CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1	Filer ID (Ethi	ics Commission Filers)	2 Total pages filed:		OFFICE USE ON	LY
	00087776		51		Date Received	
3	CANDIDATE /	MS / MRS / MR	FIRST	MI	ELECTRONICALLY FIL	ED
	OFFICEHOLDER NAME	Mr.	Timothy D.		01/28/2024	
		NICKNAME	LAST	SUFFIX		
		Tim	Greeson	P.E.	Date Hand-delivered or Date Postma	arkod
4	ORIGINAL	X January 15	Runoff	Other (specify)	Date Hand-delivered of Date Position	arkeu
	REPORT TYPE	July 15	Exceeded modified reporting limit	_	Receipt # Amount	
		30th day before election	15th day after campaign treasurer		_	
		8th day before election	appointment (officeholder only) Final Report (Attach C/OH-FR)		Date Processed	
5	ORIGINAL PERIOD			Dav Year		
J	COVERED	Month Day Yea 07/01/2023	TURGUGU	Day Year L/2023	Date Imaged	
6	EXPLANATION OF C		12/3.	1/2023		
U			l session donation reports. When e	entering expenses the	system did not require me to e	nter
	addresses. However	, after entering and prepari	ng to submit, the system flagged the submit as soon as possible, espec	lack of addresses for	expenses as an error. I went a	head and
	letter coordination sys	stem to be updated so that	motion where supporters write letted could report these as in-kinds cont oters per household and assuming a	ributions. These lette	rs are tracked by voter, not by it	ndividual. I
			ett Rogers. I originally entered him a ss under his personal name. I have		â. However, since filing, I have	learned
	Lastly. I updated a fev	w descriptions for minor ex	pense items.			
	, ·	·				
7	AFFIDAVIT		I swear, or affirm and correct.	under penalty of perj	ury, that this corrected report is	true
			Check the box ne	ext to any and all appli	cable statements:	
			was made i		or affirm that the original report out an intent to mislead or to tained in the report.	
			report not la that the rep swear, or a	iter than the 14th busi ort as originally filed is	m, that I am filing this corrected ness day after the date I learned inaccurate or incomplete. I omission in the report as origina	
				Mr. Timothy D	Greeson D E	
				Mr. Timothy D. Signature of Candida		
	AFFIX NOTARY ST	AMP / SEAL ABOVE		Signature of Candida		
	Sworn to and subsc	ribed before me, by the sai	<u>-</u>	Signature of Candida	ate or Officeholder	ay
	Sworn to and subsc	ribed before me, by the sai	d ify which, witness my hand and sea	Signature of Candida	ate or Officeholder	ay
	Sworn to and subsc	ribed before me, by the sai	dify which, witness my hand and sea	Signature of Candida	ate or Officeholder	ay

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 con	nplete this form.	1 Filer ID (Ethics Comm 00087776		2 Total pages filed: 51	
3 CANDIDATE /	MS / MRS / MR	FIRST	<u>, L</u>	MI	OFFICE USE ONL	Υ
OFFICEHOLDER NAME	Mr.	Timothy D.			Date Received ELECTRONICALLY FILE	
				OUEEN	01/28/2024	בט
	NICKNAME	LAST		SUFFIX	01/20/2024	
	Tim	Greeson		P.E.		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; A 5555 Mieth Rd.	PT / SUITE #; CIT	ΓY;	ZIP CODE	Date Hand-delivered or Date Postman Receipt # Amount	ırked
Change of Address	Sealy, TX 77474				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Mrs.	Jessica L.				
	NICKNAME	LAST Greeson		SUFFIX		
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO 5555 Mieth Rd	PO BOX PLEASE);	AP	T / SUITE #; CITY;	STATE; ZI	IP CODE
(Residence or Business)	Sealy, TX 77474-8331					
7 CAMPAIGN TREASURER PHONE	AREA CODE PH (281) 798-2005	HONE NUMBER I	EXTENSION			
8 REPORT TYPE	X January 15	30th day before	e election	Runoff	15th day after campaign treas appointment (officeholder only	
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR	₹)
9 PERIOD COVERED	Month Day Yea 07/01/2023		HROUGH	Month Day 12/31/202	Year 3	
10 ELECTION	ELECTION DATE Month Day Yea		Primary	ELECTION TYPE Runoff	Other	
	03/05/2024		General	Special	_	
11 OFFICE	OFFICE HELD (if any)	•		12 OFFICE SOUGHT State Representa		
		GO -	TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

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13 C / OH NAME	Greeson P.E., Timoth	y D. (Mr.)	14 Filer ID (I 00087776	Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to d officeholders are required to report this information	the candidate's or office	holder's knowledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS			
				•		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 811.08		
	5)	\$ 29,540.20				
EXPENDITURE TOTALS						
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 36,917.19		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 2,496.99		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 8,000.00		
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.				
		Mr. Time	othy D. Greeson P.E.			
			Candidate or Officehold	der		
AFFIX NO	TARY STAMP / SEAL ABO	•				
Sworn to and subso	cribed before me, by the s	aid	, this the	day		
		ertify which, witness my hand and seal of office.				
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

4 of 53

		4 of 51					
18 FILER NAME Greeson P.	E., Timothy D. (Mr.)	19 Filer ID 00087776	(Ethics Commission Filers)				
20 SCHEDULE NAME OF SO			SUBTOTAL AMOUNT				
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 28,242.4				
2. X	\$ 1,297.8						
3. X	3. X SCHEDULE B: PLEDGED CONTRIBUTIONS						
4. X	4. X SCHEDULE E: LOANS						
5. X	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS						
6. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.0				
7. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$ 0.0				
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.0				
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 1,061.1				
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$				
12.	\$						

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains hov	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/17 Rpt: 5/51	
2	FILER NAME Greeson P.E	., Timothy D. (Mr.)			3	Filer ID (Ethics Commission 00087776	n Filers)
4	Date 11/09/2023	5 Full name of contributor Archer, Ira6 Contributor address; City; S	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$100.00
		Dallas, TX 75206					
8	Principal occu	pation / Job title (See Instruction:	5)	9 Employer (See Instructions	s)		
	Date 09/19/2023	Full name of contributor Atkinson, Ladelle Contributor address; City; S			•	Amount of Contribution (\$)	\$100.00
		Bastrop, TX 78602					
	Principal occupation / Job title (See Instructions) Retired		5)	Employer (See Instructions Retired	s)		
	Date 10/06/2023	Full name of contributor out-of-state PAC (ID#:) Balderrama, Art Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$300.00	
		Schulenburg, TX 78956					
	Principal occu Retired	pation / Job title (See Instruction	5)	Employer (See Instructions Retired	S)		
	Date 12/12/2023	Full name of contributor Birkelback, Aletha Contributor address; City; S Pilot Point, TX 76258)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instruction	5)	Employer (See Instructions	5)		
	Date 09/29/2023	Full name of contributor Bleyl, Donald Contributor address; City; S Bellville, TX 77418	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$75.00
	Principal occu Retired	pation / Job title (See Instruction:	5)	Employer (See Instructions Retired	5)		

