JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

т	ne JC/OH Instruction	Guide explains how to complete th	is form.	Filer ID (Ethics Commis	sion Filers)	2 Total pages	
F	0.0000/277/			00087867			18
3	CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRS	Т		MI	OFFICE	USE ONLY
	NAME	Sara	hK.			Data Databard	
						Date Received	
						ELECTRONIC	CALLY FILED
L		NICKNAME LAST			SUFFIX	02/04/2024	
L					30111/		
L		Bran	don				
4	CANDIDATE /	ADDRESS / PO BOX; APT / SUIT	E # CITY		ZIP CODE	Date Hand-delivered	l or Date Postmarked
Г	OFFICEHOLDER		L <i>"</i> , 0111,		ZII OODE		
L	MAILING	13320 Paisano Trail					
L	ADDRESS					Receipt #	Amount
L	Change of Address	Austin TV 20222					
L	Change of Address	Austin, TX 78737				Date Processed	
L							
L						Data lass and	
L						Date Imaged	
5	CAMPAIGN	MS / MRS / MR FIRS	Г			MI	
L	TREASURER	Ms. Kare	nl				
L	NAME						
L							
L		NICKNAME LAST				SUFFIX	
L		Ford					
L		Ford					
L							
6	CAMPAIGN	STREET ADDRESS (NO PO BOX F	PLEASE);	APT	/ SUITE #; CITY;	S	TATE; ZIP CODE
L	TREASURER	500 Browne Terrace					
L	ADDRESS	SOU BIOWINE TELLACE					
L	(Residence or Business)						
L	(Residence of Business)	San Marcos, TX 78666					
L							
F							
7	CAMPAIGN	AREA CODE PHONE NUM	ABER EX	TENSION			
L	TREASURER PHONE	(512) 922-8234					
L	FHONE						
8	REPORT						
Ľ	TYPE		h day hafara al		Dunoff	1 Eth day offer a	omnoign tropouror
		January 15 X 30t	h day before ele		Runoff		campaign treasurer fficeholder only)
L			day bafara ala	ation 🗖			
L		July 15 8th	day before elec		Exceeded modified reporting limit	Final Report (A	ttach C/OH-FR)
L							
9	PERIOD	Month Day Year			Month Day	Year	
L	COVERED	01/01/2024	THR	DUGH	01/25/202	Δ	
		01/01/2024			01/20/202	-	
L							
10	ELECTION	ELECTION DATE			ELECTION TYPE		
L		Month Day Year	X Prim	ary	Runoff	Other	
L		03/05/2024					
L			Gene	eral	Special		
L	055105					(if here	
111	. OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
L					District Judge Dis	strict 483	
L							
⊢							
1							
L			00 70				
1			6010	PAGE 2			
Fo	rms provided by To	xas Ethics Commission	www.ethic	s.state.tx.us		\/or	sion V3.5.1.9000c47f
	inio provided by Te		******			V CI	2.2.1 ¥ 0.0.1.000004/1

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 18

13 C / OH NAME	Brandon, Sarah K.		14 Filer ID 00087867	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditud These expenditures may have been made without to d officeholders are required to report this information	he candidate's or offic	eholder's kno	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	S		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$	545.11
			2	\$	5,018.46
EXPENDITURE	·	PLEDGES, LOANS, OR GUARANTEES OF LOANS IZED POLITICAL EXPENDITURES	5)	\$	0.00
TOTALS				\$	0.00
4. TOTAL POLIT		ICAL EXPENDITURES		\$	14,429.24
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	AST DAY OF THE	\$	23,676.24
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	13,000.00
17 AFFIDAVIT		l swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.	r of perjury, that the ac l information required	ccompanying to be reporte	report is d by me
		Sar	rah K. Brandon		
		Signature of	Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL AB	DVE			
		aid	, this the		day
of	, 20, to c	ertify which, witness my hand and seal of office.			
Signature of offic	cer administering oath	Printed name of officer administering oath	Title of office	er administeri	ng oath
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V	3.5.1.9000c47

