### CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

#### FORM JCOR-C/OH

1	•	cs Commission Filers)	2 Total pages filed:			OFFICE U	SE ONLY
	00037774		8			Date Received	
3	CANDIDATE /	MS / MRS / MR	FIRST		MI	ELECTRONICA	LLY FILED
	OFFICEHOLDER NAME	The Honorable	William Eugene			01/30/2024	
		NICKNAME	LAST		SUFFIX	1	
		Bill	Parham			Date Hand-delivered or I	Date Postmarked
4	ORIGINAL	January 15	Runoff	Other (s	specify)		
	REPORT TYPE	July 15	Exceeded modified	reporting limit		Receipt #	Amount
		30th day before election	15th day after camp				
		8th day before election	appointment (office	• •		Date Processed	
5	ORIGINAL PERIOD	Month Day Yea	ar	Month Day	Year	Date Imaged	
•	COVERED	01/01/2024	THROUGH	01/25/2024	roa	Date illiaged	
6	EXPLANATION OF C					<u> </u>	
•		e personal loans that I repo	orted and realized that	I did not state the \$29	75 loan from the	e previous report. Th	nave three loans to
	my campaign 2975, 1		5.10a aa .0a20a aa.	. 4.4 5.4.6		providuo roporti i i	
7	AFFIDAVIT						
	,			ear, or affirm, under p	enalty of perjury	, that this corrected	report is true
			and	correct.			
			Che	eck the box next to any	and all applicat	ole statements:	
				Semiannual reports	s: Iswear or	affirm that the origin	al report
			Ш	was made in good fa			
				misrepresent the info	ormation contain	ned in the report.	
			X	Other reports:	swear or affirm	that I am filing this o	corrected
			[/]	report not later than	the 14th busines	ss day after the date	e I learned
				that the report as ori swear, or affirm, that			
				filed was made in go		nosion in the report	ao ongmany
				The Hone	orable William	Eugene Parham	
				Signatu	ure of Candidate	or Officeholder	
	AFFIX NOTARY ST	AMP / SEAL ABOVE					
	Sworn to and subsc	ribed before me, by the sai	d		, this th	ne	day
	of	, 20, to cer	tify which, witness my	hand and seal of office	e.		
	Cimaratura ( C	an administrativa at 10	Dulmerston	fficer eduction .	4la <del>-</del>	Title of efficient 1 1 1	interior ti-
	Signature of office	er administering oath	Printed name of of	fficer administering oa	tn 7	Fitle of officer admin	istering oath

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

#### FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00037774 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable William Eugene NAME Date Received **ELECTRONICALLY FILED** 01/30/2024 NICKNAME LAST **SUFFIX** Bill Parham CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Regina NAME NICKNAME LAST **SUFFIX** Gina Leyva **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (432) 386-6050 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff X appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2024 01/25/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/05/2024 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE None District Judge District 394

**GO TO PAGE 2** 

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

3 of 8

13 C / OH NAME	Parham, William Euç	ene (The Honorable)	14 Filer ID 00037774	(Ethics Commission Filers)
This box is for notice of political contributions accepted or political expenditures made by political committee candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's consent. Candidates and officeholders are required to report this information only if they receive notice of scommittees.				eholder's knowledge or
Additional Pages COMMITTEE TYPE COMMITTEE NAME				
ш	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURE	ER NAME	
		COMMITTEE CAMPAIGN TREASURE	ER ADDRESS	
<b>16</b> CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(O ES OF LOANS, OR CONTRIBUTIONS		\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES	S OF LOANS)	\$ 0.00
EXPENDITURE	· ·	IZED POLITICAL EXPENDITURES	3 OF LOANS)	\$ 0.00
TOTALS	4. TOTAL POLIT	TOAL EVENIETURES		\$1.50
	4. IOTAL POLIT	ICAL EXPENDITURES		\$ 2,224.79
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PI	AL CONTRIBUTIONS MAINTAINED AS ERIOD	S OF THE LAST DAY OF THE	<b>\$</b> 1,582.16
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCII OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING RTING PERIOD	LOANS AS OF THE LAST DAY	<b>\$</b> 4,975.00
17 AFFIDAVIT				
			inder penalty of perjury, that the ac d includes all information required tion Code.	
		The	e Honorable William Eugene P	arham
			Signature of Candidate or Officeho	
AFFIX NOT	ΓARY STAMP / SEAL AB	OVE		
Sworn to and subsc	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal o		
Signature of office	er administering oath	Printed name of officer administer	ring oath Title of office	er administering oath

