

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00083809	2 Total pages filed: 26	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Matthew R.	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 02/05/2024
	NICKNAME	LAST Morgan	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 503 FM 359 #264 Suite 130 #226 Richmond, TX 77406			Date Hand-delivered or Date Postmarked
				Receipt # Amount
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Dave	MI	
	NICKNAME	LAST Vrshek	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 503 FM 359 #264 Richmond, TX 77406			
7 CAMPAIGN TREASURER PHONE	AREA CODE (832)	PHONE NUMBER 520-9042	EXTENSION	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 01/01/2024	THROUGH	Month Day Year 01/25/2024	
10 ELECTION	ELECTION DATE Month Day Year 03/05/2024		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) State Representative District 26	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Morgan, Matthew R. (Mr.) **14** Filer ID (Ethics Commission Filers)
00083809

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	71,288.36
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	73,937.58
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	92,956.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	145,564.56

17 AFFIDAVIT

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

Mr. Matthew R. Morgan

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering Printed name of officer administering Title of officer administering oath

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

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18 FILER NAME Morgan, Matthew R. (Mr.)		19 Filer ID 00083809	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	71,288.36
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0.00
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$	0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	73,820.32
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	0.00
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	0.00
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	117.26
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/12 Rpt: 4/26
2 FILER NAME Morgan, Matthew R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbara, Allen <hr/> 6 Contributor address; City; State; Zip Code Robstown, TX 78380	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billye, McCracken <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78028	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Bevis <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 01/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bob, McNutt <hr/> Contributor address; City; State; Zip Code Corsicana, TX 75151	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Collin Street Bakery
Date 01/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catherine, Liu <hr/> Contributor address; City; State; Zip Code Dallas, TX 75254	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/12 Rpt: 5/26
2 FILER NAME Morgan, Matthew R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles, Edwards <hr/> 6 Contributor address; City; State; Zip Code Lakeway, TX 78734	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cindy, Adkins <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cindy, Ding <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danny, Huckabee <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darby, Usey <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Alfa Laval

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/12 Rpt: 6/26
2 FILER NAME Morgan, Matthew R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darrell, Bradley <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77494	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Garriott <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debbie, Boyer <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donna, Mann <hr/> Contributor address; City; State; Zip Code Houston, TX 77345	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Webster <hr/> Contributor address; City; State; Zip Code Vero Beach, FL 32963	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/12 Rpt: 7/26
2 FILER NAME Morgan, Matthew R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernest, McCune <hr/> 6 Contributor address; City; State; Zip Code Richmond, TX 77406	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franklin, Bunch <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Walters <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 01/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Woodley <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glenn, O'Bannon <hr/> Contributor address; City; State; Zip Code Glendale, AZ 85302	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/12 Rpt: 8/26
2 FILER NAME Morgan, Matthew R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy, Larose	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Richmond, TX 77469	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J.W, Matthews	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78245	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Hancock	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Stafford, TX 77477	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Zervos	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Carmel, IN 46032	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamie, Schlickbernd	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Katy, TX 77450	
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/12 Rpt: 9/26
2 FILER NAME Morgan, Matthew R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janet, Roberts <hr/> 6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) Retired
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Yeary <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Legal Discovery		Employer (See Instructions) BP
Date 01/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jon, Valdetero <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Tallers Tavern
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judith, Bumpass <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katie, Neely <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/12 Rpt: 10/26
2 FILER NAME Morgan, Matthew R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kent, Biringer <hr/> 6 Contributor address; City; State; Zip Code Richmond, TX 77469	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kyle, Stallings <hr/> Contributor address; City; State; Zip Code Midland, TX 79702	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leyla, Holton <hr/> Contributor address; City; State; Zip Code Houston, TX 77084	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda, Morgan <hr/> Contributor address; City; State; Zip Code Schulenburg, TX 78956	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marie, Nugent <hr/> Contributor address; City; State; Zip Code Houston, TX 77084	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/12 Rpt: 11/26
2 FILER NAME Morgan, Matthew R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) May, Yang <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77494	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Accounting		9 Employer (See Instructions) Self
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paula, Ryan <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Retired
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Philip, Scardino <hr/> Contributor address; City; State; Zip Code Rockport, TX 78382	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phyllis, Timko <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ralph, Fite <hr/> Contributor address; City; State; Zip Code Houston, TX 77042	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/12 Rpt: 12/26
2 FILER NAME Morgan, Matthew R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rebecca, Robeson <hr/> 6 Contributor address; City; State; Zip Code Vienna, VA 22182	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rex, Wedgeworth <hr/> Contributor address; City; State; Zip Code Park Row, TX 77450	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, Patterson <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Retired
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert, Chandler <hr/> Contributor address; City; State; Zip Code Spring, TX 77381	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert, Kitto <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Public Adjuster		Employer (See Instructions) The Kitto Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/12 Rpt: 13/26
2 FILER NAME Morgan, Matthew R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert, Walters <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77494	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger, Elswick <hr/> Contributor address; City; State; Zip Code Houston, TX 77068	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Community Honda Lafayette
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roselyn, Drew <hr/> Contributor address; City; State; Zip Code Killeen, TX 76541	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roy, Thornton <hr/> Contributor address; City; State; Zip Code Midwest City, OK 73110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Retired
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruby, Davis <hr/> Contributor address; City; State; Zip Code La Porte, TX 77571	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/12 Rpt: 14/26
2 FILER NAME Morgan, Matthew R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah, Martinez <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76179	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susan, Beaver <hr/> Contributor address; City; State; Zip Code Sulphur Springs, TX 75482	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Retired
Date 01/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans United for a Conservative Majority <hr/> Contributor address; City; State; Zip Code Victoria, TX 77901	Amount of Contribution (\$) \$50,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Blackwell <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Venom
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Miller <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/12 Rpt: 15/26
2 FILER NAME Morgan, Matthew R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Xuemei, Yang	7 Amount of Contribution (\$) \$600.00
	6 Contributor address; City; State; Zip Code Katy, TX 77494	
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) Self
Date 01/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) jinguo, zhang	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Katy, TX 77494	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 16/26

