

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) 00080046	2 Total pages filed: 17	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Jay	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 02/05/2024
	NICKNAME	LAST Dean	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 3822 Holly Ridge Longview, TX 75605		ZIP CODE	Date Hand-delivered or Date Postmarked
			Receipt #	Amount
			Date Processed	
			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Greg R.	MI	
	NICKNAME	LAST Peeler	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 3822 Holly Ridge Longview, TX 75605		APT / SUITE #;	CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE (903)	PHONE NUMBER 720-8460	EXTENSION	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 01/01/2024	THROUGH	Month Day Year 01/25/2024	
10 ELECTION	ELECTION DATE Month Day Year 03/05/2024		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) State Representative District 7		12 OFFICE SOUGHT (if known) State Representative District 7	

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Dean, Jay (The Honorable)	14 Filer ID (Ethics Commission Filers) 00080046
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input checked="" type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input checked="" type="checkbox"/> GENERAL	Texas Alliance for Life PAC
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		8000 Centre Park Dr Ste 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)	\$ 47,292.04
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 229.74
	4. TOTAL POLITICAL EXPENDITURES	\$ 96,812.17
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 87,493.36
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 25,000.00

17 AFFIDAVIT

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

The Honorable Jay Dean

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

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH
ADDENDUM

Page 3 of 17

C / OH NAME	Dean, Jay (The Honorable)	Filer ID	(Ethics Commission Filers)
		00080046	

17 NOTICE FROM POLITICAL COMMITTEE(S)	.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures ..		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input checked="" type="checkbox"/> GENERAL	Texas REALTORS PAC (TREPAC)	
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS	
		1115 San Jacinto Blvd, Ste. 200	
		Austin, TX 78701	
	COMMITTEE CAMPAIGN TREASURER NAME		
	Cantu, Leslie		
	COMMITTEE CAMPAIGN TREASURER ADDRESS		
	P.O. Box 2246		
	Austin, TX 78768		

