CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

| Tł | ne C/OH Instruction | Guide explains how to com | plete this form. | 1 Filer ID (Ethics Comm 00085171 | | 2 Total pages | s filed: 21 |
|----|-------------------------|---------------------------|------------------|--|--------------------|--------------------|--|
| 3 | CANDIDATE / | MS / MRS / MR | FIRST | | MI | | E USE ONLY |
| | OFFICEHOLDER | The Honorable | David L. | | | OFFICE | |
| | NAME | The Honorable | David L. | | | Date Received | |
| | | | | | | ELECTRONI | CALLY FILED |
| | | NICKNAME | LAST | | SUFFIX | . 02/05/2024 | |
| | | NICKNAME | | | SUFFIX | 02/00/2024 | |
| | | | Spiller | | | | |
| 4 | CANDIDATE / | ADDRESS / PO BOX; AF | T / SUITE #; CI | ΓΥ; | ZIP CODE | Date Hand-delivere | d or Date Postmarked |
| | OFFICEHOLDER | P.O. Box 447 | | | | | |
| | MAILING | F.O. B0x 447 | | | | Receipt # | Amount |
| | ADDRESS | | | | | | |
| | Change of Address | Jacksboro, TX 76458 | | | | Data Drawand | |
| | | | | | | Date Processed | |
| | | | | | | | |
| | | | | | | Date Imaged | |
| | | | | | | | |
| 5 | CAMPAIGN | MS / MRS / MR | FIRST | | MI | | |
| | TREASURER | Mr. | Mason G. | | | | |
| | NAME | | | | | | |
| | | | | | | | |
| | | NICKNAME | LAST | | SUFFIX | | |
| | | | Spiller | | | | |
| | | | | | | | |
| 6 | CAMPAIGN | STREET ADDRESS (NO P | | ΔΡ | T / SUITE #; CITY; | | STATE; ZIP CODE |
| ľ | TREASURER | | o box i lease), | | 1730HL#, CHT, | | JIAIE, ZII CODE |
| | ADDRESS | 112 E. Belknap Street | | | | | |
| | (Residence or Business) | | | | | | |
| | (Residence of Edsiness) | Jacksboro, TX 76458 | | | | | |
| | | | | | | | |
| | | | | | | | |
| 7 | CAMPAIGN | AREA CODE PHO | NE NUMBER | EXTENSION | | | |
| | TREASURER | (940) 229-9909 | | | | | |
| | PHONE | (340) 223-3303 | | | | | |
| | | | | | | | |
| 8 | REPORT TYPE | | | | D | 1 | |
| | | January 15 | X 30th day befor | e election | Runoff | | campaign treasurer officeholder only) |
| | | July 15 | 8th day before | | Exceeded modified | - | Attach C/OH-FR) |
| | | | | | reporting limit | | |
| | | | | | | | |
| 9 | PERIOD COVERED | Month Day Year | | | Month Day | Year | |
| | COVERED | 01/01/2024 | TI | HROUGH | 01/25/202 | 4 | |
| | | | | | | | |
| 10 | ELECTION | ELECTION DATE | | | ELECTION TYPE | | |
| | | Month Day Year | | Primary | Runoff | Other | |
| | | 03/05/2024 | | | | | |
| | | | | General | Special | | |
| | | | | | | | |
| 11 | OFFICE | OFFICE HELD (if any) | 1 | | 12 OFFICE SOUGHT | (if known) | |
| I | 001 | State Representative Dis | strict 68 | | State Representa | | R |
| | | State Representative Di | | | State Representa | | 5 |
| 1 | | | | | | | |
| Γ | | • | | | - | | |
| 1 | | | | | | | |
| 1 | | | | | | | |
| 1 | | | GO | TO PAGE 2 | | | |
| Fo | rms provided by Te | exas Ethics Commission | www.e | thics.state.tx.u | S | Ve | rsion V3.5.1.9000c471 |
| - | | | | | | | |

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 21

| 13 C / OH NAME | Spiller, David L. (The | Honorable) | 14 Filer ID 00085171 | (Ethics Cor | mmission Filers) |
|--|----------------------------------|---|--------------------------|--------------|------------------|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) | candidate / officeholder. | political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this informatio | the candidate's or offic | eholder's ki | nowledge or |
| Additional Pages | COMMITTEE TYPE | COMMITTEE NAME | | | |
| | X GENERAL | Texas Alliance for Life PAC | | | |
| | | COMMITTEE ADDRESS | | | |
| | SPECIFIC | 8000 Centre Park Dr Ste 380 | | | |
| | | Austin, TX 78754 | | | |
| | | COMMITTEE CAMPAIGN TREASURER NAME | | | |
| | | Shaw, James | | | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRE | SS | | |
| | | 4505 Corazon Cv | | | |
| | | TX 78681 | | | |
| 16 CONTRIBUTION TOTALS | | IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE | | \$ | 0.00 |
| | | CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN | S) | \$ | 107,495.18 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEM | IZED POLITICAL EXPENDITURES | | \$ | 0.00 |
| | 4. TOTAL POLITIC | CAL EXPENDITURES | | \$ | 109,287.28 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITIC REPORTING PE | AL CONTRIBUTIONS MAINTAINED AS OF THE LERIOD | AST DAY OF THE | \$ | 169,924.89 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIE OF THE REPOF | PAL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD | S OF THE LAST DAY | \$ | 0.00 |
| 17 AFFIDAVIT | • | | | • | |
| | | I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code. | | | |
| | | The Hon | orable David L. Spill | er | |
| | | Signature o | f Candidate or Officeho | older | |
| AFFIX NO | TARY STAMP / SEAL AB | OVE | | | |
| Sworn to and subs | cribed before me, by the s | aid | , this the | | day |
| | | ertify which, witness my hand and seal of office. | | | |
| Signature of offic | cer administering | Printed name of officer administering | Title of office | ar administo | ring oath |
| Signature of Office | er aunminsterning | r mileu name or onicer auministering | | aunimiste | anny Uaul |