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	o complete this form	n.	1	Total pages Schedule A1: Sch: 2/17 Rpt: 6/51	
2	FILER NAME Greeson P.E	., Timothy D. (Mr.)			3	Filer ID (Ethics Commission 00087776	n Filers)
4		5 Full name of contributor Brown, Steve 6 Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)	7	Amount of Contribution (\$)	\$95.70
8	Principal occu	Houston, TX 77024 pation / Job title (See Instructions)	9	Employer (See Instructions	;)		
	Date 12/14/2023	Full name of contributor Brugger, Pat Contributor address; City; State Hempstead, TX 77445	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u>(</u>		
	Date 12/21/2023	Full name of contributor out-of-state PAC (ID#:) Brune, Herman Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00	
	Principal occu	Columbus, TX 78934 pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/13/2023	Full name of contributor Burlingame, Robert Contributor address; City; State Matagorda, TX 77457	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
	Date 09/16/2023	Full name of contributor Cook, Brenda Contributor address; City; State Hockley, TX 77447	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUI	LE A1
	The Instruc	ction Guide explains how to complete this	s form.	- 1	Total pages Schedule A1: Sch: 3/17 Rpt: 7/51	
2	FILER NAME Greeson P.E	., Timothy D. (Mr.)		- 1	Filer ID (Ethics Commission 00087776	on Filers)
4	Date 08/06/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
_		Sealy, TX 77474	T	<u> </u>		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	ns)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/28/2023 Eastty, Scott Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$95.70	
		1				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	าร)		
	Date 11/16/2023	Full name of contributor out-of-state PAC (ID#:) Findlay, Eric Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Tyler, TX 75703				
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Findlay Craft PC	ns)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/29/2023 Funk, Jill Contributor address; City; State; Zip Code Tomball, TX 77375			Amount of Contribution (\$)	\$63.00	
	Principal occu Principal	pation / Job title (See Instructions)	Employer (See Instructions Magnolia ISD	ns)		
	Date 11/30/2023	Full name of contributor out-of-state PAC (IDFunk, Ruth Contributor address; City; State; Zip Code Katy, TX 77493	#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	ns)		
			•			

	MONET	ARY POLITICAL C	ONTRIBUTION	S		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this form	n.	1	Total pages Schedule A1: Sch: 4/17 Rpt: 8/51	
2	FILER NAME				3	Filer ID (Ethics Commission 00087776	on Filers)
		E., Timothy D. (Mr.)	_		L		
4	Date 09/01/2023	Full name of contributor Funk, Ruth Contributor address; City; Star	out-of-state PAC (ID#: te; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
		Katy, TX 77493					
8	Principal occu Retired	upation / Job title (See Instructions)		Employer (See Instructions Retired	s)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/16/2023	Funk, Sarah					\$25.00
		Contributor address; City; Sta	te; Zip Code				
		League City, TX 77573					
	Principal occupation / Job title (See Instructions)			Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/29/2023	Funk, Stephen					\$50.00
		Contributor address; City; Star Tomball, TX 77375	ie, 2ip Coue				
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	:) 		
	GIS	pation / 300 title (See instructions)		Employer (See instructions	•)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/21/2023	Geesaman, Kathryn					\$100.00
		Contributor address; City; Sta	te; Zip Code				
		Flatonia, TX 78941					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/17/2023	Gelman, Lawrence	_				\$500.00
		Contributor address; City; Sta	te; Zip Code				
		McAllen, TX 78503					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Physician	2.2. 3.0 (200 1100 000010)		McAllen Anesthesia Cor		ltants	

	MONET	ARY POLITICAL (CONTRIBUTIO	Ν	IS .		SCHEDUI	E A1
	The Instruc	ction Guide explains hov	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 5/17 Rpt: 9/51	
2	FILER NAME Greeson P.E	E., Timothy D. (Mr.)				3	Filer ID (Ethics Commission 00087776	on Filers)
4	Date 08/22/2023	5 Full name of contributor Greeson, David6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Richmond, TX 77469 pation / Job title (See Instruction:	s)	9	Employer (See Instructions	;) 		
	Consultant	pation / 300 title (See instructions	5)	3	Proven Project Consulti			
	Date 11/28/2023	Full name of contributor Greeson, Gayla Contributor address; City; S)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Retired	pation / Job title (See Instructions	s)		Employer (See Instructions Retired	<u> </u>		
	Date 09/12/2023	Full name of contributor out-of-state PAC (ID#:) Greeson, Gayla Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
	Principal occu	Richmond, TX 77469 pation / Job title (See Instructions	s)		Employer (See Instructions	;) 		
	Retired	pation / oob title (eee metraction	-)		Retired	,,		
	Date 09/29/2023	Full name of contributor Greeson, Jessica Contributor address; City; S Sealy, TX 77474	out-of-state PAC (ID#: tate; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu Auditor	pation / Job title (See Instruction:	5)		Employer (See Instructions Academy	5)		
	Date 09/29/2023	Full name of contributor Greeson, Retha Contributor address; City; S Richmond, TX 77469	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$5,000.00
	Principal occu Retired	pation / Job title (See Instructions	5)		Employer (See Instructions Retired	s)		

	MONET	ARY POLITICAL CONTRIBU	TION	IS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete t	his for	m.	1	Total pages Schedule A1: Sch: 6/17 Rpt: 10/51	
2	FILER NAME Greeson P.E	, Timothy D. (Mr.)			3	Filer ID (Ethics Commission 00087776	on Filers)
4	Date 09/29/2023	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
_	Deireirel	Richmond, TX 77469	- 10	Faralassa (Ossalastasstissa			
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 10/26/2023	Full name of contributor out-of-state PAC Greeson, Stephen Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$200.00
	Dringing agg	Montgomery, TX 77356 Principal occupation / Job title (See Instructions) Employer (See Ir			<u></u>		
	Enigneer	pation / Job title (See Instructions)		Employer (See Instructions HSB	5)		
	Date 07/03/2023	Full name of contributor out-of-state PAC (ID#:) Greeson P.E., Timothy (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$4,000.00	
		Sealy, TX 77474					
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions Sealy Technical Service			
	Date 09/29/2023	Full name of contributor out-of-state PAC Groves, Julia Contributor address; City; State; Zip Code Bellville, TX 77418)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Not given	pation / Job title (See Instructions)		Employer (See Instructions Not given	5)		
	Date 12/14/2023	Full name of contributor out-of-state PAC Harris, Dan Contributor address; City; State; Zip Code El Campo, TX 77437)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions Not Given	5)		

	MONET	ARY POLITICAL CO	ONTRIBUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to	o complete this for	m.	1	Total pages Schedule A1: Sch: 7/17 Rpt: 11/51	
2	FILER NAME Greeson P.E	, Timothy D. (Mr.)			3	Filer ID (Ethics Commission 00087776	n Filers)
4	Date 09/29/2023	5 Full name of contributor Herchek, Elizabeth6 Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Columbus, TX 78934 pation / Job title (See Instructions)	<u> 9</u>	Employer (See Instructions	7		
	Dental Hyge			Employer (Geo mondonerio	,		
	Date 09/29/2023	Full name of contributor Herchek, William Contributor address; City; State)		Amount of Contribution (\$)	\$200.00
		Columbus, TX 78934					
	Principal occu Dental Hyge	pation / Job title (See Instructions) nist		Employer (See Instructions	i)		
	Date 10/28/2023	Full name of contributor out-of-state PAC (ID#:) Hester, James Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00	
		New Ulm, TX 78950					
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions Oma's Choice	()		
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$500.00	
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions Oma's Choice	()		
	Date 10/19/2023	Full name of contributor Hoover, Brandon Contributor address; City; State Bellville, TX 77418	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$150.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
			l				