### SUBTOTALS - JC/OH

### FORM JC/OH COVER SHEET PG 3

4 of 8					
18 FILER NAME Parham, William Eugene (The Honorable)  19 Filer ID (Ethics Commission Filers) 00037774					
l	20 SCHEDULE SUBTOTALS  NAME OF SCHEDULE				
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$		
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$		
4. X	SCHEDULE E(J): LOANS (JUDICIAL)		\$ 2,000.00		
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 2,224.79		
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$		
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$		
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$		
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$		
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$		

	LOANS (J	UDICIAL)			SCHEDULE E(J)
	The Instruction	n Guide explains how to complete this f	orm.		ges Schedule E(J): 2 Rpt: 5/8
2	FILER NAME Parham, William	Eugene (The Honorable)		3 Filer ID 000377	(Ethics Commission Filers)
4	TOTAL OF UN	ITEMIZED LOANS			\$
5	Date of loan 01/05/2024	7 Name of lender out-of-state PA Parham, William (Mr.)	C (ID#:	)	9 Loan Amount (\$) \$1,000.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate
	No	Alpine, TX 79830			11 Maturity Date
12	Lender's Principal	Occupation	13 Lender's Job Title		
14	Lender's Employe	/Law Firm	15 Law Firm of lender's spouse (if any)		
16	If lender is child, la	w firm of parent(s) (if any)	<u> </u>		
17	17 Description of Collateral  X None		18 Check if personal funds were deposited into political account (See Instructions)		
19	GUARANTOR INFORMATION	20 Name of guarantor	22 Amount Guaranteed (\$)		22 Amount Guaranteed (\$)
	X not applicable	<b>21</b> Guarantor address; City; State;	Zip Code		
23 Guarantor's Principal Occupation			24 Guarantor's Job Title		
25 Guarantor's Employer/Law Firm			26 Law Firm of guarantor's spouse (if any)		
27 If guarantor is child, law firm of parent(s) (if any)					

	LOANS (J	UDICIAL)			SCHEDULE E(J)
	The Instruction	n Guide explains how to complete this f	orm.		ges Schedule E(J): 2 Rpt: 6/8
2	FILER NAME Parham, William	Eugene (The Honorable)		3 Filer ID 000377	(Ethics Commission Filers)
4	TOTAL OF UN	ITEMIZED LOANS			\$
5	Date of loan 01/17/2024	7 Name of lender out-of-state PA Parham, William (Mr.)	C (ID#:	)	9 Loan Amount (\$) \$1,000.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate
	No	Alpine, TX 79830			11 Maturity Date
12	Lender's Principal	Occupation	13 Lender's Job Title		
14	Lender's Employer	/Law Firm	15 Law Firm of lender's spouse (if any)		
16	If lender is child, la	w firm of parent(s) (if any)	<u> </u>		
17	17 Description of Collateral  X None		18 Check if personal funds were deposited into political account  (See Instructions)		
19	GUARANTOR INFORMATION	20 Name of guarantor	22 Amount Guaranteed (\$)		22 Amount Guaranteed (\$)
	X not applicable	<b>21</b> Guarantor address; City; State;	Zip Code		
23 Guarantor's Principal Occupation			24 Guarantor's Job Title		
25 Guarantor's Employer/Law Firm			26 Law Firm of guarantor's spouse (if any)		
27 If guarantor is child, law firm of parent(s) (if any)					