FORM JC/OH COVER SHEET PG 3

	FOR
COVER	R SF

3 of 18	
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18 FILER NAME		19 Filer ID	(Ethics Commission Filers)
Brandon, Sarah K.		00087867	· · · · ·
20 SCHEDULE SUBTOTALS			SUBTOTAL AMOUNT
NAME OF SCHEDULE			
1. X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)			\$ 4,648.46
2. X SCHEDULE A2: NON-MONETARY	Y (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 370.00
3. SCHEDULE B(J): PLEDGED CON	TRIBUTIONS (JUDICIAL)		\$
4. SCHEDULE E(J): LOANS (JUDICI	AL)		\$
5. X SCHEDULE F1: POLITICAL EXPE	NDITURES FROM POLITICAL CONTRIBUTION	S	\$ 9,352.53
6. SCHEDULE F2: UNPAID INCURR	ED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF II	NVESTMENTS FROM POLITICAL CONTRIBUTIO	ONS	\$
8. X SCHEDULE F4: EXPENDITURES	MADE BY CREDIT CARD		\$ 5,076.71
9. SCHEDULE G: POLITICAL EXPER	NDITURES FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT FROM	POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EX	PENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12. SCHEDULE K: INTEREST, CREDI	TS, GAINS, REFUNDS, AND CONTRIBUTIONS I	RETURNED	\$

SUBTOTALS - JC/OH

The Instrue	ction Guide explains how to comp	lete this form.	1 Total pages Schedule A(J)1: Sch: 1/6 Rpt: 4/18
2 FILER NAME Brandon, Sa	rah K.		3 Filer ID (Ethics Commission Filers) 00087867
4 Date 5 Full name of contributor out-of-state PA 01/13/2024 Albrecht, Michael		ate PAC (ID#:)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Cod Austin, TX 78746	le	
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	1
Orthopedic S	Surgeon	Orthopedic Surgeon	
10 Contributor's e		11 Law firm of contributor's	s spouse (if any)
Ascension S			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-sta	ate PAC (ID#:)	Amount of Contribution (\$)
01/17/2024	Barbara, Mansu		\$200.00
	Contributor address; City; State; Zip Cod	le	
	Dripping Springs, TX 78620		
Contributor's F	Principal Occupation	Contributor's Job Title	
retired		retired	
	employer/law firm	Law firm of contributor's	s spouse (if any)
retired			
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-sta	ate PAC (ID#:)	Amount of Contribution (\$)
01/20/2024	Brito, Rene		\$300.00
	Contributor address; City; State; Zip Cod	le	
	Austin, TX 78729		
	Principal Occupation	Contributor's Job Title	
Sales Rep		Sales Rep	
	employer/law firm	Law firm of contributor's	s spouse (if any)
IBM			
If contributor is	s a child, law firm of parent(s) (if any)		
orms provided	by Texas Ethics Commission	www.ethics.state.tx.us	Version V3.5.1.9000c47

The Instrue	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 2/6 Rpt: 5/18
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Brandon, Sa	rah K.		00087867
4 Date	5 Full name of contributor out-of-state PAC (ID)	#:)	7 Amount of Contribution (\$)
01/09/2024	Fant, Jana		\$1,000.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77019		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Owner		Owner	
10 Contributor's e	employer/law firm	11 Law firm of contributor's s	pouse (if any)
New Process	s Steel		
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID	#:)	Amount of Contribution (\$)
01/13/2024	Haschke, Donna		\$104.48
	Contributor address; City; State; Zip Code		
	Buda, TX 78610		
Contributor's F	Principal Occupation	Contributor's Job Title	
retired		retired	
Contributor's e	employer/law firm	Law firm of contributor's s	pouse (if any)
retired			
If contributor is	s a child, law firm of parent(s) (if any)	1	
Date	Full name of contributor out-of-state PAC (ID;	#:)	Amount of Contribution (\$)
01/16/2024	Haschke, Gerald		\$50.00
	Contributor address; City; State; Zip Code		
	Buda, TX 78610		
Contributor's F	Principal Occupation	Contributor's Job Title	
retired		retired	
Contributor's e	employer/law firm	Law firm of contributor's s	pouse (if any)
retired			
If contributor is	s a child, law firm of parent(s) (if any)	•	
L Forme provided	by Texas Ethics Commission	ics state ty us	Version V3 5 1 9000c47