	MONET	ARY POLITICAL C	CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/17 Rpt: 12/51	
2	FILER NAME Greeson P.E	., Timothy D. (Mr.)			3	Filer ID (Ethics Commission 00087776	n Filers)
4	Date 10/19/2023	5 Full name of contributor Hoover, Stacy	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$150.00
_	Daine in a la casa	Bellville, TX 77418	, I	O Frankrika (Constructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/16/2023	Full name of contributor J, Boyle Contributor address; City; St)		Amount of Contribution (\$)	\$50.00
	Muldoon, TX 78949 Principal occupation / Job title (See Instructions) Employer (See Instructions)				<u></u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/19/2023	Full name of contributor out-of-state PAC (ID#:) Jackson, Jimmy Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$500.00	
		La Grange, TX 78945					
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 08/02/2023 Jackson, Jimmy Contributor address; City; State; Zip Code La Grange, TX 78945				Amount of Contribution (\$)	\$100.00	
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date 09/09/2023	Full name of contributor out-of-state PAC (ID#:) Jackson, Jimmy Contributor address; City; State; Zip Code La Grange, TX 78945		•	Amount of Contribution (\$)	\$250.00	
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	s)		
			,				

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to com	plete this for	n.	1	Total pages Schedule A1: Sch: 9/17 Rpt: 13/51	
2	FILER NAME Greeson P.E	., Timothy D. (Mr.)			3	Filer ID (Ethics Commission 00087776	n Filers)
4	Date 09/29/2023	 Full name of contributor out-of- Kaspar, Jason Contributor address; City; State; Zip C 			7	Amount of Contribution (\$)	\$110.00
_	Dringing Loon	La Grange, TX 78945	lo.	Employer (Coo Instructions			
8	Principal occu	pation / Job title (See Instructions)	g	Employer (See Instructions)		
	Date 10/14/2023	Kelly, Tom	-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Dringing! goog	Eagle Lake, TX 77434 pation / Job title (See Instructions)		Employer (See Instructions	_		
	Principal occu	Jation / Job title (See Instructions)		Employer (See Instructions)		
	Date 07/21/2023	Full name of contributor out-of-Kollmann, Todd Contributor address; City; State; Zip C	-state PAC (ID#:			Amount of Contribution (\$)	\$9.30
		Sealy, TX 77474					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/26/2023	Matthews, Paul				Amount of Contribution (\$)	\$10.00
	Principal occu Technician	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 12/02/2023	Maynard, Stephen	-state PAC (ID#:)		Amount of Contribution (\$)	\$239.70
	Principal occu Vice Preside	pation / Job title (See Instructions) nt		Employer (See Instructions Durwood Greene Const		tion	
			I				

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains hov	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/17 Rpt: 14/51	
2	FILER NAME Greeson P.E	E., Timothy D. (Mr.)			3	Filer ID (Ethics Commission 00087776	n Filers)
4	Date 10/04/2023	5 Full name of contributor McElmurry, Donna	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$50.00
		Katy, TX 77493					
8	Principal occu	pation / Job title (See Instructions	5)	9 Employer (See Instructions	s)		
	Date 10/27/2023	Full name of contributor McElmurry, Tim Contributor address; City; S			-	Amount of Contribution (\$)	\$50.00
	Principal occu	Katy, TX 77493 pation / Job title (See Instructions	2)	Employer (See Instructions	s)		
	Control Syste		5)	Strategic Automation S		ces	
	Date 11/01/2023	Full name of contributor McMullin, Donlie Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$250.00
		Copperas Cove, TX 7652					
		pation / Job title (See Instructions Broker / Owner	5)	Employer (See Instructions Self Employed	s)		
	Date 11/07/2023	Full name of contributor Meillo, Anthony Contributor address; City; S Houston, TX 77059				Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
	Date 10/26/2023	Full name of contributor Moore, Pamela Contributor address; City; S Cat Spring, TX 78933	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 11/17 Rpt: 15/51	
2	FILER NAME Greeson P.E	E., Timothy D. (Mr.)				3	Filer ID (Ethics Commission 00087776	n Filers)
4	Date 11/18/2023	5 Full name of contributor Murray, Paul	out-of-state PAC (ID#:ate; Zip Code			7	Amount of Contribution (\$)	\$100.00
		Sealy, TX 77474						
8	Principal occu Service	pation / Job title (See Instructions)	9	Employer (See Instructions Coca cola	s)		
	Date 11/02/2023	Full name of contributor Novosad, Garland Contributor address; City; St)		Amount of Contribution (\$)	\$100.00
	Principal occu	Wharton, TX 77488 pation / Job title (See Instructions)		Employer (See Instructions	 s)		
	Dentist / Inst	ructor			Wharton County Junior	Со	llege	
	Date 12/14/2023	Full name of contributor Penney, Cynthia Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	•	Amount of Contribution (\$)	\$100.00
		Columbus, TX 78934						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 08/04/2023	Full name of contributor Rash, Robert Contributor address; City; St Sealy, TX 77474	out-of-state PAC (ID#: ate; Zip Code)	•	Amount of Contribution (\$)	\$47.70
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> s)		
	Date 09/29/2023	Full name of contributor Reeves, Bill Contributor address; City; St Sealy, TX 77474	out-of-state PAC (ID#:ate; Zip Code)	•	Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBI	UTION	S		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete	this for	n.	1	Total pages Schedule A1: Sch: 12/17 Rpt: 16/51	
2	FILER NAME Greeson P.E	., Timothy D. (Mr.)			3	Filer ID (Ethics Commission 00087776	ı Filers)
4	Date 12/31/2023	 Full name of contributor out-of-state PARogers, Brett Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Tyler, TX 75703 pation / Job title (See Instructions)	9	Employer (See Instructions	<u>s)</u>		
	Marketing			Self	-,		
	Date 12/19/2023	Full name of contributor out-of-state PARogers, Stephen Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$10.00
		Bellville, TX 77418					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 11/07/2023	Full name of contributor out-of-state PARollins, James Contributor address; City; State; Zip Code	AC (ID#:)	•	Amount of Contribution (\$)	\$18.36
		La Grange, TX 78945					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	S)		
	Date 10/07/2023	Full name of contributor out-of-state PARollins, James Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$18.38
	Principal occu	La Grange, TX 78945 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 08/07/2023	Full name of contributor out-of-state PARollins, James Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$18.36
		La Grange, TX 78945	•				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 13/17 Rpt: 17/51	
2	FILER NAME Greeson P.E	., Timothy D. (Mr.)		1	Filer ID (Ethics Commission 00087776	n Filers)
4	Date 09/07/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$18.36
_		La Grange, TX 78945	T			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 12/07/2023	Full name of contributor out-of-state PAC (ID# Rollins, James Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$18.36
		La Grange, TX 78945	_			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/25/2023	Full name of contributor out-of-state PAC (ID# Rowley, Brett Contributor address; City; State; Zip Code	:		Amount of Contribution (\$)	\$500.00
		Brookshire, TX 77423				
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/17/2023	Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$50.00
	Principal occu	La Grange, TX 78945 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 12/28/2023	Full name of contributor out-of-state PAC (ID# Smith, Darrell Contributor address; City; State; Zip Code Bellville, TX 77418	<u> </u>		Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			1			