| Forms provided by Te | xas Ethics Commission | n www.ethics.state.tx.us | | Version V | /3.5.1.9000c47 |

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 21 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Spiller, David L. (The Honorable) 00085171 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 101,025.00 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 6,470.18 \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ З. 4. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 60,543.19 \$ X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 48,744.09 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/11 Rpt: 4/21 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Spiller, David L. (The Honorable) 00085171 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/03/2024 Allen Boone Humphries Robinson LLP \$1,000.00 6 Contributor address; City; State; Zip Code Houston, TX 77027 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/25/2024 \$1,000.00 Beef PAC Contributor address; City; State; Zip Code Amarillo, TX 79106 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 01/22/2024 Bennett, Linda \$100.00 Contributor address; City; State; Zip Code Jacksboro, TX 76458 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/18/2024 \$5,000.00 Blake, Gary Contributor address; City; State; Zip Code Fort Worth, TX 76109 Principal occupation / Job title (See Instructions) Employer (See Instructions) Founder Creative Solutions in Healthcare Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 01/22/2024 \$200.00 Bouldin, Brad Contributor address; City; State; Zip Code Jacksboro, TX 76458 Principal occupation / Job title (See Instructions) Employer (See Instructions)

| | The Instru | ction Guide explains how to comple | ete this fo | rm. | 1 | Total pages Schedule A1: Sch: 2/11 Rpt: 5/21 | |
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| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commissio | on Filers) |
| - | | d L. (The Honorable) | | | - | 00085171 | , |
| 4 | Date | 5 Full name of contributor out-of-state | te PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 01/22/2024 | Briggs , Jamie | | | | | \$200.00 |
| | I | 6 Contributor address; City; State; Zip Code | 9 | | | | |
| | | 1 | | | | | |
| | | Lampasas, TX 76550 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | ć | 9 Employer (See Instructions |) | | |
| | | | | | | | |
| | Date | Full name of contributor out-of-state | e PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 01/15/2024 | Buenger, Greg | | | | | \$1,000.00 |
| | I | Contributor address; City; State; Zip Code | | | | | |
| | | 1 | | | | | |
| | | 1 | | | | | |
| | | Newcastle, TX 76372 | | | _ | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Retired | | | Retired | | | |
| | Date | Full name of contributor out-of-state | te PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 01/16/2024 | Burkett, Zack | · - | | | - | \$2,500.00 |
| | I | Contributor address; City; State; Zip Code | ċ | | | | |
| | | | | | | | |
| | | 1 | | | | | |
| | | Graham, TX 76450 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Executive | | | Zack Burkett Co. | | | |
| ╞ | Date | Full name of contributor | te PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 01/08/2024 | Campsey, Brad | | / | | , | \$2,500.00 |
| | 02,02.2 | | | | | | += ,==. |
| | | Contributor address, ony, State, Zip Code | i | | | | |
| | | 1 | | | | | |
| | | Jacksboro, TX 76458 | | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Treasurer | , | | Jack County | , | | |
| ⊨ | Date | Full name of contributor | | · · · · · · | | Amount of Contribution (\$) | |
| | 01/12/2024 | Carnley, Tom | te PAC (ID#: |) | | | \$25.00 |
| | 01/12/2024 | | | | | | Ψ20.00 |
| | | Contributor address; City; State; Zip Code | ; | | | | |
| | | 1 | | | | | |
| | | Lampasas, TX 76550 | | | | | |
| | Dringingl oog | | r | Employer (See Instructions | <u> </u> | | |
| | Рппсра оссо | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 3/11 Rpt: 6/21 | |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commissio | on Filers) |
| | | I L. (The Honorable) | | | 00085171 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 01/15/2024 | Coker, Michael | | | | \$1,000.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Jacksboro, TX 76458 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Owner | | Coker Funeral Home | | | |
| F | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 01/11/2024 | Craft, Jerry | | | | \$2,500.00 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | | | | | | |
| | | Jacksboro, TX 76458 | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u>ا</u> | | |
| | Oil & Gas | | Self | , | | |
| ╞ | | | | <u> </u> | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | #0 F00 00 |
| | 01/08/2024 | Crow, Harlan | | | | \$2,500.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Dallas, TX 75219 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Chairman | | Crow Holdings | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 01/18/2024 | Dudley Bros., Ltd | | | | \$1,000.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | | |
| | | Comanche, TX 76442 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | ;) | | |
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| ⊨ | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 01/23/2024 | Elenburg, Brad | | | | \$200.00 |
| | | Contributor address; City; State; Zip Code | | | | +_00.00 |
| | | Contributor address, City, State, Zip Code | | | | |
| | | | | | | |
| | | Bridgeport, TX 76426 | | | | |
| ⊢ | Principal occu | bation / Job title (See Instructions) | Employer (See Instructions | <u> </u> ເ) | | |
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| | The Instru | ction Guide explains how | to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 4/11 Rpt: 7/21 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commissio | on Filers) |
| | | d L. (The Honorable) | | | | 00085171 | |
| 4 | Date | 5 Full name of contributor | out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| | 01/19/2024 | Fenoglio, Robert | | | | | \$500.00 |
| | | 6 Contributor address; City; Sta | ate; Zip Code | | 1 | | |
| | | | | | | | |
| | | Nocona, TX 76255 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) |) | 9 Employer (See Instructions | ;) | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ | | Γ | Amount of Contribution (\$) | |
| | 01/25/2024 | Fenter, Craig | | / | | | \$100.00 |
| | 0112012027 | | | | - | | Ψ100.00 |
| | | Contributor address; City; Sta | ate; Zip Code | | | | |
| | | | | | | | |
| | | Jacksboro, TX 76458 | | | | | |
| | Principal occu | pation / Job title (See Instructions) |) | Employer (See Instructions | 5) | | |
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| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 01/18/2024 | Fleet, Timothy | _ | | | | \$2,500.00 |
| | | Contributor address; City; Sta | ate; Zip Code | | 1 | | |
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| | | | | | | | |
| | | Fort Worth, TX 76116 | | | | | |
| | - | ipation / Job title (See Instructions) |) | Employer (See Instructions | ;) | | |
| | Homebuilder | | | Self | — | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 01/18/2024 | Gardner, Gary | | | | | \$2,500.00 |
| | | Contributor address; City; Sta | ate; Zip Code | | | | |
| | | | | | | | |
| | | Jacksboro, TX 76458 | | | | | |
| | Principal occu | I Ipation / Job title (See Instructions) |) | Employer (See Instructions | ـــــــــــــــــــــــــــــــــــــ | | |
| | Oil & Gas | | I | Best Petroleum | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 01/14/2024 | Gatliff, Brian | | | | | \$250.00 |
| | | Contributor address; City; Sta | ate; Zip Code | | | | |
| | | | | | | | |
| | | | | | | | |
| | | San Saba, TX 76877 | | 1 /o hastaatiaa | Ĺ | | |
| | Principal occu | pation / Job title (See Instructions) |) | Employer (See Instructions | ;) | | |
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| | The Instru | ction Guide explains how to | complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 5/11 Rpt: 8/21 | |
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| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commissi | on Filers) |
| - | | L. (The Honorable) | | | | 00085171 | |
| 4 | Date | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 01/10/2024 | Harrington, Ryan | | | | | \$2,500.00 |
| | | 6 Contributor address; City; State; | ; Zip Code | | | | |
| | | Fort Worth, TX 76109 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 | Employer (See Instructions | 5) | | |
| | Executive | | | Trinity Healthcare, LLC | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 01/05/2024 | Hayes, Richard | | | | , and an e contribution (+) | \$1,000.00 |
| | 01/00/2024 | - | | | | | φ <u>1</u> ,000.00 |
| | | Contributor address; City; State; | ; Zip Code | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Hickory Creek, TX 75065 | | | | | |
| | • | pation / Job title (See Instructions) | | Employer (See Instructions | | | |
| | Attorney | | | Hayes, Berry, White & V | /an | zant | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 01/25/2024 | Hess, Ronnie | | | | | \$500.00 |
| | | Contributor address; City; State; | Zip Code | | | | |
| | | | • | | | | |
| | | | | | | | |
| | | Fort Worth, TX 76114 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 01/25/2024 | Hospital Executive Consulting | |) | | | \$10,000.00 |
| | 01/20/2024 | | - | | | | φ10,000.00 |
| | | Contributor address; City; State; | ; Zip Code | | | | |
| | | | | | | | |
| | | Minoral Malla TX 76540 | | | | | |
| | | Mineral Wells, TX 76548 | | | Ļ | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | | | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 01/25/2024 | Jackson, Corey | | | | | \$200.00 |
| | | Contributor address; City; State; | ; Zip Code | | | | |
| | | | | | | | |
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| | | Jacksboro, TX 76458 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | I;) | | |