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 3/6 Rpt: 6/18
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Brandon, Sa	rah K.		00087867
4 Date	Date 5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$)
01/17/2024	01/17/2024 Ishibashi, Susie		\$52.40
	6 Contributor address; City; State; Zip Code		
	Kyle, TX 78640		
8 Contributor's I	I Principal Occupation	9 Contributor's Job Title	1
retired		retired	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
retired			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/17/2024	Mathis, Kate		\$30.00
	Contributor address; City; State; Zip Code		
	San Antonio, TX 78248		
Contributor's I retired	Principal Occupation	Contributor's Job Title	
	mplovor/low firm	retired	
retired	employer/law firm	Law firm of contributor's sp	Jouse (ii aily)
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/25/2024	Minnaar, Charles)	\$100.00
	Contributor address; City; State; Zip Code		
	Austin, TX 78737		
Contributor's I	Principal Occupation	Contributor's Job Title	
retired		retired	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
retired			
If contributor is	s a child, law firm of parent(s) (if any)		
L Forme provided	by Texas Ethics Commission	s state ty us	Version V3 5 1 9000c47

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 4/6 Rpt: 7/18
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Brandon, Sa	rah K.		00087867
4 Date 01/15/2024			7 Amount of Contribution (\$)\$260.73
	6 Contributor address; City; State; Zip Code		
	Austin, TX 78737		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)
Peele Nimoo	ks Toth		
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/17/2024	Patterson, David		\$250.00
	Contributor address; City; State; Zip Code		··
	Buda, TX 78610		
Contributor's F	Principal Occupation	Contributor's Job Title	
Business Ov	vner	Owner	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Buda Treeho	buse		
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/14/2024	Rothfus, Lisa	,	\$260.73
	Contributor address; City; State; Zip Code		
	Austin, TX 78746		
Contributor's F	I Principal Occupation	Contributor's Job Title	
Therapist		Therapist	
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)
self			
If contributor is	s a child, law firm of parent(s) (if any)		
Cormo providad	by Taxas Ethics Commission www.athic	e etato ty ue	$V_{ersion} V_{3} = 1.000 c 47$