	MONET	ARY POLITICAL CONTRIBUT	TONS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to complete thi	s form.	- 1	Total pages Schedule A1: Sch: 14/17 Rpt: 18/51	
2	FILER NAME Greeson P.E	., Timothy D. (Mr.)		- 1	Filer ID (Ethics Commission 00087776	on Filers)
4	Date 12/12/2023	 Full name of contributor		7 /	Amount of Contribution (\$)	\$250.00
_		Alleyton, TX 78935	<u> </u>	<u> </u>		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction:	ns)		
	Date 08/12/2023	Full name of contributor out-of-state PAC (II Spain, Kim Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$23.70
		Fort Worth, TX 76137				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction:	ns)		
	Date 09/29/2023	Full name of contributor out-of-state PAC (II Staton, Sandra Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$10.00
		Columbus, TX 78934				
	Principal occu	oation / Job title (See Instructions)	Employer (See Instruction	ns)		
	Date 11/10/2023	Full name of contributor out-of-state PAC (II Steven, Hauck Contributor address; City; State; Zip Code Katy, TX 77493	D#:)		Amount of Contribution (\$)	\$2,000.00
	Principal occu Self employe	oation / Job title (See Instructions)	Employer (See Instruction: Steel Trading Corporati	•	f America	
	Date 10/17/2023	Full name of contributor out-of-state PAC (II Stone, Todd Contributor address; City; State; Zip Code The Woodlands, TX 77381	D#:)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction:	ns)		
			1			

	MONET	ARY POLITICAL CONTRIE	BUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to comple	te this for	m.	1	Total pages Schedule A1: Sch: 15/17 Rpt: 19/51	
2	FILER NAME Greeson P.E	., Timothy D. (Mr.)			3	Filer ID (Ethics Commission 00087776	n Filers)
4	Date 10/31/2023	 Full name of contributor out-of-state Stradley, Walker Contributor address; City; State; Zip Code 	PAC (ID#:)	7	Amount of Contribution (\$)	\$500.00
0	Dringing Loon	Seminole, TX 79360	lo.	Employer (Coo Instructions	<u></u>		
8	Rancher	pation / Job title (See Instructions)	9	Employer (See Instructions SW Cattle	·)		
	Date 09/29/2023	Full name of contributor out-of-state Stuessel, Greg Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$40.00
	Principal occu	Sealy, TX 77474 pation / Job title (See Instructions)		Employer (See Instructions	;) 		
		(55.000)			,		
	Date 09/29/2023	Full name of contributor out-of-state Theriot, Melissa Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Columbus, TX 78934					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/19/2023	Wilder, Venus	PAC (ID#:			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>. </u>		
	Date 10/19/2023	Full name of contributor out-of-state Willingham, Kenneth Contributor address; City; State; Zip Code Sealy, TX 77474	PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Fire Chief	pation / Job title (See Instructions)		Employer (See Instructions Fire Service	5)		
			I				

	MONET	ARY POLITICAL CO	ONTRIBUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how t	o complete this for	n.	1	Total pages Schedule A1: Sch: 16/17 Rpt: 20/51	
2	FILER NAME Greeson P.E	, Timothy D. (Mr.)			3	Filer ID (Ethics Commission 00087776	on Filers)
4	Date 10/03/2023	5 Full name of contributor Wisian, Emily	out-of-state PAC (ID#:e; Zip Code)	7	Amount of Contribution (\$)	\$52.00
		Sealy, TX 77474	,				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 09/19/2023	Full name of contributor Wolfskill, Jill Contributor address; City; State				Amount of Contribution (\$)	\$1,000.00
	Principal occu	Bellville, TX 77418 pation / Job title (See Instructions)		Employer (See Instructions	<u>.</u>		
	Retired	pano, 000 ano (000 monacaci)		Retired	,		
	Date 09/29/2023	Full name of contributor Woodling, Ricky Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$50.00
		Bellville , TX 77418					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 08/25/2023	Full name of contributor Woodling, Ricky Contributor address; City; State Bellville, TX 77418				Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/29/2023	Full name of contributor Woodruff, Kathy Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			•				

MONE	FARY POLITICAL CONTRIBUT	IONS	SCHEDULE A1
The Instru	uction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 17/17 Rpt: 21/51	
2 FILER NAME Greeson P.	E., Timothy D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087776
4 Date 09/29/2023	Full name of contributor		7 Amount of Contribution (\$) \$40.00
O Delination Land	Columbus, TX 74934	To Familian (On the street)	
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instruction	S)
Date 09/29/2023	Full name of contributor out-of-state PAC (IE Zapalac, Kelly Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$47.70
	Sealy, TX 77474		
Principal occ	upation / Job title (See Instructions)	Employer (See Instruction	s)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Scl Sch: 1/3 Rpt:	
2 FILER NAME				s Commission Filers)
	E., Timothy D. (Mr.)		00087776	s Commission Filers)
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	0.00
5 Date 12/31/2023	12/31/2023 Funk, Ruth 7 Contributor address; City; State; Zip Code		contribution (\$)	9 In-kind contribution description Letters sent
	Katy, TX 77493		Check if travel of	outside of Texas. Complete Schedule T.
10 Principal occu Retired	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON Retired	-JUDICIAL) (See ii	nstructions)
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 contributo	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
10 ii contributor	is a clinu, law little of parent(s) (if any) (FOR JODICIAL)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of	In-kind contribution
12/31/2023	Greeson, Gayla	,	contribution (\$)	·
	Contributor address; City; State; Zip Code		\$166.50	Letters
	Contributor address, Gry, State, Elp Code			
	Richmond, TX 77469		Check if travel of	l outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON		nstructions)
Retired	,	Retired	, .	·
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)
	,		(,
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor out-of-state PAC (ID#:	١	Amount of	In-kind contribution
12/31/2023	Greeson, Jessica		contribution (\$)	description
,,	Contributor address; City; State; Zip Code		\$116.55	Letters
	Contributor address, Gity, State, Zip Code			
	Sealy, TX 77474		Check if travel of	loutside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON		nstructions)
Auditor	,	Academy	,	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's snouse (if any) (FOR TUDICIAL)
Continuator S	employernaw mm (i ort soulcine)	Law IIIII of Continuation	n o opouse (II ally) (I OR JODIOIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this 1	form.	1 Total pages Schedule A2: Sch: 2/3 Rpt: 23/51
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Greeson P.I	E., Timothy D. (Mr.)		00087776
4			
TOTAL OF	FUNITEMIZED IN-KIND POLITICAL CONTRIB	\$ 0.00	
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution
12/31/2023	Greeson P.E., Timothy (Mr.)		contribution (\$) description \$59.85 Letters
	7 Contributor address; City; State; Zip Code		I I
	Sealy, TX 77474		Check if travel outside of Texas. Complete Schedule T.
10 Principal occı	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)
Engineer		Sealy Technical Se	ervices
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 contribute	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1	
Data	Full name of contributor		Amount of ! In-kind contribution
Date 12/31/2023)	Amount of In-kind contribution contribution (\$) description
12/31/2023	Hester, James		\$2.70 Letters
	Contributor address; City; State; Zip Code		
			į į
	New Ulm, TX 78950		_ ;
Dringing agg		Employer (EOD NON	Check if travel outside of Texas. Complete Schedule T.
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
Owner	rain single and an artist (EOD JUDIOIAL)	Oma's Choice	(FOR AUDIOIAL) (Considerations)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution
12/31/2023	Kaspar, Jason	_	contribution (\$) description
	Contributor address; City; State; Zip Code		\$69.75 Letters
			<u> </u>
			į i
	La Grange, TX 78945		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	
Pastor			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
	· · · · · · · · · · · · · · · · · · ·	,	•
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1	
ii continution	is a simu, raw min or parenties, (ii any) (FOR SODICIAL)		
I			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this	form.	1	Total pages Schedule A2: Sch: 3/3 Rpt: 24/51
2 FILER NAME		3	Filer ID (Ethics Commission Filers)
Greeson P.E., Timothy D. (Mr.)		ľ	00087776
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIE	TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		
5 Date 6 Full name of contributor out-of-state PAC (ID#:)	8	Amount of 9 In-kind contribution
12/31/2023 McElmurry, Donna			contribution (\$) description
7 Contributor address; City; State; Zip Code		1	\$81.90 Letters
7, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,			į
			i i
Katy, TX 77493			Check if travel outside of Tayon, Complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	<u> </u> - 1	Check if travel outside of Texas. Complete Schedule T. JDICIAL) (See instructions)
10 Principal occupation / Job title (FOR NON-JODICIAL) (See instituctions) 11 Employer (FOR NOI			(SEC INSTRUCTION
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FC	OR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's	spouse (if any) (FOR JUDICIAL)
			Species (1. 11. 19) (1. 11. 11. 11. 11. 12.
16 If contributor is a child law firm of parent(s) (if any) (FOR HIDICIAL)			
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date Full name of contributor out-of-state PAC (ID#:)		Amount of In-kind contribution
12/31/2023 Minor, Matthew			contribution (\$) description
Contributor address; City; State; Zip Code		1	\$60.30 Letters
Sommodor address, Sity, State, 21p Sode			i
]
Eagle Lake, TX 77434			_ i
1 -	Franks var (FOR NON	1 11	Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	1-JC	JDICIAL) (See instructions)
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title	(FC	OR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's	spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	I		
		_	. 1
Date Full name of contributor out-of-state PAC (ID#:)		Amount of In-kind contribution contribution (\$) description
12/31/2023 Pinteralli, Eric			contribution (\$) description \$189.45 Letters
Contributor address; City; State; Zip Code			I
			i
Sealy, TX 77474			Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JL	
,	,, (,
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title	(E(DR JUDICIAL) (See instructions)
Contributor's principal occupation (1 Ort 30DICIAL)	Continuator 3 job title	(1 (or Jobiciae) (See instituctions)
	<u> </u>		
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's	spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

