CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complet	e this form.	1 Filer ID (Ethics Commi 00030098		2 Total pages filed: 20	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE	ONLY
OFFICEHOLDER NAME	The Honorable	Christi L.			Date Received	
					ELECTRONICALLY	/ FILED
	NICKNAME			CUEEN	02/05/2024	
		LAST Craddick		SUFFIX	02/03/2024	
	,	Craudick				
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date	Postmarked
OFFICEHOLDER MAILING	3112 Windsor					
ADDRESS	Suite A, PMB 505				Receipt # An	nount
Change of Address	Austin, TX 78703					
🗀					Date Processed	
					Date Imaged	
					Date illiaged	
5 CAMPAIGN	MS / MRS / MR F	IRST		MI		
TREASURER		Thornton J.		IVII		
NAME	IVII.	mornion 5.				
	NIOIALANE					
		_AST		SUFFIX		
	r	Keel				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO B	OX PLEASE);	AP ⁻	r / SUITE #; CITY;	STATE;	ZIP CODE
ADDRESS	23812 Tres Coronas					
(Residence or Business)						
	Spicewood, TX 78669					
- 0445464	4554 0055 BUONE		VTENGION			
7 CAMPAIGN TREASURER		NUMBER E	EXTENSION			
PHONE	(512) 699-3899					
a DEDODT						
8 REPORT TYPE	January 15	30th day before	election	Runoff	15th day after campaig	ın trassurar
		John day Belore		ranon	appointment (officehold	
	July 15	8th day before 6	election	Exceeded modified	Final Report (Attach C	/OH-FR)
				reporting limit	_	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2024	TH	ROUGH	01/25/202	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	X Pi	rimary	Runoff	Other	
	03/05/2024		eneral	Special	_	
		"	0110141	<u></u>		
11 055105	OFFICE HELD (if care)			12 OFFICE COLLOUT	(if known)	
11 OFFICE	OFFICE HELD (if any) Railroad Commissioner			12 OFFICE SOUGHT Railroad Commi		
	Railloau Commissioner			Railloau Collilli	55101161	
		GO T	O PAGE 2			
I						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 20

13 C / OH NAME	Craddick, Christi L. (1	The Honorable)	14 Filer ID 00030098	(Ethics Co	mmission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendi These expenditures may have been made withou d officeholders are required to report this information	ıt the candidate's or offi	iceholder's k	nowledge or		
X Additional Pages	COMMITTEE TYPE	DMMITTEE TYPE COMMITTEE NAME					
	X GENERAL	Texas Alliance for Life PAC					
		COMMITTEE ADDRESS					
	SPECIFIC	8000 Centre Park Dr Ste 380					
		Austin, TX 78754					
		COMMITTEE CAMPAIGN TREASURER NAME					
		Shaw, James					
		COMMITTEE CAMPAIGN TREASURER ADDRE	ESS				
		4505 Corazon Cv					
		Round Rock, TX 78681					
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THATES OF LOANS, OR CONTRIBUTIONS MADE ELI		s, \$	0.00		
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	NS)	\$	70,565.00		
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$	0.00		
	4. TOTAL POLITIC	CAL EXPENDITURES		\$	4,104,223.15		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD				596,684.16		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	S OF THE LAST DAY	\$	0.00		
17 AFFIDAVIT	<u></u>						
		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code.	all information required				
		The Hond	orable Christi L. Crad	ddick			
		Signature of	of Candidate or Officeh	older			
AFFIX NO	TARY STAMP / SEAL ABO	OVE					
Sworn to and subs	cribed before me, by the s	aid	, this the		day		
		ertify which, witness my hand and seal of office.					
Signature of office	cer administering	Printed name of officer administering	Title of offic	er administe	ering oath		
_							