	Sch: 5/6 Rpt: 8/18
2 FILER NAME Brandon, Sarah K.	3 Filer ID (Ethics Commission Filers) 00087867
4 Date 5 Full name of contributor out- 01/23/2024 Schaubhut, Lawrence	state PAC (ID#:) 7 Amount of Contribution (\$) \$521.15
6 Contributor address; City; State; Zip	ode
Austin, TX 78746	
8 Contributor's Principal Occupation Attorney	9 Contributor's Job Title Attorney
10 Contributor's employer/law firm	11 Law firm of contributor's spouse (if any)
Larry P. Schaubhut, Jr.	
12 If contributor is a child, law firm of parent(s) (if any)	
Date Full name of contributor out-	state PAC (ID#:) Amount of Contribution (\$)
01/17/2024 Shih, Henry (Dr.)	\$208.65
Contributor address; City; State; Zip Austin, TX 78748	ode
Contributor's Principal Occupation	Contributor's Job Title
Doctor	Doctor
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
Seton Southwest Hospital	
If contributor is a child, law firm of parent(s) (if any)	
Date Full name of contributor out-	state PAC (ID#:) Amount of Contribution (\$)
01/21/2024 Smith, Nathan	\$52.40
Contributor address; City; State; Zip Austin, TX 78737	ode
Contributor's Principal Occupation	Contributor's Job Title
Real Estate Broker	Real Estate Broker
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
Austin Tenant Advisors	
If contributor is a child, law firm of parent(s) (if any)	
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The Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 6/6 Rpt: 9/18	
2 FILER NAME		3	Filer ID (Ethics Commission	Filers)	
Brandon, Sarah K.				00087867	
4 Date	Date 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	
01/17/2024	— — —				\$150.00
	6 Contributor address; City; State; Zip Code				
	Buda, TX 78610				
8 Contributor's	Principal Occupation	9 Contributor's Job Title			
retired		retired			
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	pous	se (if any)	
retired					
12 If contributor	is a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC (ID#:_)	Т	Amount of Contribution (\$)	
01/24/2024)			\$312.81
	Contributor address; City; State; Zip Code				
	Austin, TX 78737				
Contributor's	Principal Occupation	Contributor's Job Title			
Chiropracto		Chiropractor			
	employer/law firm	Law firm of contributor's spouse (if any)			
Self			poue		
If contributor	is a child, law firm of parent(s) (if any)				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/2 Rpt: 10/18				
2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
Brandon, Sa	arah K.	00087867				
	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$			
5 Date 01/03/2024	 Full name of contributor out-of-state PAC (ID#: Boykin, Leslie Contributor address; City; State; Zip Code)	 8 Amount of 9 In-kind contribution contribution (\$) description \$200.00 Food for Event. 			
	Austin, TX 78701	· · · · · · · · · · · · · · · · · · ·	Check if travel outside of Texas. Complete Schedule T.			
10 Principal occu	apation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)			
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)			
Attorney		Attorney				
	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)			
	of Leslie J. Boykin, P.C.					
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 01/17/2024	Full name of contributor out-of-state PAC (ID#: Cummings, Therese Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$50.00 Food for event			
	Buda, TX 78610		Check if travel outside of Texas. Complete Schedule T.			
Principal occu	ipation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-JUDICIAL) (See instructions)				
Contributor's Retired	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions) retired				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)				
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 01/03/2024	Full name of contributor out-of-state PAC (ID#: Erwin, Amanda Contributor address; City; State; Zip Code Wimberly, TX 78676)	Amount of In-kind contribution contribution (\$) description \$20.00 I Food for Event			
Principal occu	pation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-JUDICIAL) (See instructions)				
Contributor's Attorney	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions) Attorney				
	employer/law firm (FOR JUDICIAL) aw Firm, LLP	Law firm of contributor's spouse (if any) (FOR JUDICIAL) The Erwin Law Firm, LLP				
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 2/2 Rpt: 11/18				
2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
Brandon, Sa	arah K.	00087867				
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$			
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution			
01/17/2024	Haschke, Donna		contribution (\$) description \$50.00 Food for event			
	7 Contributor address; City; State; Zip Code					
	Buda, TX 78610		Check if travel outside of Texas. Complete Schedule T.			
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)			
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)			
retired		retired				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)			
retired						
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	I				
Date	Full name of contributor 🔲 out-of-state PAC (ID#:)	Amount of In-kind contribution			
01/17/2024	Thomas, Kathi		contribution (\$) description			
	Contributor address; City; State; Zip Code		\$50.001			
	Austin, TX 78737		Check if travel outside of Texas. Complete Schedule T.			
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-JUDICIAL) (See instructions)				
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)			
semi-retired	event designer and planner,	semi-retired event designer and planner,				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)				
Kathi Thom	as Design					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS
EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		l Committee Legal Services	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1: Sch: 1/3 Rpt: 12/18	2 FILER NAME Brandon, Sarah K.			3	Filer ID 00087867	(Ethics Commission Filers)	
4	Date 01/22/2024	5 Payee name Buda Treehouse						
6	Amount (\$) \$1,519.25	 7 Payee address; City; State 16220 Remuda Trl Buda, TX 78610 	e; Zip Code					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so Advertising Expense	chedule) (b)		, тх	, officeholder living	nplete Schedule T. g expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Office sought			Office he	eld	
	Date	Payee name						
	01/23/2024	Campaign Verify						
	Amount (\$)	Payee address; City; State	e; Zip Code					
	\$95.00	1215 31st Street NW Washington, DC 20007-9998						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so Office Overhead/Rental Expense	Chedule) (b)		, тх	, officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Office sought			Office he	eld	
	Date	Payee name						
	01/03/2024	Heiser, Glenn						
	Amount (\$) \$5,000.00	Payee address; City; State 562 Scheel	e; Zip Code					
		Kyle, TX 78640	i					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so Salaries/Wages/Contract Labor	chedule) (b)		, тх	, officeholder living	nplete Schedule T. g expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Office sought			Office he	eld	

	POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1						
		EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Glft/Awards/Memorials Expense Printing Expense Travel Out of District					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 2/3 Rpt: 13/18	Brandon, Sarah K. 00087867					
4	Date 01/14/2024	5 Payee name Home Depot					
6	Amount (\$) \$16.14	7 Payee address; City; State; Zip Code 260 E Highway 290					
L		Dripping Springs, TX 78620					
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Grommets for signs 					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Γ	Date	Payee name					
	01/01/2024	NGP VAN					
	Amount (\$) \$106.60	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washinton, DC 20005					
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Management Software/Service 					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
F	Date	Payee name					
	01/24/2024	Texas Mailhouse					
	Amount (\$) \$2,598.50	Payee address; City; State; Zip Code 8606 Wall St. Ste 1740 Austin, TX 78754					
	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 Bulk Mailout 					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
1							

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Food/Beverage Expense Pollin y - Gift/Awards/Memorials Expense Printi	Repayment/Reimbursement Solicitation/Fundraising Expense e Overhead/Rental Expense Transportation Equipment & Related Expense ng Expense Travel in District rigeSWages/Contract Labor OTHER (enter a category not listed above)				
1 Total pagas Cabadula E1;	· · · · · ·	3 Filer ID (Ethics Commission Filers)				
1 Total pages Schedule F1: Sch: 3/3 Rpt: 14/18	Brandon, Sarah K.	00087867				
4 Date 01/24/2024	5 Payee name Zoom					
6 Amount (\$) \$17.04	 Payee address; City; State; Zip 55 Almaden Blvd Suite 600 San Jose, CA 95113 	Code				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Videoconference Software/Service				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office	sought Office held				

	EXPENDITURE CATEGORIES FOR BOX 10(a)								
Advertising Expense Event Expense Loa Accounting/Banking Fees Offi				Loan Repayment/Reimbursement Office Overhead/Rental Expense	Solicitation/Fundraising Transportation Equipme		Evnense		
	Consulting Expense	Food/Beve	erage Expense	Polling Expense	Travel in District	ini a rielaleu i	Lypense		
	Contributions/ Donations Made By - Gift/Awards/Memorials Expense Pri Candidate/Officeholder/Political Committee Legal Services Sa			Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a categor	ry not listed al	oove)		
	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)		
	Sch: 1/3 Rpt: 15/18	Brandon, Sarah K.			00087867				
4	CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZE					
	ISSUER	C	Citi	EXPENDITURES	<u>,</u>				
				CHARGED TO A CRED CARD	^{// 1}				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid				
		\$90.92	01/06/2024						
		\$90.9Z	01/00/2024						
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
				410 Terry Avenue North		etato,	Lip oodo		
		Amazon.com		410 reny / wende rion	•				
				Seattle, WA 98111					
8	PURPOSE OF	(a) Category		(b) Description					
ľ	EXPENDITURE	(See Categories listed at the top		H-Posts for Signs					
	X Political	Office Overhead/Ren	tal Expense	Ů					
	Non-Political		of Tawar O analytic O should		TV official claim lines and				
		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	TX, officeholder living exp Office held	bense			
	Complete <u>ONLY</u> if direct spenditure to benefit C/OH	Candidate/Onicendider	name O	nice sought	Office field				
- C/		(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uor Daid				
				(c) Date(s) Credit Card Issi					
		\$633.26	01/19/2024						
	PAYEE				City	Ctata	Zin Codo		
	PATEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
		Moonlight Graphix		603 W Goforth Rd					
				Rudo, TV 79610					
	PURPOSE OF	(a) Category		Buda, TX 78610 (b) Description					
	EXPENDITURE	(See Categories listed at the top of this schedule)		Banners					
	X Political	Advertising Expense							
	Non-Political								
		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, T.	TX, officeholder living exp Office held	oense			
	Complete <u>ONLY</u> if direct spenditure to benefit C/OH	Candidate/Onicendider	name O	nice sought	Office field				
		(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid				
		\$16.14	01/14/2024						
<u> </u>	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
		(a) Fayee hame		., .	City,	State,	Zip Coue		
		The Home Depot		260 E Highway 290					
				Dripping Springs, TX 78	Dripping Springs TV 79620				
⊢	PURPOSE OF	(a) Category		(b) Description	J020				
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Grommets for Signs					
	X Political	Office Overhead/Ren	tal Expense						
⊢	Non-Political		of Texas. Complete Schedule		TX, officeholder living exp Office held	bense			
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								