PLEDGED CONTRIBUTIONS	SCHEDULE B
The Instruction Guide explains how to complete t	s form. 1 Total pages Schedule B: Sch: 1/1 Rpt: 25/51
2 FILER NAME Greeson P.E., Timothy D. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087776
TOTAL OF UNITEMIZED PLEDGES	\$ 0.00
5 Date 6 Full name of pledgorout-of-state PAC (ID#:	8 Amount of pledge (\$) 9 In-kind description (If applicable)
7 Pledgor Address; City; State; Zip Code	Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (See Instructions)	nployer (See Instructions)

	LOANS							SCHED	ULE E
	The Instruction	n Guide explains ho	ow to c	omplete this f	orm.	1	•	ges Schedule E: 1 Rpt: 26/51	
2	FILER NAME Greeson P.E., T	imothy D. (Mr.)				3		(Ethics Commission	on Filers)
4	TOTAL OF UN	ITEMIZED LOANS						\$	0.00
5	Date of loan 08/07/2023	7 Name of lender Greeson, Tim		out-of-state PA	C (ID#:)	9 Loan Amount (\$) \$3,000.00
6	Is lender a financial institution?	8 Lender address;	City;	State;	Zip Code			10 Interest Rate 11 Maturity Date	40,000.00
		Sealy, TX 77474							
12 Principal occupation / Job title (See Instructions) Engineer			13 Employer (See Instructions Self	5)					
14	14 Description of Collateral X None			15 Check if personal funds we	ere d	eposited	I into political accou (See Instruction		
16	GUARANTOR INFORMATION	17 Name of guarantor			_			19 Amount Guara	nteed (\$)
	X not applicable	18 Guarantor address;	City;	State;	Zip Code				
20	Principal occupation	on			21 Employer (See Instructions	s)			
	Date of loan	Name of lender		out-of-state PA	C (ID#:)	Loan Amount (\$)
	12/19/2023	Greeson, Tim							\$5,000.00
	Is lender a financial institution?	Lender address;	City;	State;	Zip Code			Interest Rate	
	No	Sealy, TX 77474						Maturity Date	
	Principal occupation	on / Job title (See Instruction	ns)		Employer (See Instructions Self	5)			
	Description of Coll X None	ateral			Check if personal funds we	ere d	eposited	l into political accou (See Instruction	
	GUARANTOR INFORMATION	Name of guarantor						Amount Guara	nteed (\$)
	X not applicable	Guarantor address;	City;	State;	Zip Code				
	Principal occupation	on			Employer (See Instructions	s)		ı	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 com	ple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 1/24 Rpt: 27/51	Greeson P.E., Timothy D. (Mr.)		00087776
4	Date	5 Payee name		·
	09/25/2023	Aldi		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$23.95	2009 S Mason Rd		
		Katy, TX 77450		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Food and beverage for event
				Took and beverage for event
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI			Cinds hold
	Date	Payee name		
	09/28/2023	Aldi		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$89.63	2009 S Mason Rd		
	400.00	2000 0 11140011114		
		Katy, TX 77450		
	PURPOSE	· ·	h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Event Expense	٠,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Food and beverage for event
	2 2			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt	Office held
	Date	Payee name		
	09/25/2023	Amazon		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$23.80	410 Terry Ave N		
		Seattle, WA 98109		
	PURPOSE OF	,	b)	Description Charlest travel outside of Tourse Complete Schoolule T
	EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Launch Party items
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI	1		
_				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/24 Rpt: 28/51	Greeson P.E., Timothy D. (Mr.) 00087776
4	Date	5 Payee name
	09/25/2023	Amazon
6	Amount (\$) \$28.12	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Launch Party Items
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/05/2023	Amazon
	Amount (\$) \$19.20	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if Austin, TX, officeholder living expense Nametag
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/05/2023	Amazon
	Amount (\$) \$21.64	Payee address; City; State; Zip Code 410 Terry Ave N
		Seattle, WA 98109
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stamp for letters
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	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: 3/24 Rpt: 29/51	Greeson P.E., Timothy D. (Mr.) 00087776
4	Date	5 Payee name
	08/02/2023	Austin County Fiar and Rodeo
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	1076 East Hill
		Bellville, TX 77418
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense
		Austin County Fair & Rodeo sponsor check
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiulture to beliefit C/Or	
	Date	Payee name
	07/19/2023	Austin County Printing
	Amount (\$)	Payee address; City; State; Zip Code
	\$730.69	6 North Kenny St

		Bellville, TX 77418
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Yard signs
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experialture to benefit C/Or	
	Date	Payee name
	09/18/2023	Austin County Printing
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,039.20	6 N Kenny St
		Bellville, TX 77418
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Printing Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Yard signs
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 4/24 Rpt: 30/51	Greeson P.E., Timothy D. (Mr.) 00087776
4	Date	5 Payee name
	10/31/2023	Austin County Printing
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$455.73	6 N Kenny St
		Bellville, TX 77418
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Yard signs
		Taid Signs
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
-	Data	
	Date	Payee name
	11/20/2023	Austin County Printing
	Amount (\$)	Payee address; City; State; Zip Code
	\$733.39	6 N Kenny St
		Bellville, TX 77418
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Yard signs
		Tala signs
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Dove name
	10/04/2023	Payee name Austin County State Bank
		-
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.00	325 Meyer Street
		Sealy, TX 77474
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Wire fee for big red payment
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
l		

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_		· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1:	
	Sch: 5/24 Rpt: 31/51	Greeson P.E., Timothy D. (Mr.) 00087776
4	Date	5 Payee name
	12/19/2023	Austin County State Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.00	325 Meyer Street
		Soaly TV 77474
_	DUDDOOF	Sealy, TX 77474
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Wire fee for big red expense
		Will look for signout expenses
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
L		
	Date	Payee name
	08/02/2023	Austin County State Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.00	325 Meyer Street
		Sealy, TX 77474
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Check fee for rodeo sponsorship
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/16/2023	Austin County State Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.00	325 Meyer Street
		Sealy, TX 77474
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Check fee for firearm purchase
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	oxpenditure to beliefft C/Of	•