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH ADDENDUM

Page 3 of 20

				rage 3 01 20		
C / OH NAME	Craddick, Christi L. (The Honorable)	Filer ID 00030098	(Ethics Commission Filers)		
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				
	X GENERAL	TREPAC				
		COMMITTEE ADDRESS				
	SPECIFIC	1115 San Jacinto Blvd., Ste. 200				
		Austin, TX 78701				
		COMMITTEE CAMPAIGN TREASURER NAME				
		Cantu, Leslie				
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS			
		P.O. Box 2246				
		Austin, TX 78768				
NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have	of political expenditures by political committees to soeen made without the candidate's or officeholder's d to report this information only if they receive notic	knowledge or co	onsent. Candidates and		
	COMMITTEE TYPE	COMMITTEE NAME				
	X GENERAL	Republican Voters of Texas PAC				
		COMMITTEE ADDRESS				
	SPECIFIC	30310 Charlie Lane				
		Magnolia, TX 77355				
		COMMITTEE CAMPAIGN TREASURER NAME				
		Stuckey, Linda				
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS			
		30310 Charlie Lane				
		Magnolia, TX 77355				

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

					4 of 20
18 FILE	ER NAN	(Ethi	ics Commission Filers)		
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	70,565.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				4,102,263.48
6.	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS				
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	1,959.67
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	4,084.02

	MONET	ARY POLITICAL CONTR	RIBUTION	S		SCHEDULE A1
	The Instru	ction Guide explains how to com	plete this forr	n.	1	Total pages Schedule A1: Sch: 1/4 Rpt: 5/20
2	Craddick, Christi L. (The Honorable) Date 5 Full name of contributor out-of-state PAC (ID#:) 7		Filer ID (Ethics Commission Filers) 00030098			
4	Date 01/12/2024	 Full name of contributor out-of-s Allen Boone Humphries Robinson L Contributor address; City; State; Zip Co 	LP		7	Amount of Contribution (\$) \$2,000.00
_		Houston, TX 77027-7537				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)	
	Date 01/20/2024	Full name of contributor out-of-s Anwar, Ryan C. (Mr.) Contributor address; City; State; Zip Co)		Amount of Contribution (\$) \$25,000.00
	Principal occu	Midland, TX 79702-3072 pation / Job title (See Instructions)		Employer (See Instructions	·/_	
	Petroleum E			Diamondback Energy)	
	Date 01/12/2024	Full name of contributor out-of-s Boykin Energy, LLC Contributor address; City; State; Zip Co	tate PAC (ID#:)		Amount of Contribution (\$) \$7,500.00
		Fort Worth, TX 76102-4531				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Date 01/20/2024	Brandt, Duane A. (Mr.)				Amount of Contribution (\$) \$50.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)	
	Date 01/12/2024	Bucci, Eric J. (Mr.)				Amount of Contribution (\$) \$50.00
	Principal occu Process Eng	pation / Job title (See Instructions) jineer		Employer (See Instructions USAA	5)	
			•			

	MONET	ARY POLITICAL CONTRI	BUTION	S		SCHEDULE A1
	The Instru	ction Guide explains how to comple	ete this forr	n.	1	Total pages Schedule A1: Sch: 2/4 Rpt: 6/20
2	FILER NAME Craddick, Ch	nristi L. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00030098
4	Date 01/20/2024	 Full name of contributor	e PAC (ID#:		7	Amount of Contribution (\$) \$2,500.00
_	Deignaignal	Bartlesville, OK 74004-0001	lo.	Francis vou (Coo Instructions		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)	
	Date 01/19/2024	Full name of contributor out-of-state Downie, Jason (Mr.) Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$) \$10,000.00
	Deinsinal assu	Dallas, TX 75201-7625		Franksian (Caa Instructions	_	
	•	pation / Job title (See Instructions) & Managing Partner		Employer (See Instructions Tailwater Capital	5)	
	Date 01/23/2024	Full name of contributor out-of-state Flynn, Josh Contributor address; City; State; Zip Code	e PAC (ID#:			Amount of Contribution (\$) \$100.00
	Dringing agg	Houston, TX 77243-1158	İ	Employer (Con Instructions	_	
	Accounting	pation / Job title (See Instructions)		Employer (See Instructions Associated Service	')	
	Date 01/19/2024	Herring, Edward (Mr.))		Amount of Contribution (\$) \$10,000.00
	•	pation / Job title (See Instructions) Managing Partner		Employer (See Instructions Tailwater Capital	<u> </u>	
	Date 01/04/2024	Full name of contributor out-of-state Horne, James Edward (Mr.) Contributor address; City; State; Zip Code Austin, TX 78731-1812	PAC (ID#:			Amount of Contribution (\$) \$1,000.00
	Principal occu Real Estate	pation / Job title (See Instructions)		Employer (See Instructions Self	i)	
			,			