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MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/11 Rpt: 9/21 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Spiller, David L. (The Honorable) 00085171 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/15/2024 Jones, Ann \$250.00 6 Contributor address; City; State; Zip Code Brownwood, TX 76801 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/03/2024 Lloyd Gossenlink Rochelle & Townsend, P.C. \$500.00 Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) Date 01/03/2024 Longbow Consulting Partners, LLC \$500.00 Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/25/2024 \$300.00 MDR Developments LP Contributor address; City; State; Zip Code Jacksboro, TX 76458 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: \$1,000.00 01/18/2024 Maddox, Roxanna Contributor address; City; State; Zip Code Jacksboro, TX 76458 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Real Estate** Self

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|---|--------------------|---|------------------------------|----------------|--|------------|
| | The Instru | ction Guide explains how to complete this | s form. | 1 | Total pages Schedule A1: Sch: 7/11 Rpt: 10/21 | |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commissio | on Filers) |
| | | d L. (The Honorable) | | | 00085171 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID |)#:) | 7 | Amount of Contribution (\$) | |
| | 01/22/2024 | Manufacturers PAC of Texas | | | | \$2,000.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | D data data da ana | Austin, TX 78711 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | 3) | | |
| | Date | Full name of contributor out-of-state PAC (ID | D#:) | Γ | Amount of Contribution (\$) | |
| | 01/12/2024 | McGaughey, Jack | | | | \$1,000.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | Dringing ago | Nocona, TX 76255 | | | | |
| | Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | 3) | | |
| ⊨ | | | | — | A contribution (\$) | |
| | Date 01/18/2024 | Full name of contributor out-of-state PAC (ID Miller, Don |)#:) | | Amount of Contribution (\$) | \$5,000.00 |
| | 01/10/2024 | | | | | Φ0,000.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Dallas, TX 75219 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Healthcare/F | Real Estate | Self | | | |
| | Date | Full name of contributor out-of-state PAC (ID | D#:) | Γ | Amount of Contribution (\$) | |
| | 01/19/2024 | Peavy, Dee | | | | \$1,000.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Graham, TX 76450 | | | | |
| - | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u>ا</u> د) | | |
| | | | | <i>.</i> , | | |
| | Date | Full name of contributor out-of-state PAC (ID | D#:) | Γ | Amount of Contribution (\$) | |
| | 01/18/2024 | Pitcock, Roy | | | | \$1,000.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Graham, TX 76450 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | ر) ا | | |
| | Oil & Gas | | Self | 5) | | |
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| т | he Instru | ction Guide explains how | v to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 8/11 Rpt: 11/21 | |
|------------|------------------|--|-------------------------|-------------------------------------|----------|--|------------|
| 2 FI | ILER NAME | | | | 3 | Filer ID (Ethics Commissio | on Filers) |
| | | d L. (The Honorable) | | | | 00085171 | |
| 4 D | ate | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| 0 | 1/23/2024 | Poynor, Max | _ | | | | \$5,000.00 |
| | | 6 Contributor address; City; St | tate; Zip Code | | | | |
| | | | | | | | |
| | | | | | | | |
| 0 D | ringingloggy | Jacksboro, TX 76458 | | C Employer (Cas Instruction | | | |
| | il & Gas | pation / Job title (See Instructions | 3) | 9 Employer (See Instruction Self | s) | | |
| D | ate | Full name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| 0 | 1/25/2024 | Rater, David | | | | | \$100.00 |
| | | Contributor address; City; Si | | | | | |
| | | | | | | | |
| | | Honriotta TV 76265 | | | | | |
| P | rincinal occu | Henrietta, TX 76365 Ipation / Job title (See Instructions | <u></u> | Employer (See Instruction | <u>_</u> | | |
| E I | nicipai occu | | <i>›)</i> | | 3) | | |
| D | ate | Full name of contributor | out-of-state PAC (ID#: |) | Т | Amount of Contribution (\$) | |
| | 1/15/2024 | Riggs, Bobby | | | | , | \$100.00 |
| | | | tate; Zip Code | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Jacksboro, TX 76458 | | | | | |
| Pi | rincipal occu | pation / Job title (See Instructions | 3) | Employer (See Instruction | s) | | |
| | | | | <u> </u> | | | |
| | ate 1/24/2024 | Full name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | \$250.00 |
| 0. | 1/24/2024 | | tata: Zin Cada | | | | φ250.00 |
| | | Contributor address; City; Si | lale, ZIP Code | | | | |
| | | | | | | | |
| | | Jacksboro, TX 76458 | | | | | |
| P | rincipal occu | pation / Job title (See Instructions | s) | Employer (See Instruction | s) | | |
| | | | | | | | |
| D | ate | Full name of contributor | out-of-state PAC (ID#:_ |) | T | Amount of Contribution (\$) | |
| 0 | 1/19/2024 | Rumage, Ed | | | | | \$1,000.00 |
| | | Contributor address; City; Si | tate; Zip Code | | Ϊ | | |
