

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

| | | | |
|---|--|--|------------------------------------|
| The GPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00066799 | 2 Total pages filed: 151 |
| 3 COMMITTEE NAME Texas Patriots State PAC | | OFFICE USE ONLY | |
| | | Date Received ELECTRONICALLY FILED 02/25/2024 | |
| | | Date Hand-delivered or Date Postmarked | |
| | | Receipt # | Amount |
| | | Date Processed | |
| | | Date Imaged | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. BOX 130184 The Woodlands, TX 77393 | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR | FIRST | MI |
| | | Nancy | |
| | NICKNAME | LAST | SUFFIX |
| | | Sievert | |
| 6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small> | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2 South Floral Leaf Circle The Woodlands, TX 77381 | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2 South Floral Leaf Circle The Woodlands, TX 77381 | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION |
| | (713) | 206-0913 | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff | | |
| 10 PERIOD COVERED | Month Day Year Month Day Year 01/26/2024 THROUGH 02/24/2024 | | |
| 11 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 | |

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

| | |
|--|---|
| 12 COMMITTEE NAME Texas Patriots State PAC | 13 Filer ID (Ethics Commission Filers) 00066799 |
|--|---|

| | | |
|---|--|--|
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Joe Sager Montgomery County Precinct Chair #1 |
| | | B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | | |

| | | |
|-------------------------------|---|--------------|
| 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 16,012.34 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 19,124.75 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 6,279.96 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

16 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.