	EXPENDITURE CATEGORIES FOR BOX 10(a)								
Accounting/Banking Fees Off			Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense	ffice Overhead/Rental Expense Transportation Equipment & Related Expense					
	Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	s/Memorials Expense	Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a catego	ry not listed al	oove)		
		The Inst	ruction Guide explains h	ow to complete this form.					
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	ics Commiss	sion Filers)		
	Sch: 2/3 Rpt: 16/18	Brandon, Sarah K.			00087867				
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZE					
	ISSUER	see p	revious	EXPENDITURES CHARGED TO A CREI	\$				
				CARD					
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid				
		\$95.00	01/23/2024						
7	PAYEE	(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code		
				1215 31st Street NW					
		Campaign Verify							
				Washington, DC 20007	7-9998				
8	PURPOSE OF	(a) Category		(b) Description					
	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Campaign Software/Se	ervice				
	X Political								
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	T. Check if Austin,	TX, officeholder living ex	pense			
9	Complete ONLY if direct	Candidate/Officeholder	name Of	fice sought	Office held				
e	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid				
		\$1,519.25	01/22/2024						
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
		Buda Treehouse		16220 Remuda Trl					
⊢		(a) Catagony		Buda, TX 78610 (b) Description					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		Videography					
	X Political	Advertising Expense		Videography					
	Non-Political		of Tourse Operations Opherature		TV official class lines and				
⊢	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	fice sought	TX, officeholder living ex Office held	pense			
e	xpenditure to benefit C/OH	Canalate, Chiecholder	iname of	nee sought	Office field				
F	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid				
		\$106.60	01/01/2024						
		\$100.00	01/01/2024						
-	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
				655 15th St NW		,			
		NGP VAN		Ste 650					
				Washinton, DC 20005					
	PURPOSE OF	(a) Category		(b) Description					
	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Campaign Managemer	nt Software/Servi	ce			
	X Political								
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense									
	Complete ONLY if direct	Candidate/Officeholder	name Of	fice sought	Office held				
e	expenditure to benefit C/OH								
-									

EXPENDITURE CATEGORIES FOR BOX 10(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	rage Expense s/Memorials Expense	Office Overhead/Rental Expense T Polling Expense T Printing Expense T	iolicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District THER (enter a category not listed above)			
The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4: 2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
	Sch: 3/3 Rpt: 17/18	Brandon, Sarah K.			00087867			
4	CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
		\$17.04	01/08/2024					
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
		_		55 Almaden Blvd				
		Zoom		Suite 600				
				San Jose, CA 95113				
8 PURPOSE OF		(a) Category		(b) Description				
		(See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Videoconferencing softw	Videoconferencing software/service			
	X Political							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, TX	a, officeholder living expense			
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held								
e	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
		\$2,598.50	01/24/2024					
	PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
				8606 Wall St.	8606 Wall St.			
		Texas Mailhouse		Ste 1740				
				Austin, TX 78754				
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule)			(b) Description			
		Advertising Expense		Bulk Mailing Service				
	X Political							
	Non-Political		of Texas. Complete Schedule		a, officeholder living expense			
	Complete ONLY if direct	Candidate/Officeholder	name O	ice sought Office held				
e.	expenditure to benefit C/OH							

OUTSTAN	IDING LOANS		SCHEDULE L
The Instruction	on Guide explains how to complete this form.	1	Total pages Schedule L: Sch: 1/1 Rpt: 18/18
2 FILER NAME Brandon, Sarah K.			Filer ID (Ethics Commission Filers) 00087867
LENDER INFORMATION	4 Name of lender Brandon, Sarah		
	5 Lender address; City; State; Zip Code		
	Austin, TX 78737		
GUARANTOR INFORMATION	6 Name of guarantor		
X not applicable	7 Guarantor address; City; State; Zip Code		
LENDER INFORMATION	Name of lender Brandon, Sarah		
	Lender address; City; State; Zip Code		
	Austin, TX 78737		
GUARANTOR INFORMATION	Name of guarantor		
X not applicable	Guarantor address; City; State; Zip Code		