2 FILER NAME
Morgan, Matthew R. (Mr.)

3 Filer ID (Ethics Commission Filers)
00083809

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor out-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)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 17/26
2 FILER NAME Morgan, Matthew R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00083809
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/8 Rpt: 18/26	2 FILER NAME Morgan, Matthew R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/16/2024	5 Payee name 512 New Media	
6 Amount (\$) \$5,106.14	7 Payee address; City; State; Zip Code 6161 Savoy Dr Suite 1200A Houston, TX 77036	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/19/2024	Payee name 512 New Media	
Amount (\$) \$2,900.03	Payee address; City; State; Zip Code 6161 Savoy Dr Suite 1200A Houston, TX 77036	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/25/2024	Payee name Anedot	
Amount (\$) \$166.43	Payee address; City; State; Zip Code 1340 Poydras, Suite 1770 New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/8 Rpt: 19/26	2 FILER NAME Morgan, Matthew R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/09/2024	5 Payee name Axiom Strategies	
6 Amount (\$) \$13,063.00	7 Payee address; City; State; Zip Code 1702 Washington Ave Houston, TX 77007	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/25/2024	Payee name B1 Bank	
Amount (\$) \$5.00	Payee address; City; State; Zip Code 24701 Southwest Freeway Suite 700 Rosenberg, TX 77471	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/25/2024	Payee name B1 Bank	
Amount (\$) \$20.00	Payee address; City; State; Zip Code 24701 Southwest Freeway Suite 700 Rosenberg, TX 77471	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/8 Rpt: 20/26	2 FILER NAME Morgan, Matthew R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00083809
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4 Date 01/19/2024	5 Payee name B1 Bank
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6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code 24701 Southwest Freeway Suite 700 Rosenberg, TX 77471
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/18/2024	Payee name Bonfire Data, LLC
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Amount (\$) \$750.00	Payee address; City; State; Zip Code 1900 East 15th Street, Ste 600A Edmond, OK 73013
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/12/2024	Payee name Bonfire Data, LLC
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Amount (\$) \$800.00	Payee address; City; State; Zip Code 1900 East 15th Street, Ste 600A Edmond, OK 73013
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/8 Rpt: 21/26	2 FILER NAME Morgan, Matthew R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/10/2024	5 Payee name Bonfire Data, LLC	
6 Amount (\$) \$800.00	7 Payee address; City; State; Zip Code 1900 East 15th Street, Ste 600A Edmond, OK 73013	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/10/2024	Payee name Bonfire Data, LLC	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1900 East 15th Street, Ste 600A Edmond, OK 73013	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Set up
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/08/2024	Payee name Bonfire Data, LLC	
Amount (\$) \$370.00	Payee address; City; State; Zip Code 1900 East 15th Street, Ste 600A Edmond, OK 73013	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Set up
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/8 Rpt: 22/26	2 FILER NAME Morgan, Matthew R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00083809
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4 Date 01/24/2024	5 Payee name Bonfire
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6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 1900 East 15th Street, Ste 600A Edmond, OK 73013
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/25/2024	Payee name Catamaran Consulting
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Amount (\$) \$7,000.00	Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailer
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/25/2024	Payee name Catamaran Consulting
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Amount (\$) \$2,735.00	Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/8 Rpt: 23/26	2 FILER NAME Morgan, Matthew R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/24/2024	5 Payee name Catamaran Consulting	
6 Amount (\$) \$8,000.00	7 Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/22/2024	Payee name Catamaran Consulting	
Amount (\$) \$8,000.00	Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/22/2024	Payee name Catamaran Consulting	
Amount (\$) \$5,063.00	Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/8 Rpt: 24/26	2 FILER NAME Morgan, Matthew R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00083809
4 Date 01/17/2024	5 Payee name Catamaran Consulting	
6 Amount (\$) \$8,224.00	7 Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/22/2024	Payee name Houston Sign Company	
Amount (\$) \$266.65	Payee address; City; State; Zip Code 5801 Chimney Rock Rd Houston, TX 77081	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/25/2024	Payee name Mittera	
Amount (\$) \$9,118.70	Payee address; City; State; Zip Code 7021 Portwest Drive Suite 190 Houston, TX 77024	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/8 Rpt: 25/26	2 FILER NAME Morgan, Matthew R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00083809
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4 Date 01/17/2024	5 Payee name Mittera
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6 Amount (\$) \$482.00	7 Payee address; City; State; Zip Code 7021 Portwest Drive Suite 190 Houston, TX 77024
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/12/2024	Payee name Republican Women's Club of Katy
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Amount (\$) \$90.00	Payee address; City; State; Zip Code 9550 Spring Green Blvd., Ste 408-122 Katy, TX 77494
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/25/2024	Payee name Wix.com
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Amount (\$) \$40.37	Payee address; City; State; Zip Code 500 Terry A Francois Boulevard Sixth Floor San Francisco, CA 94158
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 26/26	2 FILER NAME Morgan, Matthew R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00083809	
4 Date 01/19/2024	5 Payee name Mailchimp		
6 Amount (\$) \$117.26 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held