	MONET	ARY POLITICAL CO	NTRIBUTION	NS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to	complete this for	m.	1	Total pages Schedule A1: Sch: 3/4 Rpt: 7/20	
2	FILER NAME Craddick, Ch	nristi L. (The Honorable)			3	Filer ID (Ethics Commission 00030098	on Filers)
4	Date 01/12/2024	5 Full name of contributor Key III, Samuel N. (Dr.)6 Contributor address; City; State;	out-of-state PAC (ID#: Zip Code)	7	Amount of Contribution (\$)	\$25.00
_	Duinning Langu	Austin, TX 78731-5229	- Io	Franks on (Cook baths at an			
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions Retired	5)		
	Date 01/20/2024	Full name of contributor X Marathon Petroleum Corporat Contributor address; City; State; Findlay, OH 45840-3229				Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 01/10/2024	Martin, Sean Contributor address; City; State;	out-of-state PAC (ID#: Zip Code)		Amount of Contribution (\$)	\$50.00
	•	Denton, TX 76207-7659 pation / Job title (See Instructions)		Employer (See Instructions	j)		
	Date 01/12/2024	Full name of contributor Morris, Paul L.		ONTS		Amount of Contribution (\$)	\$1,000.00
	Principal occu Chairman	pation / Job title (See Instructions)		Employer (See Instructions Rio Oil and Gas)		
	Date 01/18/2024	Olsen, Todd (Mr.))		Amount of Contribution (\$)	\$750.00
	Principal occu Government	pation / Job title (See Instructions) al Affairs		Employer (See Instructions Enterprise Products	()		
			<u> </u>				

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 4/4 Rpt: 8/20			
2	FILER NAME Craddick, Ch	nristi L. (The Honorable)		3	Filer ID (Ethics Commission 00030098	on Filers)		
4	Date 01/24/2024 5 Full name of contributor out-of-state PAC (ID#:) Rubsamen, Scott 6 Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$1,000.00				
		San Antonio, TX 78209-2209						
8	Principal occu Engineer	pation / Job title (See Instructions)	9 Employer (See Instructions Cerberus Engineering, L		;			
	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$40.00		
	Detection Lance	Austin, TX 78701-2136	Toronto and Cook Instruction	Ĺ				
	Principal occupation / Job title (See Instructions) Employer (See Instructi retired retired		Employer (See Instructions retired	S) 				
	Date Full name of contributor ☐ out-of-state PAC (ID#:				Amount of Contribution (\$)	\$2,500.00		
		Austin, TX 78701-1726						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)				
	Date 01/12/2024	Full name of contributor out-of-state PAC (ID#:_ Toomey, Michael (Mr.) Contributor address; City; State; Zip Code Austin, TX 78731-5143			Amount of Contribution (\$)	\$2,000.00		
	Principal occu Government	ipation / Job title (See Instructions) t Consultant	Employer (See Instructions Self	s)				