| | | | | | | | |
| | | Jacksboro, TX 76458 | | | | | |
| P | rincinal occu | pation / Job title (See Instructions | | Employer (See Instruction | <u> </u> | | |
| | incipal occu | | " | | 3) | | |
| | | | | <u> </u> | | | |
| | | | | | | | |
| | | | | | | | |

| | The Instru | ction Guide explains how to complete this | form. | 1 Total pages Schedule A1: Sch: 9/11 Rpt: 12/21 |
|---|----------------|---|------------------------------|--|
| 2 | FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| ľ | | I L. (The Honorable) | | 00085171 |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| | 01/15/2024 | Salmon, Martha | | \$1,000.00 |
| | | 6 Contributor address; City; State; Zip Code | | |
| | | | | |
| | | | | |
| L | | Jacksboro, TX 76458 | | |
| 8 | | pation / Job title (See Instructions) | 9 Employer (See Instructions | |
| | Retired | | Retired | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 01/25/2024 | Sewell, Ron | | \$5,000.00 |
| | | | | |
| | | | | |
| | | | | |
| | | Odessa, TX 79762 | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u></u> |
| | Executive | | |) |
| L | Executive | | Sewell Dealerships | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 01/24/2024 | Sisson, Brandon | | \$1,000.00 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | | | |
| | | Carrollton, TX 75006 | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | ;) |
| | CEO | | Accufire Technology | |
| ⊨ | Date | Full name of contributor Out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 01/25/2024 | Tarpley, Brenda | / | \$200.00 |
| | 01/23/2024 | | | \$200.00 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | | | |
| ∟ | | Jacksboro, TX 76458 | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | |
| L | | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 01/12/2024 | Texans for Lawsuit Reform PAC | | \$25,000.00 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | | | |
| | | Austin, TX 78701 | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | l;) |
| | | | | , |
| ⊢ | | | | |
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MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 10/11 Rpt: 13/21 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Spiller, David L. (The Honorable) 00085171 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/19/2024 Texas Automobile Dealers Assn. PAC \$2,500.00 6 Contributor address; City; State; Zip Code Austin, TX 78701 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/25/2024 \$1,000.00 **Texas House Republican Caucus PAC** Contributor address; City; State; Zip Code Austin, TX 78711 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 01/25/2024 **Texas REALTORS PAC** \$2,500.00 Contributor address; City; State; Zip Code Austin, TX 78768 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/19/2024 The American Electric Power - Texas - Committee for Responsible \$1,500.00 Contributor address; City; State; Zip Code Columbus, OH 43215 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 01/21/2024 \$200.00 Thompson, Shellie Contributor address; City; State; Zip Code Jacksboro, TX 76458 Principal occupation / Job title (See Instructions) Employer (See Instructions)

| MONETARY POLITICAL CONTRIBUTIONS | SCHEDULE A1 |
|--|--|
| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1: Sch: 11/11 Rpt: 14/21 |
| 2 FILER NAME Spiller, David L. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00085171 |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 01/03/2024 Thornton, Karen 6 Contributor address; City; State; Zip Code | 7 Amount of Contribution (\$)\$1,000.00 |
| Jacksboro, TX 76458 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) | |
| Date Full name of contributor out-of-state PAC (ID#:) 01/11/2024 Vocational Agriculture Teachers Association of Texas PAC Contributor address; City; State; Zip Code | Amount of Contribution (\$) \$350.00 |
| Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

| The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A2: Sch: 1/1 Rpt: 15/21 | | | |
|-----------------------------------|---|--|---|--|--|--|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) | | | |
| Spiller, David L. (The Honorable) | | | 00085171 | | | |
| 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 | | | |
| 01/11/2024 | Associated Republicans of Texas Campaign Fu | nd | contribution (\$) description | | | |
| | 7 Contributor address; City; State; Zip Code | | \$67.04 I Digital Advertising | | | |
| | | | | | | |
| | | | | | | |
| | Austin, TX 78701 | | Check if travel outside of Texas. Complete Schedule T. | | | |
| 10 Principal occu | 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) | | | |
| | | | | | | |
| 14 Contributor's | employer/law firm (FOR JUDICIAL) | 15 Law firm of contributo | or's spouse (if any) (FOR JUDICIAL) | | | |
| | | | | | | |
| 16 If contributor | is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | |
| | | | | | | |
| Date | Full name of contributor | `````````````````````````````````````` | Amount of In-kind contribution | | | |
| 01/17/2024 | |) | contribution (\$) description | | | |