Nancy Sievert

Signature of Campaign Treasurer

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

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Douglas Taylor Montgomery County Chair Precinct #5 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Phoebe Wesley Montgomery County Chair Precinct #7 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Lana Springer Montgomery County Chair Precinct #10 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Dawn McMinn Montgomery County Chair Precinct #11 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Tony Labelle Montgomery County Chair Precinct #15 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Jim Becka Montgomery County Chair Precinct #16 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Dale Fessenden Montgomery County Chair Precinct #17 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Jason Reagan Montgomery County Chair Precinct #18 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Julie Davis Montgomery County Chair Precinct #19 B. Opposed |
| 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed | |
| 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Terry Rendon Sherman Montgomery County Chair Precinct #20 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Sunday Shibley Montgomery County Chair Precinct #22 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Bob Bagley Montgomery County Chair Precinct #24 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Phil Cady Montgomery County Chair Precinct #25 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Caleb Smith Montgomery County Chair Precinct #26 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Steve Kent Montgomery County Chair Precinct #28 B. Opposed |
| 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed | |
| 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported John Brock Montgomery County Chair Precinct #29 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Mark Furber Montgomery County Chair Precinct #30 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Betty Anderson Montgomery County Chair Precinct #31 B. Opposed |
| 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed | |
| 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Glenn Cox Montgomery County Chair Precinct #32 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Kenneth Allen Montgomery County Chair Precinct #34 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Tammy Kelter Montgomery County Chair Precinct #35 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Paul Crowson Montgomery County Chair Precinct #36 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Kristen Plaisance Montgomery County Chair Precinct #37 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Brad Vickers Montgomery County Chair Precinct #39 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Jay Mitchell Montgomery County Chair Precinct #40 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Theresa Lee Montgomery County Chair Precinct #41 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Bill Philibert Montgomery County Chair Precinct #42 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported John Schullter Montgomery County Chair Precinct #44 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Peter Stees Montgomery County Chair Precinct #46 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Steven Lawrence Montgomery County Chair Precinct #48 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Christina lightfoot Montgomery County Chair Precinct #50 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Sandra Walker Montgomery County Chair Precinct #51 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Jerral (Wayne) Pearson Montgomery County Chair Precinct #52 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Sharon Blair Montgomery County Chair Precinct #53 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Tom Grega Montgomery County Chair Precinct #54 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Sarah Allison Montgomery County Chair Precinct #55 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Mary Burks Montgomery County Chair Precinct #56 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Elizabeth Rickard Montgomery County Chair Precinct #58 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Jim Dinaso Montgomery County Chair Precinct #60 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Herschel Williams Montgomery County Chair Precinct #63 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Jeff Marshall Montgomery County Chair Precinct #65 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Wendy Yockey Montgomery County Chair Precinct #66 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Denise Boyd Montgomery County Chair Precinct #67 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported John Wertz Montgomery County Chair Precinct #69 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Bob Withrow Montgomery County Chair Precinct #72 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Rik van den Berg Montgomery County Chair Precinct #73 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Rajene (Ginger) Russell Montgomery County Chair Precinct #74 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Josh Jaros Montgomery County Chair Precinct #77 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Susan Love Montgomery County Chair Precinct #81 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Daniel Stage Montgomery County Chair Precinct #83 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Leslie Isbell Montgomery County Chair Precinct #85 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported David Johns Montgomery County Chair Precinct #86 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Robert Walker Montgomery County Chair Precinct #87 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Melinda Olinde Montgomery County Chair Precinct #89 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Carrie Bigford Montgomery County Chair Precinct #92 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Mary Lewis Montgomery County Chair Precinct #94 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Sherry Tavel Montgomery County Chair Precinct #95 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Kimberly Weber Montgomery County Chair Precinct #97 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Linda Hankins Montgomery County Chair Precinct #99 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Doris Fike Montgomery County Chair Precinct #102 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Richard Hatfield Montgomery County Chair Precinct #104 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Bill Clevinger Montgomery County Chair Precinct #105 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Lonna Hord Montgomery County Chair Precinct #106 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Graham Church Montgomery County Chair Precinct #108 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Karen Zeller Montgomery County Chair Precinct #109 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Luis Pedraza Montgomery County Chair Precinct #110 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Patrick Teich Montgomery County Chair Precinct #111 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Pete Goeddertz Montgomery County Chair Precinct #113 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Petra Reyes Railroad Commissioner B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Jimmy Blacklock Supreme Court Justice B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported John Divine Supreme Court Justice B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported David Schenck Court of Criminal Appeals, Presiding Judge B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Gina Parker Court Of Criminal Appeals, Judge B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Lee Finley Court Of Criminal Appeals, Judge B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Paul Bettencourt State Senator B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Cecil Bell State Representative B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Steve Toth State Representative B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Will Metcalf State Representative B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Janis Holt State Representative B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Leanne Johnson Court Of Appeals, Justice B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Kenna Seiler Court Of Appeals, Justice B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Phil Grant District Judge B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Jennifer James Robin District Judge B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Tracy Gilbert District Judge B. Opposed |
| 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed | |
| 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Patty Maginnis District Judge B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Vince Santini District Judge B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Brett Ligon District Judge B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported keith Stewart Montgomery County Court At Law #5 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B.D. Griffin Montgomery County Attorney B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Rand Henderson Montgomery County Sheriff B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Tammy McRae Montgomery County Tax Assessor-Collector B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Robert Walker Montgomery County Commissioner Precinct #1 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Ritch Wheeler Montgomery County Commissioner Precinct #3 B. Opposed |
| 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed | |
| 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Philip Cash Montgomery County Constable Precinct #1 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Daniel Pena Montgomery County Constable Precinct #2 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Ryan Gable Montgomery County Constable Precinct #3 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Kenneth Rowdy Hayden Montgomery County Constable Precinct #4 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Chris Jones Montgomery County Constable Precinct #5 B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Gwen Withrow County Party Chair B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported Ballot ID:Prop 1 Election Date:2024-03-05 Desc:Texas should eliminate property taxes w/o increasing overall tax burden B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported Ballot ID:Prop 2 Election Date:2024-03-05 Desc:Texas should create boarded protection unit, deploy state law enforcement & military to seal border B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported Ballot ID:Prop 3 Election Date:2024-03-05 Desc:Texas legislature should require use of E-Verify by all employers in Texas B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported Ballot ID:Prop 3 Election Date:2024-03-05 Desc:Texas legislature should require use of E-Verify by all employers in Texas B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported Ballot ID:Prop 4 Election Date:2024-03-05 Desc:Texas legislature should end all subsidies & public services for illegal aliens B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported Ballot ID:Prop 5 Election Date:2024-03-05 Desc:Texas urges the U.S.Congress not to grant amnesty to illegal aliens B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported Ballot ID:Prop 6 Election Date:2024-03-05 Desc:Texas legislature should prohibit deployment of Natl Guard to foreign conflict unless war declared B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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| | | |
|---|--|--|
| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported Ballot ID:Prop 7 Election Date:2024-03-05 Desc:Texas legislature should establish authority in State Comptroller to access gold & silver for tender B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported Ballot ID:Prop 8 Election Date:2024-03-05 Desc:Texas should ensure Texans are free to give or withhold consent for any vaccine w/o coercion B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported Ballot ID:Prop 9 Election Date:2024-03-05 Desc:Republican Party of Texas should restrict voting in primaries only to registered Republicans B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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| | | |
|---|--|---|
| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported Ballot ID:Prop 10 Election Date:2024-03-05 Desc:Tx Constitution should be amended to restore authority to Tx Attny Genl to prosecute election crimes B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported Ballot ID:Prop 11 Election Date:2024-03-05 Desc:Tx parents & guardians should have right to select school, public/private & funding follow student B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported Ballot ID:Prop 12 Election Date:2024-03-05 Desc:Tx Constitution should be amended to require proof of citizenship before registering to vote B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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| | | |
|---|--|--|
| 12 COMMITTEE NAME Texas Patriots State PAC | | 13 Filer ID (Ethics Commission Filers) 00066799 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported Ballot ID:Prop 13 Election Date:2024-03-05 Desc:Tx should ban sale of texas land to entities from China, Iran, North Korea & Russia B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