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
Ļ		T	_
1	Total pages Schedule F1:		
	Sch: 1/8 Rpt: 9/20	Craddick, Christi L. (The Honorable) 00030098	
4	Date	5 Payee name	
	01/04/2024	Anedot	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$39.30	1340 Poydras St Ste 1770	
		New Orleans, LA 70112-5204	
8	PURPOSE		_
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Solicitation/Fundraising Expense	
		Processing fee	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
	expenditure to benefit C/OI	Н	
H	Date	Payee name	=
	01/08/2024	Anedot	
_	Amount (\$)	Payee address; City; State; Zip Code	4
	\$1.86	1340 Poydras St Ste 1770	
	φ1.00	10-10 F Oyulus St Site 1770	
		N 0 L 1 A 70440 5004	
		New Orleans, LA 70112-5204	_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Processing fee	
		1 1000000	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	\dashv
	expenditure to benefit C/O		
\vdash	Data		4
	Date	Payee name Anadat	
	01/10/2024	Anedot	_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2.25	1340 Poydras St Ste 1770	
		New Orleans, LA 70112-5204	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	٦
	OF EXPENDITURE	Solicitation/Fundraising Expense	
		Check if Austin, TX, officeholder living expense	
		Processing fee	ļ
	Computate ONU V if alice	Constitute (Office helder more) Office pouret	\exists
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
			_

SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/8 Rpt: 10/20	Craddick, Christi L. (The Honorable) 00030098
4	Date	5 Payee name
	01/19/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$810.15	1340 Poydras St Ste 1770
		New Orleans, LA 70112-5204
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Processing fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/23/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.20	1340 Poydras St Ste 1770
		New Orleans, LA 70112-5204
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Processing fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/24/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.30	1340 Poydras St Ste 1770
		New Orleans, LA 70112-5204
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Processing fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/8 Rpt: 11/20	Craddick, Christi L. (The Honorable) 00030098
4	Date	5 Payee name
	01/09/2024	Castle Communications
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5,000.00	Po Box 90691
		Austin, TX 78709-0691
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Communications Consulting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/11/2024	Chase Credit Card
	Amount (\$)	Payee address; City; State; Zip Code
	\$6,134.57	PO Box 15123
		Wilmington, DE 19850-5123
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payment of campaign credit card bill
		a sum and a sum paright a sum a sum
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/02/2024	Dudley Group LLC
H	Amount (\$)	Payee address; City; State; Zip Code
	\$13,500.00	1108 Lavaca St Ste 693
		Austin, TX 78701-2180
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign consulting
		Campaign consulting
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to comp	lete this fo	orm.		
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 4/8 Rpt: 12/20	Craddick, Christi L. (The Honorable)			00030098	
4	Date	5 Payee name				
	01/10/2024	Dudley Group LLC				
6	Amount (\$)	7 Payee address; City; State; Zip Code	!			
	\$2,614.21	1108 Lavaca St Ste 693				
		Austin, TX 78701-2180				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	otion		
	OF EXPENDITURE	Advertising Expense	Check	k if travel outsid		plete Schedule T.
	LAI LINDITORE				officeholder living	g expense
			Push C	zarus		
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	+		Office he	nd
9	Complete ONLY if direct expenditure to benefit C/Ol	- · · · · · · · · · · · · · · · · · · ·	ι		Office file	eiu
	Data					
	Date	Payee name				
	01/16/2024	Dudley Group LLC				
	Amount (\$)	Payee address; City; State; Zip Code	!			
	\$1,400,000.00	1108 Lavaca St Ste 693				
		Austin, TX 78701-2180				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descrip			
	EXPENDITURE	Advertising Expense			de of Texas. Com officeholder living	plete Schedule T.
					n printing ar	
				J		
	Complete ONLY if direct	Candidate/Officeholder name Office sough	t		Office he	eld
	expenditure to benefit C/O	1				
	Date	Payee name				
	01/17/2024	Dudley Group LLC				
	Amount (\$)	Payee address; City; State; Zip Code	,			
	\$989,587.87	1108 Lavaca St Ste 693				
		Austin, TX 78701-2180				
	PURPOSE) Descrip	ntion		
	OF	Advertising Expense			de of Texas. Com	plete Schedule T.
	EXPENDITURE				officeholder living	
			Mass r	nail desigi	n printing ar	nd postage
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	Ţ		Office he	eia