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ		· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 6/24 Rpt: 32/51	2 FILER NAME Greeson P.E., Timothy D. (Mr.) 3 Filer ID (Ethics Commission Filers) 00087776
4	Date	5 Payee name
	10/30/2023	Austin County State Bank
6	Amount (\$) \$5.00	7 Payee address; City; State; Zip Code 325 Meyer Street Sealy, TX 77474
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense Check fee for Matt Minor
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/11/2023	Austin County State Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.00	325 Meyer Street
		Sealy, TX 77474
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Check fee for Wharton county fundraiser
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/27/2023	Brett Rogers
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	4514 Edinburgh Dr
		Tyler, TX 75703
	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 Messaging
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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/Politi 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: 7/24 Rpt: 33/51	Greeson P.E., Timothy D. (Mr.)
4 Date	5 Payee name
08/07/2023	Brett Rogers
6 Amount (\$) \$3,000.00	
	Tyler, TX 75703
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Intro video
9 Complete ONLY if direct expenditure to benefit C/G	Candidate/Officeholder name Office sought Office held DH
Date	Payee name
09/19/2023	Brett Rogers
Amount (\$) \$200.00	Payee address; City; State; Zip Code 4514 Edinburgh Tyler, TX 75703
PURPOSE	
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Voter database upgrade
Complete ONLY if direct expenditure to benefit C/0	Candidate/Officeholder name Office sought Office held OH
Date	Payee name
10/03/2023	Brett Rogers
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 4514 Edinburg
	Tyler, TX 75703
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Voter database upgrade
Complete ONLY if direct expenditure to benefit C/0	Candidate/Officeholder name Office sought Office held OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E: Salaries/V	xpense Vages/Contract Labo	or	Travel in Distri Travel Out of I		
	·		The Instruction Guide expla	ins how to co	mplete this form				
1	Total pages Schedule F1:	2 FILER NAM	Ε			3	Filer ID	(Ethics Commission Filer	s)
	Sch: 8/24 Rpt: 34/51	Greeson P	.E., Timothy D. (Mr.)				00087776	i	
4	Date	5 Payee name	1						
	10/30/2023	Brett Roge							
_		7 Payee addre		tate; Zip Co	ndo.				
6	Amount (\$)	_	•	iale; Zip Co	oue				
	\$500.00	4514 Edink	ourg						
		Tyler, TX 7	5703						
8	PURPOSE	(a) Category (S	see Categories listed at the top of thi	s schedule)	(b) Description	n			
	OF EXPENDITURE	Consulting		•				implete Schedule T.	
	-AI LINDITORE						, officeholder livi	ng expense	
					Voter dat	a pase	upgrade		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		iceholder name	Office sou	ght		Office	held	
	Date	Payee name							
	09/28/2023	Cosco							
	Amount (\$)	Payee addre	ess; City; Si	tate; Zip Co	ode				
	\$223.54	23645 Katy		•					
			•						
		Katy, TX 7	7494						
	PURPOSE OF	(a) Category (S	see Categories listed at the top of thi	s schedule)	(b) Description				
	OF EXPENDITURE	Event Expe	ense					implete Schedule T.	
					Food for		, officeholder livi	пу ехрепъе	
					1 000 101	CVCIII			
_	Complete CNI V if direct	Candidata/O#	iceholder name	Office seri	aht		Office	hold	
	Complete ONLY if direct expenditure to benefit C/OH		icendiuei nanie	Office sou	grit		Onice	IICIU	
	Date	Payee name							
	09/25/2023	Fort Bend (Christian Magazine						
	Amount (\$)	Payee addre	ess; City; Si	tate; Zip Co	ode				
	\$500.00	650 Bough	Lane						
		Houston , 7	TX 77024						
_	PURPOSE				(b) D				
	OF		ee Categories listed at the top of thi	s schedule)	(b) Description Check if t		side of Texas Co	implete Schedule T.	
	EXPENDITURE	Advertising	Expense				, officeholder livi	•	
					Magazine				
					-				
	Complete ONLY if direct	L Candidate/Off	iceholder name	Office sou	aht		Office	held	
	expenditure to benefit C/O			211100 300			- moc	·· ···································	

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 Com

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/24 Rpt: 35/51	Greeson P.E., Timothy D. (Mr.) 00087776
4	Date	5 Payee name
	11/03/2023	Fort Bend Christian Magazine
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	650 Bough Lane
		Houston, TX 77024
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 Magazine advertising
		maga_mo dationing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/13/2023	Fort Bend Christian Magazine
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	650 Bough Lane
		Houston, TX 77024
	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 Magazine advertising
		maga_mo dationing
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	07/13/2023	Godaddy.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$22.36	2150 E Warner Rd
		Tempe, AZ 85284
	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
		Website
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

		The Instruction Guide explains how to co	ompl	ete this form.		
1	Total pages Schedule F1:	2 FILER NAME		3 Fil	er ID	(Ethics Commission Filers)
	Sch: 10/24 Rpt: 36/51	Greeson P.E., Timothy D. (Mr.)		00	0087776	
4	Date	5 Payee name		•		
	08/02/2023	Google				
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode			
	\$9.86	1600 Amphitheater Parkway				
		Mountain View, CA 94043				
8	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	of Texas. Com	plete Schedule T.
	EXPENDITORE			Check if Austin, TX, office	ceholder living	expense
				Email		
_	Complete ONLY if direct	Candidate/Officeholder name			Office he	ıla
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ugnt		Office he	eiu
—						
	Date	Payee name				
	09/05/2023	Google				
	Amount (\$)	Payee address; City; State; Zip Co	ode			
	\$76.46	1600 Amphitheater Parkway				
		Mountain View, CA 94043				
	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 Check if Austin, TX, office		
				Email	ceriolder living	ехрепзе
	Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ught		Office he	eld
	expenditure to benefit C/OI	1	_			
	Date	Payee name				
	10/02/2023	Google				
	Amount (\$)	Payee address; City; State; Zip Co	ode			
	\$76.46	1600 Amphitheater Parkway				

		Mountain View, CA 94043				
	DUDDOCE		(h)	December 1		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(D)	Description Check if travel outside of	of Texas. Com	olete Schedule T.
	EXPENDITURE	Office Overhead/Nerital Expense		Check if Austin, TX, office		
				Email		
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ught		Office he	eld
	expenditure to benefit C/OI	1				

SCHEDULE F1

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

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

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	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
	Sch: 11/24 Rpt: 37/51	Greeson P.E., Timothy D. (Mr.) 00087776			
4	Date	5 Payee name			
	11/02/2023	Google			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$78.11	1600 Amphitheater Parkway			
		Mountain View, CA 94043			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Email			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	-i			
F	Date	Payee name			
	12/04/2023	Google			
H	Amount (\$)	Payee address; City; State; Zip Code			
	\$89.21	1600 Amphitheater Parkway			
		Mountain View, CA 94043			
	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			
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI				
F	Date	Payee name			
	09/28/2023	HEB			
H	Amount (\$)	Payee address; City; State; Zip Code			
	\$45.98	25675 Nelson Way			
		Katy, TX 77494			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense Food for event			
		1 ood for event			
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·			
\vdash					
ı					