SUBTOTALS - GPAC

| | | |
|--|---|---|
| 17 COMMITTEE NAME Texas Patriots State PAC | | 18 Filer ID (Ethics Commission Filers) 00066799 |
| 19 SCHEDULE SUBTOTALS | | SUBTOTAL AMOUNT |
| | NAME OF SCHEDULE | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 15,997.34 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 15.00 |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 5. | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 6. | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 7. | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 8. | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 9. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 10. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 14,904.32 |
| 11. | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ 2,367.00 |
| 12. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 13. | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 1,853.43 |
| 14. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 15. | <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: 1/3 Rpt: 42/151 |
| 2 FILER NAME Texas Patriots State PAC | | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date 02/14/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ann Perry Campaign <hr/> 6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 02/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bledsoe, William <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Gena <hr/> Contributor address; City; State; Zip Code Lenoir, NC 28645 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Self |
| Date 02/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Steven <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ligon For DA Campaign Fund <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77316 | Amount of Contribution (\$) \$1,000.00 |
| 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: 2/3 Rpt: 43/151 |
| 2 FILER NAME Texas Patriots State PAC | | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date 02/14/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ligon For DA Campaign Fund | 7 Amount of Contribution (\$) \$1,500.00 |
| | 6 Contributor address; City; State; Zip Code Montgomery, TX 77316 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 02/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metzer, Gary | Amount of Contribution (\$) \$20.00 |
| | Contributor address; City; State; Zip Code The Woodlands, TX 77381 | |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Southwestern Energy Co. |
| Date 02/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Sullivan, William | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code The Woodlands, TX 77381 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Ann | Amount of Contribution (\$) \$511.34 |
| | Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rand Henderson Sheriff Campaign Fund | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Conroe, TX 77305 | |
| 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: 3/3 Rpt: 44/151 |
| 2 FILER NAME Texas Patriots State PAC | | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date 02/14/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rieser, Bruce <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77381 | 7 Amount of Contribution (\$) \$5,100.00 |
| 8 Principal occupation / Job title (See Instructions) Consultant | | 9 Employer (See Instructions) Self Employed |
| Date 02/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seiler, Kenna <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Self Employed |
| Date 02/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seiler, Kenna <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Self Employed |
| Date 02/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sievert, Nancy <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Executive Assistant | | Employer (See Instructions) Woodlands Christian Academy |
| Date 02/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloan, Thomas <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) Self Employed |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|--|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 1/1 Rpt: 45/151 | |
| 2 FILER NAME Texas Patriots State PAC | | 3 Filer ID (Ethics Commission Filers) 00066799 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 01/26/2024 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rieser, Bruce <hr style="border-top: 1px dotted black;"/> 7 Contributor address; City; State; Zip Code The Woodlands, TX 77381 | 8 Amount of contribution (\$) \$15.00 | 9 In-kind contribution description Zoom meeting software used for candidate interviews <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Consultant | | 11 Employer (FOR NON-JUDICIAL) (See instructions) Self Employed | |
| 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 contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