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Alpine Avalanche Newspaper  Alpine Avalanche Newspaper  7 Payee address; City; State; Zip Code  \$1,002.00  \$1,002.00  Alpine, TX 79830  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 Newspaper ads		Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Sch: 1/2 Rpt: 7/8	1	Total pages Schodule E1:	,
Alpine Avalanche Newspaper  Aprile Avalanche Newspaper  Amount (\$) 7 Payee address: City; State; Zip Code  Alpine, TX 79830  PURPOSE OF EXPENDITURE  Alpine, TX 79830  Advertising Expense  (a) Category (See Categories listed at the top of this schedule)  Candidate/Officeholder name  Office sought  Office held  Amount (\$) Payee address; City; State; Zip Code  EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Amount (\$) Payee address; City; State; Zip Code  EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Office held  Date  Office held  Complete ONLY if direct expenditure to benefit C/OH  Advertising Expense  (a) Category (See Categories listed at the top of this schedule)  Advertising Expense  Office held  Payee name  Hudspeth County Herald  Amount (\$) Payee address; City; State; Zip Code  EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Date  Date  Date  Payee name  Hudspeth County Herald  Amount (\$) Payee address; City; State; Zip Code  \$200.00  Payee address; City; State; Zip Code  For Hancock, TX 79839  PURPOSE  OF CATEGORIES (City; State; Zip Code  EXPENDITURE  (b) Description  Office held  Office held  Office held  Office held  Complete ONLY if direct complete Schedule T.  Office held  Advertising Expense  (b) Description  Office held	_		
Total Payer and the schedule	4	Date	5 Payee name
### St. Onc. 118 N. 5th Street    Alpine, TX 79830			
Alpine, TX 79830  8    PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)   (b) Description   check if a route outside of Tovas. Complete Schedule T.   check if Austin, TX, officeholder living superise Newspaper ads  9    Complete ONLY if direct expenditure to benefit C/OH  Date	6	` '	
Complete QNLY if direct expenditure to benefit C/OH   Category (see Categories listed at the top of this schedule)   (b) Description   Check if Austin, TX, officiabilitier fiving expense   Candidate/Officeholder name   Office sought   Office held		Φ1,002.00	110 N. Sur Sueet
OF EXPENDITURE  Advertising Expense  Office sought  Office held			Alpine, TX 79830
Complete ONLY if direct expenditure to benefit C/OH   Candidate/Officeholder name   Office sought   Office held	8		
Candidate/Officeholder name   Office sought   Office held			7 devertising Expense
9 Complete QNLY if direct expenditure to benefit C/OH  Date			
Date 01/18/2024 Payee name El Capitan Hotel  Amount (\$) Payee address; City; State; Zip Code 100 E. Broadway  Van Horn, TX 79855  PURPOSE OF EXPENDITURE  Candidate/Officeholder name Office sought Office held  Complete ONLY if direct expenditure to benefit C/OH  Date 01/17/2024 Payee name Hudspeth County Herald  Amount (\$) Payee address; City; State; Zip Code   Candidate/Officeholder name Office sought Office held  Date 01/17/2024 Hudspeth County Herald  Amount (\$) Payee name Hudspeth County Herald  Amount (\$) Payee address; City; State; Zip Code P.O. Box 128  Fort Hancock , TX 79839  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Advertising Expense  Campaign Announcement in Spanish  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Newspaper ads
Date 01/18/2024 Payee name El Capitan Hotel  Amount (\$) Payee address; City; State; Zip Code 100 E. Broadway  Van Horn, TX 79855  PURPOSE OF EXPENDITURE  Candidate/Officeholder name Office sought Office held  Complete ONLY if direct expenditure to benefit C/OH  Date 01/17/2024 Payee name Hudspeth County Herald  Amount (\$) Payee address; City; State; Zip Code   Candidate/Officeholder name Office sought Office held  Date 01/17/2024 Hudspeth County Herald  Amount (\$) Payee name Hudspeth County Herald  Amount (\$) Payee address; City; State; Zip Code P.O. Box 128  Fort Hancock , TX 79839  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Advertising Expense  Campaign Announcement in Spanish  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
Date 01/18/2024	9		
Amount (\$)			
Amount (\$)		Date	Payee name
\$200.00 100 E. Broadway  Van Horn, TX 79855  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Advertising Expense  Complete ONLY if direct expenditure to benefit C/OH  Date 01/17/2024  Amount (\$) Payee name Hudspeth County Herald  Amount (\$) Payee address; City; State; Zip Code \$200.00 P.O. Box 128  Fort Hancock , TX 79839  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Advertising Expense  (b) Description Office held  (b) Description  (c) Description  (b) Description  (c) Description  (c) Description  (d) Description  (e) Description  (f) Description  (h) Descrip		01/18/2024	El Capitan Hotel
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Advertising Expense  (b) Description   Check if Tausel outside of Texas. Complete Schedule T.		Amount (\$)	Payee address; City; State; Zip Code
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Advertising Expense  (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meet and Greet  Complete ONLY if direct expenditure to benefit C/OH  Date O1/17/2024  Amount (\$) Payee name Hudspeth County Herald  Amount (\$) Payee address; City; State; Zip Code P.O. Box 128  Fort Hancock , TX 79839  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Advertising Expense  Campaign Announcement in Spanish  Complete ONLY if direct Candidate/Officeholder name Office sought  Office held		\$200.00	100 E. Broadway