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 complete	this form.
1	Total pages Schedule F1: Sch: 12/24 Rpt: 38/51	2 FILER NAME Greeson P.E., Timothy D. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087776
4	Date 09/28/2023	5 Payee name HEB	•
6	Amount (\$) \$95.85	7 Payee address; City; State; Zip Code 25675 Nelson Way Katy, TX 77494	
8	PURPOSE OF EXPENDITURE	Event Expense	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense cod for event
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 12/06/2023	Payee name Harland Clarke	
	Amount (\$) \$33.86	Payee address; City; State; Zip Code 6800 Northwest Pkwy San Antonio, TX 78249	
	PURPOSE OF EXPENDITURE	Accounting/Banking	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense hecks
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 10/25/2023	Payee name Hometown Hardware	
	Amount (\$) \$24.88	Payee address; City; State; Zip Code 501 Meyer St	
		Sealy, TX 77474	
	PURPOSE OF EXPENDITURE	Advertising Expense	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense p ties for signs, other misc hardware
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	Il 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: 13/24 Rpt: 39/51	Greeson P.E., Timothy D. (Mr.) 00087776
4	Date	5 Payee name
	09/29/2023	Kada Creations
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$160.00	2300 Ward Bend Road
		No 755
		Sealy, TX 77474
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense Banded coffee cups
		Banded conee cups
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-
Г	Date	Payee name
	07/28/2023	LI Donation Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	1101 N Highland St
		Arlington, VA 22201
	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 leadership school
		Campaign leadership school
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г	Date	Payee name
	09/27/2023	Live Oak Art Center
	Amount (\$)	Payee address; City; State; Zip Code
	\$334.75	1014 Milam St
		Columbus, TX 78934
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Event space rental
		Event Space Tental
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
ı		

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 Gui	de explains how to co	mple	lete this form.
1	Total pages Schedule F1:	FILER NAM	1E			3 Filer ID (Ethics Commission Filers)
	Sch: 14/24 Rpt: 40/51	Greeson F	P.E., Timothy D. (M	1r.)		00087776
4	Date	Payee nam	е			
	10/23/2023	Mailchimp				
6	Amount (\$)	Payee addr	•	State; Zip Co	ode	
	\$21.32		e de Leon Ave			
		Ste 5000				
		Atlanta, G	A 30308			
8	PURPOSE OF		See Categories listed at the	e top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising	g Expense			Check if Austin, TX, officeholder living expense
						Newsletter
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Of	fficeholder name	Office sou	ıght	Office held
	experialiture to benefit C/O					
	Date	Payee name				
	11/22/2023	Mailchimp				
	Amount (\$)	Payee addr	•	State; Zip Co	ode	
	\$21.32	675 Ponce	e de Leon Ave			
		Ste 5000				
		Atlanta, G	A 30308			
	PURPOSE OF		See Categories listed at the	e top of this schedule)	(b)	Description
	EXPENDITURE	Advertisin	g Expense			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
						Newsletter
	Complete ONLY if direct	Candidate/Of	fficeholder name	Office sou	ight	Office held
	expenditure to benefit C/Ol					
	Date	Payee nam	e			
	12/22/2023	Mailchimp				
	Amount (\$)	Payee addr	ess; City;	State; Zip Co	ode	
	\$2,132.00	675 Ponce	e de Leon Ave			
		Atlanta, G	A 30308			
	PURPOSE OF	a) Category (See Categories listed at the	e top of this schedule)	(b)	Description
	EXPENDITURE	Advertisin	g Expense			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
						Newsletter
H	Complete ONLY if direct	Candidate/Of	fficeholder name	Office sou	ıght	Office held
	expenditure to benefit C/O					

SCHEDULE F1

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

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

Fees O
Food/Beverage Expense P
Gift/Awards/Memorials Expense P
Legal Services S

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: 15/24 Rpt: 41/51	Greeson P.E., Timothy D. (Mr.) 00087776
4	Date	5 Payee name
	10/10/2023	McDaniel, Paul
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$90.00	5563 Mieth Rd
		Sealy, TX 77474
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 Fair tickets for donating back to Fire Department
		Tail tienets for dortating back to the Department
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/30/2023	Minor, Matthew
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$3,300.00	1406 Cr 240
		Eagle Lake, TX 77434
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Manager
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	11/28/2023	Minor, Matthew
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,500.00	1406 Cr 240
	. ,	
		Eagle Lake, TX 77434
Г	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Manager
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	Complete ONLY if direct expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·
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SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 16/24 Rpt: 42/51	2 FILER NAME Greeson P.E., Timothy D. (Mr.) 3 Filer ID (Ethics Commission Filers) 00087776
4	Date 11/28/2023	5 Payee name Republican Party of Texas
6	Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 807 Brazos St Austin, TX 78701
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Filing fee
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 12/08/2023	Payee name Republican Womens Club of Katy
	Amount (\$) \$35.00	Payee address; City; State; Zip Code 9550 Spring Green Blvd Ste 408-122 Katy, TX 77494
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Entry fee
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 12/29/2023	Payee name SA Lasers
	Amount (\$) \$1,263.34	Payee address; City; State; Zip Code 7210 Eckhert Road
		San Antonio, TX 78238
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Pmag engraving
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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: 17/24 Rpt: 43/51	Greeson P.E., Timothy D. (Mr.)	
4	Date	5 Payee name	
	07/17/2023	Shutterenvy	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$310.62	4336 FM 777	
		Jasper, TX 75951	
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 Photos	
		1 Hotos	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold	_
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
			_
	Date	Payee name	
	07/17/2023	Squarespace	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$35.72	8 Clarkson Street	
		New York City, NY 10014	
	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 Website	
		vebsite	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	o	
_	D :		_
	Date	Payee name	
	08/17/2023	Squarespace	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$35.18	8 Clarkson Street	
		New York, NY 11014	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Advertising Expense	
	EXPENDITORE	Check if Austin, TX, officeholder living expense	
		Website	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experience to beliefft C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense 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: 18/24 Rpt: 44/51	Greeson P.E., Timothy D. (Mr.) 00087776			
4	Date	5 Payee name			
	10/17/2023	Squarespace			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$35.18	8 Clarkson Street			
		New York, NY 11014			
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 Website			
		Website			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
ľ	Complete ONLY if direct expenditure to benefit C/OI				
⊨					
	Date	Payee name			
	09/18/2023	Squarespace			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$35.18	8 Clarkson Street			
		New York, NY 11014			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Advertising Expense			
		Check if Austin, TX, officeholder living expense			
		Website			
┡	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	Complete ONLY if direct expenditure to benefit C/OI				
┕	·				
	Date	Payee name			
	11/17/2023	Squarespace			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$35.18	8 Clarkson Street			
		New York, NY 11014			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Advertising Expense			
		Check if Austin, TX, officeholder living expense			
		Website			
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	Complete ONLY if direct expenditure to benefit C/OI				
\vdash	<u> </u>				
L					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/24 Rpt: 45/51	Greeson P.E., Timothy D. (Mr.)
4	Date	5 Payee name
	12/18/2023	Squarespace
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.18	8 Clarkson Street
		New York, NY 11014
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
		Website
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	07/28/2023	Strelecki, Josh
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	655 Woodland St
		Centerton, AR 72719
	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense Website development
		vvebsite development
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	U
	Date	Payee name
	10/04/2023	The Big Red
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,500.00	53 Calle Palmera
	, , , , , , , , , , , , , , , , , , , ,	STE 601
		San Juan PR 00901 Puerto Rico
	PURPOSE	Tu-
	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	Check if Austin, TX, officeholder living expense
		Fundraising Program
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Orange to bonom O/O	