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: 1/69 Rpt: 46/151 | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date 02/24/2024 | 5 Payee name Capital One | |
| 6 Amount (\$) \$430.05 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code P.O. Box 60599 City of Industry, CA 91716 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Administrative Items (computer; Moonclerk; stamps; awber) |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/24/2024 | Payee name Moonclerk | |
| Amount (\$) \$161.77 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1040 W. Washington St. Greenville, SC 29601 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (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 Fees from Donations |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/15/2024 | Payee name Wright's Printing LLP | |
| Amount (\$) \$11,653.97 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2407 Timberloch Place Suite A The Woodlands, TX 77380-1039 | |
| 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 voter guide and postage Invoice #83466 |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Craddick, Christi | Office sought Office held Railroad Commissioner None |

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: 2/69 Rpt: 47/151 | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Toth, Steve | Office sought State Representative District 15 |
| | | Office held State Representative District 15 |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Blacklock, Jimmy | Office sought Supreme Court Justice Place 2 |
| | | Office held Supreme Court Justice Place 2 |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Divine, John | Office sought Supreme Court Justice Place 4 |
| | | Office held Supreme Court Justice Place 4 |

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: 3/69 Rpt: 48/151 | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Bland, Jane | Office sought Supreme Court Justice Place 6 |
| | | Office held Supreme Court Justice Place 6 |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Schenck, David | Office sought Court of Criminal Appeals, |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Parker, Gina | Office sought Court Of Criminal Appeals, |
| | | Office held None |

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: 4/69 Rpt: 49/151 | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Finley, Lee | Office sought Court Of Criminal Appeals, Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Bettencourt, Paul | Office sought State Senator District 7 Office held State Senator District 7 |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Bell, Cecil | Office sought State Senator District 3 Office held State Representative District 3 |

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: 5/69 Rpt: 50/151 | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Metcalf, Will | Office sought State Representative District 16 |
| | | Office held State Representative District 16 |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Holt, Janis | Office sought State Representative District 18 |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Johnson, Leanne | Office sought Court Of Appeals, Justice Place |
| | | Office held Court Of Appeals, Justice Place |

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: 6/69 Rpt: 51/151 | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 | |
| 4 Date | 5 Payee name (see previous) | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| | | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Seiler, Kenna | Office sought Court Of Appeals, Justice Place | Office held None |
| Date | Payee name (see previous) | | |
| Amount (\$) | Payee address; City; State; Zip Code | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| | | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Grant, Phil | Office sought District Judge District 9th | Office held District Judge District 9th |
| Date | Payee name (see previous) | | |
| Amount (\$) | Payee address; City; State; Zip Code | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| | | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Robin, Jennifer | Office sought District Judge District 410th | Office held District Judge District 410th |

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: 7/69 Rpt: 52/151 | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Gilbert, Tracy | Office sought District Judge District 418th |
| | | Office held District Judge District 418th |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name McGinnis, Patty | Office sought District Judge District 435th |
| | | Office held District Judge Place 435th |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Santini, Vince | Office sought District Judge District 457th |
| | | Office held District Judge District 457th |