| 01/17/2024 | Associated Republicans of Texas Campaign Fu | iu | \$6,403.14 Digital Advertising | | | |
| | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | |
| | Austin, TX 78701 | | | | | |
| Principal occu | upation / Job title (FOR NON-JUDICIAL) (See instructions) | Employer (FOR NON | Check if travel outside of Texas. Complete Schedule TJUDICIAL) (See instructions) | | | |
| Fincipal occu | | | | | | |
| Contributor's | principal occupation (FOR JUDICIAL) | Contributor's job title | (FOR JUDICIAL) (See instructions) | | | |
| Contributor 3 | | | | | | |
| Contributorio | | | | | | |
| Contributors | employer/law firm (FOR JUDICIAL) | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | | | | |
| | | | | | | |
| If contributor | is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | |
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| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | |
|---|--|---|---------------|--|--------------------|------------|-------------------------|--|----------------------|----------------------------|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment | | mmittee | Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials Legal Services | | | | Transportation E Travel in District Travel Out of Di | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAM | E | | | | 3 | Filer ID | (Ethics Commission Filers) |
| | Sch: 1/4 Rpt: 16/21 | | Spiller, Dav | vid L. (The Honor | able) | | | | 00085171 | |
| 4 | Date | 5 | Payee name | e | | | | | | |
| | 01/10/2024 | | AA Party & | Tent Rental | | | | | | |
| 6 | Amount (\$) | 7 | Payee addre | ess; City; | State | ; Zip Co | de | | | |
| | \$2,070.13 | | 5204 Dente | on Highway | | | | | | |
| | | | | | | | | | | |
| | | | Haltom Cit | y, TX 76148 | | | | | | |
| 8 | PURPOSE | (a) | Category (S | See Categories listed at th | ne top of this sch | nedule) | (b) Description | | | |
| | OF EXPENDITURE | | Event Expe | | | | | | | nplete Schedule T. |
| | | | | | | | | | , officeholder livin | |
| | | | | | | | Tent Rental 1 | for (| Campaign E | vent |
| | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | | Candidate/Of | ficeholder name | C | Office sou | ght | | Office h | eld |
| | Date | | Payee name | e | | | | | | |
| | 01/10/2024 | | Anedot Inc | | | | | | | |
| Amount (\$) Payee address; City; State; Zip Code | | | | | de | | | | | |
| \$334.61 1340 Poydras Street Suite 1770 | | | | | | | | | | |
| | | | | | | | | | | |
| | | | New Orlea | ns, LA 70112 | | | | | | |
| | PURPOSE | (a) | Category (S | See Categories listed at th | e top of this sch | nedule) | (b) Description | | | |
| FRES Check if travel outside of Texas. Complete Schedule T. | | | | | | | | | | |
| Check if Austin, 1X, officeholder living expense | | | | | | | | | | |
| Processing Fees for Online Campaign Contribu Jan 10-25 | | | | | | | Campaign Contributions: | | | |
| | Complete ONLY if direct | | Candidate/Of | ficeholder name | (| Office sou | | | Office h | eld |
| | expenditure to benefit C/OI | | oundiduce, or | | | | gin | | | |
| - | Date | | Payee name | 2 | | | | | | |
| | 01/10/2024 | | Divine Ord | | | | | | | |
| | | | | | State | · Zin Co | do | | | |
| | Amount (\$) | Payee address; City; State; Zip Code 1209 S. Main Street | | | | | | | | |
| | \$750.00 | | 1209 5. 1018 | am Street | | | | | | |
| | | | | | | | | | | |
| | | | Jacksboro, | , TX 76458 | | | | | | |
| | PURPOSE | (a) | Category (S | See Categories listed at th | ne top of this sch | nedule) | (b) Description | | | |
| | OF EXPENDITURE | | Event Expe | ense | | | | | | nplete Schedule T. |
| | EXPENDITORE | | | | | | | | , officeholder livin | |
| | | | | | | | Coordination | of | Campaign E | Event |
| | | L | | | | | | | | |
| | Complete ONLY if direct | | Candidate/Of | ficeholder name | (| Office sou | ght | | Office h | eld |
| | expenditure to benefit C/OI | 4 | | | | | | | | |
| | | | | | | | | | | |
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| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | | | |
|--|--|--|-----------------------------------|--|--------------------|------------|---|------|--|----------------------------|--|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment | | nmittee | Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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) | | | | | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | = | | | | 3 | Filer ID | (Ethics Commission Filers) | | | |
| | Sch: 2/4 Rpt: 17/21 | | Spiller, David L. (The Honorable) | | | | | | 00085171 | | | | |
| 4 | Date | 5 | Payee name | | | | | | | | | | |
| | 01/04/2024 | | Murphy Na | sica & Associate | es | | | | | | | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | | | | | | | | | | | |
| | \$972.95 | | PO Box 164 | 48 | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | Austin, TX | 78767 | | | | | | | | | |
| 8 | PURPOSE | (a) | Category (s | ee Categories listed at t | he top of this sch | adula) | (b) Description | | | | | | |
| | OF | ľ | Advertising | | | ieuuie) | | outs | ide of Texas. Com | plete Schedule T. | | | |