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

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18 FILER NAME Dean, Jay (The Honorable)		19 Filer ID (Ethics Commission Filers) 00080046
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 47,225.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 67.04
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 25,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 96,812.17
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/6 Rpt: 5/17
2 FILER NAME Dean, Jay (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080046
4 Date 01/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amos, Tammy <hr/> 6 Contributor address; City; State; Zip Code Longview, TX 75601	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charter Communications, Inc. Texas PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clements, Mike <hr/> Contributor address; City; State; Zip Code White Oak, TX 75693	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Energy Weldfab
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, Charles <hr/> Contributor address; City; State; Zip Code Longview, TX 75601	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/17/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00248716) Comcast Corp & NBCUniversal PAC <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19103	Amount of Contribution (\$) \$1,000.00
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: 2/6 Rpt: 6/17
2 FILER NAME Dean, Jay (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080046
4 Date 01/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ConocoPhillips SPIRIT PAC <hr/> 6 Contributor address; City; State; Zip Code Bartlesville, OK 74004	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dade Phelan Campaign <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EYE PAC of the Texas Ophthalmological Association <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frye, David <hr/> Contributor address; City; State; Zip Code Longview, TX 75605	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert, Michael <hr/> Contributor address; City; State; Zip Code White Oak, TX 75693	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: 3/6 Rpt: 7/17
2 FILER NAME Dean, Jay (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080046
4 Date 01/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry, Wayne	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Longview, TX 75604	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heitkamp, Kelly	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Longview, TX 75601	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchison, Ron	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Longview, TX 75615	
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Centris
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson , Harold	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Hallsville, TX 75650	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyce, Joe Bob	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Longview, TX 75607	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Joyce Crane, Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/6 Rpt: 8/17
2 FILER NAME Dean, Jay (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080046
4 Date 01/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, J.S.	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Longview, TX 75604	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longbow Consulting Partners LLC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin III, Ruben	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Kilgore, TX 75663	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Martin Resource Management Corp
Date 01/17/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00225342</u>) McGuireWoods Federal PAC Fund	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Richmond, VA 23219	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendicello, Les	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Longview, TX 75601	
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: 5/6 Rpt: 9/17
2 FILER NAME Dean, Jay (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080046
4 Date 01/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, John <hr/> 6 Contributor address; City; State; Zip Code Longview, TX 75606	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Robbins Petroleum
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simons, Jay <hr/> Contributor address; City; State; Zip Code Longview, TX 75601	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurrier, Dave <hr/> Contributor address; City; State; Zip Code Longview, TX 75608	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Thomas <hr/> Contributor address; City; State; Zip Code Longview, TX 75605	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas REALTORS PAC (TREPAC) <hr/> Contributor address; City; State; Zip Code Austin, TX 78768	Amount of Contribution (\$) \$2,500.00
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: 6/6 Rpt: 10/17
2 FILER NAME Dean, Jay (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080046
4 Date 01/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vocational Agriculture Teachers Association of Texas PAC 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilcox, James Contributor address; City; State; Zip Code Longview , TX 75603	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		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: 11/17	
2 FILER NAME Dean, Jay (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080046	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 01/11/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Republicans of Texas Campaign Fund	8 Amount of contribution (\$) \$67.04	9 In-kind contribution description Digital Advertising
	7 Contributor address; City; State; Zip Code Austin, TX 78701	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 12/17
2 FILER NAME Dean, Jay (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080046
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 01/17/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean, James	9 Loan Amount (\$) \$25,000.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code Longview, TX 75605	10 Interest Rate 0.0
		11 Maturity Date
12 Principal occupation / Job title (See Instructions) General Manager		13 Employer (See Instructions) Thomas Oilfield Services
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | 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 F1: Sch: 1/5 Rpt: 13/17	2 FILER NAME Dean, Jay (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080046
4 Date 01/09/2024	5 Payee name AMBUCS Longview Too	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 3092 Longview, TX 75606	
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 Charitable Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/05/2024	Payee name Anedot, Inc.	
Amount (\$) \$59.03	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 Baton Rouge, LA 70112	
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 Processing Fee for Online Campaign Contributions: Jan 5-25
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/03/2024	Payee name Ely Properties Management Company	
Amount (\$) \$2,985.37	Payee address; City; State; Zip Code 2813 Rio Grande St Austin, TX 78705	
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 Rental Expense for Officeholder Austin Housing
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: 2/5 Rpt: 14/17	2 FILER NAME Dean, Jay (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080046
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4 Date 01/19/2024	5 Payee name Green Ad Agency
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6 Amount (\$) \$1,905.07	7 Payee address; City; State; Zip Code PO Box 3644 Longview, TX 75606
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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 Design and Production of Campaign Advertisements
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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 01/23/2024	Payee name Kilgore Lions Club
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Amount (\$) \$300.00	Payee address; City; State; Zip Code PO Box 1256 Kilgore, TX 75663
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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 Charitable Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/02/2024	Payee name Kolar, Amberley
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Amount (\$) \$500.00	Payee address; City; State; Zip Code PO Box 2910 Austin, TX 78768
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contract Labor
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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: 3/5 Rpt: 15/17	2 FILER NAME Dean, Jay (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080046
4 Date 01/04/2024	5 Payee name Longview Chamber of Commerce	
6 Amount (\$) \$375.00	7 Payee address; City; State; Zip Code 410 N Center St Longview, TX 75601	
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 Officeholder Membership Dues
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/08/2024	Payee name Murphy Nasica & Associates	
Amount (\$) \$8,500.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Design and Placement of Digital Campaign Advertisements - Reported on Prior Rpt Sch F2
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/08/2024	Payee name Murphy Nasica & Associates	
Amount (\$) \$17,953.61	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Design & Production for Campaign Mail Ad - Reported on Prior Sch F2
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: 4/5 Rpt: 16/17	2 FILER NAME Dean, Jay (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080046
4 Date 01/08/2024	5 Payee name Murphy Nasica & Associates	
6 Amount (\$) \$18,500.00	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Design and Placement of Digital Campaign Advertisements
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 01/08/2024	Payee name Murphy Nasica & Associates	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Campaign Grassroots Advertising
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 01/08/2024	Payee name Murphy Nasica & Associates	
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Fee
	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 | 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 |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 17/17	2 FILER NAME Dean, Jay (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080046
4 Date 01/17/2024	5 Payee name Murphy Nasica & Associates	
6 Amount (\$) \$26,504.35	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Design, Data, Postage and Production for Campaign Mail Advertisements
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held