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Advertising Expense  (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meet and Greet  Complete ONLY if direct expenditure to benefit C/OH  Date O1/17/2024  Amount (\$) Payee name Hudspeth County Herald  Amount (\$) Payee address; City; State; Zip Code P.O. Box 128  Fort Hancock , TX 79839  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Advertising Expense  Campaign Announcement in Spanish  Complete ONLY if direct Candidate/Officeholder name Office sought  Office held			
Advertising Expense  Advertising Expense  Advertising Expense  Complete ONLY if direct expenditure to benefit C/OH  Date 01/17/2024  Amount (\$)  Payee address; City; State; Zip Code  \$200.00  Port Hancock, TX 79839  Purpose OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Advertising Expense  Complete ONLY if direct  Candidate/Officeholder name Office sought Office held  Office held  Office held  (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if ravel outside of Texas. Complete Schedule T. Check if ravel outside of Texas. Complete Schedule T. Check if ravel outside of Texas. Complete Schedule T. Check if ravel outside of Texas. Complete Schedule T. Check if ravel outside of Texas. Complete Schedule T. Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Announcement in Spanish  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
Complete ONLY if direct expenditure to benefit C/OH			
Complete ONLY if direct expenditure to benefit C/OH  Date 01/17/2024  Amount (\$)  Payee address; City; State; Zip Code  Fort Hancock , TX 79839  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Advertising Expense  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held  Office held  Office held			Advertising Expense
Date 01/17/2024 Payee name Hudspeth County Herald  Amount (\$) Payee address; City; State; Zip Code P.O. Box 128  Fort Hancock , TX 79839  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 Campaign Announcement in Spanish  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
Date 01/17/2024 Payee name Hudspeth County Herald  Amount (\$) Payee address; City; State; Zip Code P.O. Box 128  Fort Hancock , TX 79839  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 Campaign Announcement in Spanish  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
O1/17/2024 Hudspeth County Herald  Amount (\$) Payee address; City; State; Zip Code \$200.00 P.O. Box 128  Fort Hancock, TX 79839  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense Campaign Announcement in Spanish  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
O1/17/2024 Hudspeth County Herald  Amount (\$) Payee address; City; State; Zip Code \$200.00 P.O. Box 128  Fort Hancock, TX 79839  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense Campaign Announcement in Spanish  Complete ONLY if direct Candidate/Officeholder name Office sought Office held		Date	Pavee name
Amount (\$)  Payee address; City; State; Zip Code  P.O. Box 128  Fort Hancock, TX 79839  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 Campaign Announcement in Spanish  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held		01/17/2024	
\$200.00 P.O. Box 128  Fort Hancock , TX 79839  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 Campaign Announcement in Spanish  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
Fort Hancock , TX 79839  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 Campaign Announcement in Spanish  Complete ONLY if direct Candidate/Officeholder name Office sought Office held		` ,	
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 Campaign Announcement in Spanish  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held		Ψ200.00	F.O. BOX 120
OF EXPENDITURE  Advertising Expense  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Announcement in Spanish  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held			Fort Hancock , TX 79839
EXPENDITURE  Advertising Expense  Check if Austin, TX, officeholder living expense  Campaign Announcement in Spanish  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held			· · · · · · · · · · · · · · · · · · ·
Campaign Announcement in Spanish  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Advertising Expense
Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
			Campaign Announcement in Spanish
	_	Operation Objects "	Orandidate (Office health a grants

#### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### 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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al 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:	
Sch: 2/2 Rpt: 8/8	Parham, William Eugene (The Honorable) 00037774
4 Date	5 Payee name
01/06/2024	Jeff Davis County Mountain Dispatch
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$200.00	205 W. Court Av
	Fort Davis, TX 79734
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Campaign Announcement
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
01/17/2024	Van Horn Advocate
Amount (\$)	Payee address; City; State; Zip Code
\$382.50	213 E. Broadway
	Van Horn, TX 79855
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense  Cry Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Newspaper campaign Announcement
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
01/04/2024	Vistaprint
Amount (\$)	Payee address; City; State; Zip Code
\$240.29	275 Wyman St.
ΨΔ+0.23	2.0
	Waltham MA 02451
	Waltham, MA 02451
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.
	Campaign Push Cards
	Campaign Fusit Calus
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	