| | EXPENDITURE | | 0 | | | | | | | fficeholder living expense | | | |
| | | | | | | | | | | ampaign Materials - | | | |
| | | | | | | | Reported on | PIE | | | | | |
| 9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH | | | | | | eld | | | | | | | |
| | Date | | Payee name | | | | | | | | | | |
| | 01/17/2024 | | Murphy Nasica & Associates | | | | | | | | | | |
| Amount (\$) Payee address; City; State; Zip Co | | | | | de | | | | | | | | |
| \$20,054.78 PO Box 1648 | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | Austin, TX | 78767 | | | | | | | | | |
| | PURPOSE OF | (a) | Category (S | ee Categories listed at t | he top of this sch | nedule) | (b) Description | | | | | | |
| | EXPENDITURE | Advertising Expense | | | | | | | ide of Texas. Com , officeholder living | | | | |
| | | | | | | | | | | Production of Campaign | | | |
| Mail Ads - Reported on Prev Sch F2 | | | | | | | | | | | | | |
| | Complete ONLY if direct | | Candidate/Off | iceholder name | (| Dffice sou | ght | | Office he | eld | | | |
| | expenditure to benefit C/OI | Η | | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | | | |
| | 01/04/2024 | | Murphy Na | sica & Associate | es | | | | | | | | |
| | Amount (\$) | | Payee addre | ss; City; | State | ; Zip Co | de | | | | | | |
| | \$690.42 | | PO Box 164 | 48 | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | Austin, TX | 78767 | | | | | | | | | |
| | PURPOSE OF | (a) | | ee Categories listed at t | he top of this sch | nedule) | (b) Description | | | wlate Oskadul. T | | | |
| | EXPENDITURE | | Advertising | Expense | | | | | ide of Texas. Com , officeholder living | | | | |
| | | | | | | | | | | ampaign Materials | | | |
| | | | | | | | | 100 | | anpaign materialo | | | |
| - | Complete ONLY if direct | Ľ | Candidate/Off | ceholder name | (| Office sou | aht | | Office he | eld | | | |
| | expenditure to benefit C/Oł | | | | · · · · · | | , · | | 000 10 | | | | |
| | | | | | | | | | | | | | |
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| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | |
|--|--|-----|---|------------|---|--------------|---|---|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Com Credit Card Payment | | | | nt/Reimbursement d/Rental Expense e se s/Contract Labor | | 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: | 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission Filers) |
| | Sch: 3/4 Rpt: 18/21 | | Spiller, David L. (The Honorable) | | | | | 00085171 |
| 4 | Date | 5 | Payee name | | | | | |
| | 01/04/2024 | | Murphy Nasica & Associates | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; State | e; Zip Co | de | | | |
| | \$2,049.35 | | PO Box 1648 | | | | | |
| | | | Austin, TX 78767 | | | | | |
| 8 | PURPOSE | (a) | Category (See Categories listed at the top of this sc | hedule) | (b) | Description | | |
| | OF EXPENDITURE | | Advertising Expense | | | | | ide of Texas. Complete Schedule T. |
| | - | | | | | | | , officeholder living expense |
| | | | | | | Design and F | 100 | duction of Campaign Signs |
| 9 | Complete ONLY if direct | | Candidate/Officeholder name | Office sou | ght | | | Office held |
| | expenditure to benefit C/OI | Η | | | | | | |
| | Date | | Payee name | | | | | |
| | 01/04/2024 | | Murphy Nasica & Associates | | | | | |
| Amount (\$) Payee address; City; State; Zip Code | | | | | | | | |
| \$15,000.00 PO Box 1648 | | | | | | | | |
| | | | | | | | | |
| | | | Austin, TX 78767 | | | | | |
| | PURPOSE OF | (a) | Category (See Categories listed at the top of this so | hedule) | (b) | Description | | ide of Taura - Oceanidate Ocharkula T |
| | EXPENDITURE | | Advertising Expense | | | | | ide of Texas. Complete Schedule T. , officeholder living expense |
| | | | | | | | | sroots Advertising Expense |
| | | | | | | oumpaign of | aot | |
| | Complete ONLY if direct | | Candidate/Officeholder name | Office sou | ght | | | Office held |
| | expenditure to benefit C/OI | -1 | | | | | | |
| | Date | | Payee name | | | | | |
| | 01/12/2024 | | Murphy Nasica & Associates | | | | | |
| | Amount (\$) | | Payee address; City; State | e; Zip Co | de | | | |
| | \$1,475.66 | | PO Box 1648 | | | | | |
| | | | | | | | | |
| | | | Austin, TX 78767 | | | | | |
| | PURPOSE OF | (a) | Category (See Categories listed at the top of this sc | hedule) | (b) | Description | | |
| | EXPENDITURE | | Advertising Expense | | | | | ide of Texas. Complete Schedule T. |
| | | | | | | | | , officeholder living expense |
| | | | | | | Design and F | 100 | duction of Campaign Materials |
| | 0 | | | o." | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | Office sou | ght | | | Office held |
| | | - | | | | | | |
| | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | |
|--|---|-----|--|---|-------------|-----------------|---|---|----------------------------|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Comm Credit Card Payment | | Fees Food/Bever Gift/Awards Innittee Legal Servio | 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: | 2 | FILER NAME | | | | 3 | Filer ID | (Ethics Commission Filers) |