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 5/8 Rpt: 13/20	Craddick, Christi L. (The Honorable) 00030098						
4	Date	5 Payee name						
	01/02/2024	Go Creative Group LLC						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$1,600,000.00	5511 Parkcrest Dr Ste 103						
		Austin, TX 78731-4917						
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		Campaign advertising						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							
_	Date	Payee name						
	01/08/2024	Google Services						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$92.10 1600 Amphitheatre Pkwy							
	**							
		Mountain View, CA 94043-1351						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		Email and calendar services						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OH							
-	Date	Payee name						
	01/02/2024	Keel Systems						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$4,041.25	23812 Tres Coronas						
	Ψ4,041.23	25012 1163 60101183						
		Spicewood, TX 78669-1631						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Campaign Services Check if travel outside of Texas. Complete Schedule T.						
	Check if Austin, TX, officeholder living expense							
		Compliance software and services						
	Operation ONLY if direct	Our Highest (Office health an array of the seconds)						
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
	Sch: 6/8 Rpt: 14/20	Craddick, Christi L. (The Honorable) 00030098		
4	Date	5 Payee name		
	01/06/2024	Lilly And Company		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$7,500.00	1005 Congress Ave Ste 400		
		Austin, TX 78701-2469		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Solicitation/Fundraising Expense		
	LXI LINDITORL	Check if Austin, TX, officeholder living expense		
		Fundraising retainer		
_	Opening CNII V if allowed	Our didn't lotter had a grant of the country of the		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
	Date	Payee name		
	01/06/2024	Perception Insight		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$41,000.00	1108 Lavaca St		
		Austin, TX 78701-2172		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Research Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense Texas Voter Survey		
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI			
_	Date	Payee name		
	01/16/2024	Railroad Commission		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$150.00	1701 Congress Ave		
	Ψ130.00	1701 Congress Ave		
		Austin, TX 78701-1402		
	PURPOSE			
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Check if Austin, TX, officeholder living expense		
		Payment for any inadvertent use of state resources		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
L	expenditure to benefit C/OI			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
	Sch: 7/8 Rpt: 15/20	Craddick, Christi L. (The Honorable) 00030098			
4	Date	5 Payee name			
	01/10/2024	ReadyRefresh			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$113.59	6661 Dixie Hwy Ste 4			
		Louisville, KY 40258-3950			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense			
		Check if Austin, TX, officeholder living expense Office refreshments			
		Office refreshifierts			
_	Compulate ONII V if direct	Condidate/Office helds name Office accepts			
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
	_				
	Date	Payee name			
	01/11/2024	Spears, Teresa			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$9,000.00	PO Box 540			
		Cherokee Village, AR 72525-0540			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Campaign Services Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense Outreach coordinator			
Outreach Coordinator					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
_	Data	Davies same			
	Date 01/01/2024	Payee name Texas Workforce Commission			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$4.83	PO Box 149037			
		Austin, TX 78714-9037			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Salaries/Wages/Contract Labor			
		State unemployment taxes			
		State unemployment taxes			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 8/8 Rpt: 16/20	Craddick, Christi L. (The Honorable) 00030098				
4	Date	5 Payee name				
	01/09/2024	The What's UP Radio Program				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$20,000.00	12337 Jones Rd Ste 450				
		Houston, TX 77070-4862				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Print ad				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O					
F	Date	Payee name				
	01/01/2024	U.S. Treasury				
H	Amount (\$)	Payee address; City; State; Zip Code				
	\$2,535.00	Internal Revenue Service				
Ogden, UT 84201-0001						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Federal tax withholding				
Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OH						
	Date	Payee name				
	01/01/2024	U.S. Treasury				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$93.00	Internal Revenue Service				
		Ogden, UT 84201-0001				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense Federal tax withholding				
		Federal tax withholding				
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O					
\vdash						

