \$2.16 |
| | Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | |
| | Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule K: Sch: 4/5 Rpt: 57/58 |
| 2 FILER NAME Vasut, Cody T. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 12/31/2023 | 5 Name of person from whom amount is received Texas Dow Employees Credit Union | 8 Amount (\$) \$2.21 |
| | 6 Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | |
| | 7 Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 12/31/2023 | Name of person from whom amount is received Texas Dow Employees Credit Union | Amount (\$) \$2.23 |
| | Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | |
| | Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 12/31/2023 | Name of person from whom amount is received Texas Dow Employees Credit Union | Amount (\$) \$0.06 |
| | Address of person from whom amount is received; City; State; Zip Code Lake Jackson, TX 77566 | |
| | Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 07/25/2023 | Name of person from whom amount is received Texas Gulf Bank | Amount (\$) \$3.26 |
| | Address of person from whom amount is received; City; State; Zip Code Angleton, TX 77515 | |
| | Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 08/27/2023 | Name of person from whom amount is received Texas Gulf Bank | Amount (\$) \$4.03 |
| | Address of person from whom amount is received; City; State; Zip Code Angleton, TX 77515 | |
| | Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule K: Sch: 5/5 Rpt: 58/58 |
| 2 FILER NAME Vasut, Cody T. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084254 |
| 4 Date 09/25/2023 | 5 Name of person from whom amount is received Texas Gulf Bank | 8 Amount (\$) \$0.81 |
| 6 Address of person from whom amount is received; City; State; Zip Code Angleton, TX 77515 | | |
| 7 Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | | |
| Date 10/25/2023 | Name of person from whom amount is received Texas Gulf Bank | Amount (\$) \$0.39 |
| Address of person from whom amount is received; City; State; Zip Code Angleton, TX 77515 | | |
| Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | | |
| Date 11/26/2023 | Name of person from whom amount is received Texas Gulf Bank | Amount (\$) \$0.43 |
| Address of person from whom amount is received; City; State; Zip Code Angleton, TX 77515 | | |
| Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | | |
| Date 12/25/2023 | Name of person from whom amount is received Texas Gulf Bank | Amount (\$) \$0.64 |
| Address of person from whom amount is received; City; State; Zip Code Angleton, TX 77515 | | |
| Purpose for which amount is received Interest <input type="checkbox"/> Check if political contribution returned to filer | | |