| | Sch: 4/4 Rpt: 19/21 | | Spiller, David L. (Th | e Honorable) | | | | 00085171 | |
| 4 | Date | 5 | Payee name | | | | | | |
| | 01/11/2024 | | Murphy Nasica & As | sociates | | | | | |
| 6 | Amount (\$) | 7 | Payee address; C | ity; State; | Zip Coo | е | | | |
| | \$15,000.00 | | PO Box 1648 | | | | | | |
| | | | | | | | | | |
| | | | Austin, TX 78767 | | | | | | |
| | | | | | | | | | |
| 8 | PURPOSE OF | (a) | Category (See Categorie | | edule) | b) Description | | | |
| | EXPENDITURE | | Advertising Expense | , | | | | ide of Texas. Com , officeholder living | |
| | | | | | | | | | tising Expense |
| | | | | | | Campaign O | 143 | | |
| _ | | | | | | | | 011 | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder | name O | office soug | nt | | Office he | ad |
| | Date | | Payee name | | | | | | |
| | 01/19/2024 | | Royal Event Rentals | 6 | | | | | |
| Amount (\$) Payee address; City; State; Zip Code | | | | | | | | | |
| \$1,145.29 1204 Mineral Wells Highway | | | | | | | | | |
| | | | | | | | | | |
| | | | Weatherford, TX 76 | 086 | | | | | |
| | PURPOSE OF EXPENDITURE | (a) | Category _{(See Categorie} Event Expense | s listed at the top of this sche | edule) | | ı, TX | ide of Texas. Com , officeholder living Campaign Ev | expense |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/Oł | | Candidate/Officeholder | name O | Office soug | ht | | Office he | eld |
| | Date | | Payee name | | | | | | |
| | 01/22/2024 | | Texas Political Solut | tions, LLC | | | | | |
| - | Amount (\$) | - | | | Zip Coo | P | | | |
| | \$1,000.00 | | PO Box 685201 | ity, State, | | | | | |
| | φ1,000.00 | | FO B0x 005201 | | | | | | |
| | | | Austin, TX 78768 | | | | | | |
| | PURPOSE | (a) | Category (See Categorie | s listed at the top of this sche | edule) | b) Description | | | |
| | OF EXPENDITURE | | Legal Services | | ŕ | Check if travel | outsi | ide of Texas. Com | plete Schedule T. |
| | EXPENDITORE | | | | | | | , officeholder living | |
| | | | | | | Campaign C | om | pliance Serv | ices |
| | | | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder | name O | office soug | ht | | Office he | eld |
| - | | | | | | | | | |
| | | | | | | | | | |

| | RRED OBLIGATIONS | | SCHEDULE F2 |
|--|---|--|---|
| Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica | Event Expense Fees Food/Beverage Expense - Gift/Awards/Memorials Expens al Committee Legal Services | TEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor xplains how to complete this form. | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) |
| Total pages Schedule F2: Sch: 1/2 Rpt: 20/21 4 | 2 FILER NAME Spiller, David L. (The Honorable |) | 3 Filer ID (Ethics Commission Filers) 00085171 |
| TOTAL OF UNITEMI | | GATIONS | \$ |
| 5 Date 01/01/2024 | 6 Payee name Murphy Nasica & Associates | | |
| 7 Amount (\$) \$18,500.00 | 8 Payee address; City; PO Box 1648 Austin, TX 78767 | State; Zip Code | |
| 9 TYPE OF EXPENDITURE | X Political | Non-Political | |
| 10 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of Advertising Expense | Check if trave | l outside of Texas. Complete Schedule T. n, TX, officeholder living expense Placement of Digital Campaign nts |
| 11 Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name H | Office sought | Office held |
| Date 01/13/2024 | Payee name Murphy Nasica & Associates | | |
| Amount (\$) \$26,744.09 | Payee address; City; PO Box 1648 | State; Zip Code | |
| TYPE OF | Austin, TX 78767 | Non-Political | |
| EXPENDITURE PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of Advertising Expense | f this schedule) (b) Description | l outside of Texas. Complete Schedule T. n, TX, officeholder living expense a, Postage and Production of Campaign sements |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name H | Office sought | Office held |
| | | | |

| UNPAID INCU | RRED OBLIGATIONS | SCHEDULE F2 | | | | | |
|--|---|---|--|--|--|--|--|
| Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica | Fees Office Overhead Food/Beverage Expense Polling Expense - Gift/Awards/Memorials Expense Printing Expense I Committee Legal Services Salaries/Wages | at/Reimbursement /Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District e Travel Out of District /Contract Labor OTHER (enter a category not listed above) | | | | | |
| 1 Total pages Schedule F2: Sch: 2/2 Rpt: 21/21 | The Instruction Guide explains how to comple 2 FILER NAME Spiller, David L. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00085171 | | | | | |
| ⁴ TOTAL OF UNITEMI | ZED UNPAID INCURRED OBLIGATIONS | \$ | | | | | |
| 5 Date 01/01/2024 | 6 Payee name Murphy Nasica & Associates | | | | | | |
| 7 Amount (\$) \$3,500.00 | 8 Payee address; City; State; Zip Code PO Box 1648 | | | | | | |
| 9 TYPE OF | Austin, TX 78767 | | | | | | |
| EXPENDITURE 10 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) (b) [Consulting Expense | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Consulting Fee | | | | | |
| 11 Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought | Office held | | | | | |
| | | | | | | | |