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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Com	mission Filers)			
Sch: 1/3 Rpt: 17/20	Craddick, Christi L.	(The Honorable)	00030098					
4 CREDIT CARD ISSUER	Name of financial institution Chase		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged \$67.16	(b) Date of Charge 01/01/2024	(c) Date(s) Credit Card Issue 01/11/2024	r Paid				
7 PAYEE	(a) Payee name Intuit Payroll		(b) Payee address; PO Box 7850 Mountain View, CA 94039	City, Stat	e, Zip Code			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Salaries/Wages/Contr		(b) Description Payroll services					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$200.00	(b) Date of Charge 01/02/2024	(c) Date(s) Credit Card Issuer 01/11/2024	r Paid				
PAYEE	(a) Payee name Lost Pines Republican Party		(b) Payee address; 3000 State Hwy 71 Bastrop, TX 78602	City, Stat	e, Zip Code			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	(b) Description Donation					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$64.80	(b) Date of Charge 01/04/2024	(c) Date(s) Credit Card Issuer 01/11/2024	r Paid				
PAYEE	PAYEE (a) Payee name Microsoft PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Payee address; 1 Microsoft Way Redmond, WA 98052-830	City, Stat	e, Zip Code			
EXPENDITURE X Political			(b) Description Software					
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			<u> </u>	officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Öffice	e 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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
Sch: 2/3 Rpt: 18/20	Craddick, Christi L.	(The Honorable)	00030098					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged \$15.16	(b) Date of Charge 01/06/2024	(c) Date(s) Credit Card Issuer 01/11/2024	Paid				
7 PAYEE	(a) Payee name Numberbarn		(b) Payee address; Po Box 3	City,	State,	Zip Code		
0. DUDDOOF OF	(a) Catagony		Poway, CA 92074-0003					
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			(b) Description Office number upkeep					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expen	se			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$301.60	(b) Date of Charge 01/08/2024	(c) Date(s) Credit Card Issuer 01/11/2024	· Paid				
PAYEE	PAYEE (a) Payee name American Airlines			(b) Payee address; City, State, Zip Code 4255 Amon Carter Blvd Fort Worth, TX 76155-2603				
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule) Travel In District			(b) Description Flight to Austin for GOP meetings					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expen	se			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$330.60	(b) Date of Charge 01/08/2024	(c) Date(s) Credit Card Issuer 01/11/2024	Paid				
PAYEE	(a) Payee name American Airlines		(b) Payee address; 4255 Amon Carter Blvd Fort Worth, TX 76155-260	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	EXPENDITURE (See Categories listed at the top of this schedule) Travel In District		(b) Description Flight to Austin for GOP meetings					
Non-Political	(*) —	of Texas. Complete Schedule T.		officeholder living expen	se			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Öffice	e 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)

ı	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	ıle F4: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
l	Sch: 3/3 Rpt: 19/20	Craddick, Christi L. (The Honorable)			00030098				
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer			Paid		
		\$67.15	01/16/2024	01/11/2024					
7	PAYEE	(a) Payee name				ddress; st # 343	City,	State,	Zip Code
		WP Engine		00 2	91115	ot # 343			
				San	Franc	cisco, CA 94110-	-4929		
8		(a) Category		. ,	escript				
	EXPENDITURE	(See Categories listed at the top of this schedule) Office Overhead/Rental Expense		webs	site ho	osting			
	X Political					_			
Ļ	Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sough	<u> </u>	Check if Austin, TX,	officeholder living ex Office held	pense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeriolder	name Onic	e sougn	ι		Office field		
Г	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid 01/11/2024					
		\$913.20	01/20/2024						
H	PAYEE	(a) Payee name		(b) Payee address; City, State, 2			Zip Code		
American Ai			es		Amo	n Carter Blvd			
				Fort Worth, TX 76155-2603					
Г	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
l	_	Travel In District	or this scriedule)	Flight to Austin for GOP meetings					
l	X Political Non-Political					_			
H	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sough	<u> </u>	Check if Austin, TX,	officeholder living ex Office held	pense	
L	expenditure to benefit C/OH	Carialacte, Chiecholaci	maric Onic	oc sough			Office field		
H	·								
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INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 20/20 2 FILER NAME Filer ID (Ethics Commission Filers) Craddick, Christi L. (The Honorable) 00030098 8 Amount (\$) 5 Name of person from whom amount is received 01/25/2024 \$4,084.02 **RBC** Wealth Management 6 Address of person from whom amount is received; City; State; Zip Code Midland, TX 79701 7 Purpose for which amount is received Check if political contribution returned to filer End of period value adjustment