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
┡	Total pages Cabadula F1:	· · · · · · · · · · · · · · · · · · ·
	Total pages Schedule F1: Sch: 20/24 Rpt: 46/51	2 FILER NAME Greeson P.E., Timothy D. (Mr.) 3 Filer ID (Ethics Commission Filers) 00087776
4	Date	5 Payee name
	12/19/2023	The Big Red
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,098.00	53 Calle Palmeras
		STE 601
		San Juan PR 00901 Puerto Rico
Ļ		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Voter data & text message
		Voter data & text message
Ļ		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	oxponditare to benefit eye.	
	Date	Payee name
	11/16/2023	The Riot Firearms
	Amount (\$)	Payee address; City; State; Zip Code
	\$800.63	1026 Barten Rd
		Columbus, TX 78934
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Firearm for Wharton County donation
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experialitie to beliefit G/OI	<u>'</u>
	Date	Payee name
	10/25/2023	USPS
	Amount (\$)	Payee address; City; State; Zip Code
	\$66.00	222 Moody Street
		Sealy, TX 77474
H	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Stamps
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
\vdash		
L		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 21/24 Rpt: 47/51	Greeson P.E., Timothy D. (Mr.)		00087776
4	Date	5 Payee name		
	08/07/2023	Vistaprint		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$83.35	275 Wyman Street		
		Waltham, MA 02451		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Printing Expense		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE			Check if Austin, TX, officeholder living expense
				Business Cards
9	Complete ONLY if direct	Condidata/Officabaldar nama Offica acu	abt	Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	gnı	Office field
	Data			
	Date	Payee name		
	10/18/2023	Vistaprint		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$282.63	275 Wyman Street		
		Waltham, MA 02451		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Printing Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Push cards
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	12/11/2023	Vistaprint		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$186.17	275 Wyman Street		
		Waltham, MA 02451		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Printing Expense	` ´	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	· .		Check if Austin, TX, officeholder living expense
				Pushcards
	Commission ONE VIII II	Condidate Office leaders	- اسم	Office held
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	gnt	Office held

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 (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	_
	Sch: 22/24 Rpt: 48/51	Greeson P.E., Timothy D. (Mr.) 00087776	
4	Date	5 Payee name	_
	09/28/2023	Walmart	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$32.28	310 Overcreek Way	
		Sealy, TX 77474	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Event Expense	
		Check if Austin, TX, officeholder living expense	
		Event supplies	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
9	expenditure to benefit C/OI		
_			_
	Date	Payee name	
	09/25/2023	Walmart	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$71.78	310 Overcreek Way	
		Sealy, TX 77474	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Food and beverage for event	
		1 ood and beverage for event	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
_	Date	Pouso nome	_
	10/27/2023	Payee name Walmart	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$43.21	310 Overcreek Way	
		Sealy, TX 77474	
	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	
		Zip ties for signs	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
			_
ı			

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 23/24 Rpt: 49/51	Greeson P.E., Timothy D. (Mr.) 00087776							
4	Date	5 Payee name							
	11/20/2023	Walmart							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$39.15	310 Overcreek Way							
		Sealy, TX 77474							
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 Office supplies							
		Cinice Supplies							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								
F	Date	Payee name							
	11/17/2023	Wharton Chamber of Commerce							
H	Amount (\$)	Payee address; City; State; Zip Code							
	\$10.00	225 N Richmond Road							
		Wharton, TX 77488							
	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							
		Parade entry fee							
Faraue entry lee									
Complete ONLY if direct Candidate/Officeholder name Office sought Office held									
	expenditure to benefit C/OI								
F	Date	Payee name							
	12/11/2023	Wharton Republican Party							
Н	Amount (\$)	Payee address; City; State; Zip Code							
\$500.00 1000 S Fulton St									
		Wharton, TX 77488							
	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							
		Fundraiser event entry fee							
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								
\vdash									
ı									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	mmittee	Gift/Awa Legal Se	everage Expense ards/Memorials Expen ervices a struction Guide e			pense ages/	e 'Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)	
1	Total pages Schedule F1:	2	FILER NAM	E						3	Filer ID	(Ethics Commission Filers)
	Sch: 24/24 Rpt: 50/51				nothy D. (Mr.)						00087776	
4	Date	5	Payee name	9						_		
	08/03/2023		Wisian, En									
6	Amount (\$)	7	Payee addre	ess;	City;	State;	Zip Cod	de				
	\$36.00		503 West S	St								
			Sealy, TX	77474								
8	PURPOSE	(a)			ories listed at the top	of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Event Expe	ense					_		ide of Texas. Com	
	-	Check if Austin, TX, officeholder living expense Reimbursement for event food										
									Reillibulselli	en	ioi eventio	ou
9	Complete ONLY if direct	Ц,	Candidate/Of	fioobold	lor namo		Office souç	aht			Office he	ald.
"	expenditure to benefit C/OI		Canuluate/On	liceriola	lei Haille	C	niice souţ	JIIL			Office fie	au
\vdash												

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Fees Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense	Office Over Polling Ex Printing E Salaries/V	xpense Vages/Contract Labor		Solicitation Fruindraising Expense Transportation Equipment & Related I Travel in District Travel Out of District OTHER (enter a category not listed at			
1	Total pages Schedule G:	2	FILER NAME					3	Filer ID (Ethics Commission	on Filers)		
_	Sch: 1/1 Rpt: 51/51			- E., Timothy D. (I	Mr.)				00087776			
4	Date	5	Payee name					<u> </u>				
-	09/24/2023		Amazon									
6	Amount (\$)	7	Payee addre	ss; City;								
	\$47.51											
			410 Terry Ave N									
	Reimbursement from political contributions intended		Soattle MA	00100								
	interided		Seattle, WA	. 90109			·					
8	PURPOSE OF	(a)	Category (S	ee Categories listed at th	ne top of this sch	edule)	(b) Description	=	neck if travel outside of Texas. Comple			
	EXPENDITURE		Event Expe	nse			l L	Cr	neck if Austin, TX, officeholder living ex	pense		
							Table cloths					
9		Car	ndidate/Officel	nolder name			Office sought		Office held			
	expenditure to benefit C/OH											
		_										
	Date		Payee name									
09/25/2023			Amazon									
Amount (\$)			Payee address; City; State; Zip Code									
	\$12.49		410 Terry Ave N									
	Reimbursement from											
	political contributions intended		Seattle, WA	98109								
	PURPOSE	H	Category (Se	ee Categories listed at th	ne top of this sch	edule)	Description	Cr	neck if travel outside of Texas. Comple	te Schedule T.		
OF			Event Expe		,	Check if Austin, TX, officeholder living expense						
EXPENDITURE						Food for launch	d for launch party					
	Complete ONLY if direct	Car	ndidate/Office	nolder name			Office sought		Office held			
	expenditure to benefit						2g					
	C/OH											
	Date	Г	Payee name									
	10/17/2023		NBD Grapg	hics								
	Amount (\$)	┝	Payee addre		State:	Zip Co	nde					
	\$1,001.10		917 S Maso	•	Olulo,		Juc					
	·		JIT J Masc	ni ita								
	X Reimbursement from political contributions											
	intended	L	Katy, TX 77	450								
	PURPOSE		Category (S	ee Categories listed at th	ne top of this sch	edule)	Description	_	neck if travel outside of Texas. Comple			
OF EXPENDITURE			Advertising			Check if Austin, TX, officeholder living expense						
							4x8 signs					
		L										
	·	Car	ndidate/Officel	nolder name			Office sought		Office held			
	expenditure to benefit C/OH											