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: 8/69 Rpt: 53/151 | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Lignon, Brett | Office sought District Attorney District 9th |
| | | Office held District Attorney District 9th |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Stewart, Keith | Office sought Montgomery County Court at |
| | | Office held Montgomery County Court at |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Griffin, B.D. | Office sought Montgomery County, County |
| | | Office held Montgomery County, County |

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: 9/69 Rpt: 54/151 | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Henderson, Rand | Office sought Montgomery County Sheriff |
| | | Office held Montgomery County Sheriff |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name McRae, Tammy | Office sought Montgomery County Tax |
| | | Office held Montgomery County Tax |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Walker, Robert | Office sought Montgomery County |
| | | Office held Montgomery County |

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: 10/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Wheeler, Ritch | Office sought Montgomery County Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Cash, Philip | Office sought Montgomery County Constable Office held Montgomery County Constable |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Daniel, Pena | Office sought Montgomery County Constable Office held None |

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: 11/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Gable, Ryan | Office sought Montgomery County Constable |
| | | Office held Montgomery County Constable |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Hayden, Kenneth Rowdy | Office sought Montgomery County Constable |
| | | Office held Montgomery County Constable |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Jones, Chris | Office sought Montgomery County Constable |
| | | Office held Montgomery County Constable |

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: 12/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Withrow, Gwen | Office sought County Party Chair |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Sager, Joe | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Taylor, Douglas | Office sought Montgomery County Republican |
| | | Office held None |

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: 13/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Wesley, Phoebe | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Springer, Iana | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name McMinn, Dawn | Office sought Montgomery County Republican |
| | | Office held None |

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: 14/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Labelle, Tony | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Becka, Jim | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Fessenden, Dale | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |

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: 15/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Reagen, Jason | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Davis, Julie | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Rendon Sherman, Terry | Office sought Montgomery County Republican |
| | | Office held None |

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: 16/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Shibley, Sunday | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Bagley, Bob | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Caddy, Phill | Office sought Montgomery County Republican |
| | | Office held None |

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: 17/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Smith, Caleb | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Kent, Steve | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Brock, John | Office sought Montgomery County Republican |
| | | Office held None |

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: 18/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Furber, Mark | Office sought Montgomery County Republican |
| | Office held None | |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Anderson, Betty | Office sought Montgomery County Republican |
| | Office held Montgomery County Republican | |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Cox, Glenn | Office sought Montgomery County Republican |
| | Office held None | |

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: 19/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Allen, Kenneth | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Kelder, Tammy | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Crowson, Paul | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |

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: 20/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Plaisance, Kristen | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Vickers, Brad | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Mitchell, Jay | Office sought Montgomery County Republican |
| | | Office held None |

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: 21/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Lee, Theresa | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Philibert, Bill | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name schulter, John | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |

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: 22/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Stees, Peter | Office sought Montgomery County Republican |
| | Office held None | |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Lawrence, Steven | Office sought Montgomery County Republican |
| | Office held Montgomery County Republican | |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Lightfoot, Christina | Office sought Montgomery County Republican |
| | Office held Montgomery County Republican | |

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: 23/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Walker, Sandra | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Pearson, Jerral (Wayne) | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Blair, Sharon | Office sought Montgomery County Republican |
| | | Office held None |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 F1: Sch: 24/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Grega, Tom | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Allison, Sarah | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Burks, Mary | Office sought Montgomery County Republican |
| | | Office held None |

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: 25/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Rickard, Elizabeth | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Dinaso, Jim | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name William, Herschel | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |

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: 26/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name marshall, Jeff | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Yockey, Wendy | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Boyd, Denise | Office sought Montgomery County Republican |
| | | Office held None |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 F1: Sch: 27/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Wertz, John | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Withrow, Bob | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name van den Berg, Rik | Office sought Montgomery County Republican |
| | | Office held None |

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: 28/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Russell, Rajene | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Jaros, Josh | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Love, Susan | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |

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: 29/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Stage, Daniel | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Isbell, Leslie | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Johns, David | Office sought Montgomery County Republican |
| | | Office held None |

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: 30/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Walker, Robert | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Olinde, Melinda | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Bigford, Carrie | Office sought Montgomery County Republican |
| | | Office held None |

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: 31/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Lewis, mary | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Tavel, Sherry | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Weber, Kimberly | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |

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: 32/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name hankins, Linda | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Fike, Doris | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name hatfield, Richard | Office sought Montgomery County Republican |
| | | Office held None |

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: 33/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Clevinger, Bill | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Hord, Lonna | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Church, Graham | Office sought Montgomery County Republican |
| | | Office held None |

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: 34/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Zeller, Karen | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Pedraza, Luis | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Telch, Patrick | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |

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: 35/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Goeddertz, Pete | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date 02/21/2024 | Payee name Wright's Printing LLP | |
| Amount (\$) \$2,658.53 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2407 Timberloch Place Suite A The Woodlands, TX 77380-1039 | |
| 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 Voter guide and postage Invoice #83466 |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Craddick, Christi | Office sought Railroad Commissioner |
| | | Office held Railroad Commissioner |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Blacklock, Jimmy | Office sought Supreme Court Justice Place 2 |
| | | Office held Supreme Court Justice Place 2 |

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: 36/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Divine, John | Office sought Supreme Court Justice Place 4 |
| | | Office held Supreme Court Justice Place 4 |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Bland, Jane | Office sought Supreme Court Justice Place 6 |
| | | Office held Supreme Court Justice Place 6 |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Schenck, David | Office sought Court of Criminal Appeals, |
| | | Office held None |

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: 37/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Parker, Gina | Office sought Court Of Criminal Appeals, Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Finley, Lee | Office sought Court Of Criminal Appeals, Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Bettencourt, Paul | Office sought State Senator District 7, Office held State Senator District 7 |

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: 38/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Bell, Cecil | Office sought State Representative District 3 |
| | | Office held State Representative District 3 |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Toth, Steve | Office sought State Representative District 15 |
| | | Office held State Representative District 15 |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Metcalf, Will | Office sought State Representative District 16 |
| | | Office held State Representative District 16 |

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: 39/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Holt, Janis | Office sought State Representative District 18 |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Johnson, Leanne | Office sought Court Of Appeals, Justice Place |
| | | Office held Court Of Appeals, Justice Place |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Seiler, Kenna | Office sought Court Of Appeals, Justice Place |
| | | Office held None |

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: 40/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Grant, phil | Office sought District Judge District 9th |
| | | Office held District Judge District 9th |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name James Robin, Jennifer | Office sought District Judge District 410 |
| | | Office held District Judge District 410 |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Gilbert, Tracy | Office sought District Judge District 418 |
| | | Office held District Judge District 418 |

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: 41/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name McGinnis, Patty | Office sought District Judge District 435 |
| | | Office held District Judge District 435 |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Santini, Vince | Office sought District Judge District 457 |
| | | Office held District Judge District 457 |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Ligon, Brett | Office sought District Attorney District 9th |
| | | Office held District Attorney District 9th |

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: 42/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 | |
| 4 Date | 5 Payee name (see previous) | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| | | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Stewart, Keith | Office sought Montgomery County Court at | Office held Montgomery County Court at |
| Date | Payee name (see previous) | | |
| Amount (\$) | Payee address; City; State; Zip Code | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| | | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Griffin, B.D. | Office sought Montgomery County Attorney | Office held Montgomery County Attorney |
| Date | Payee name (see previous) | | |
| Amount (\$) | Payee address; City; State; Zip Code | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| | | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Henderson, Rand | Office sought Montgomery County Sheriff | Office held Montgomery County Sheriff |

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: 43/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name McRae, Tammy | Office sought Montgomery County Tax |
| | Office held Montgomery County Tax | |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Walker, Robert | Office sought Montgomery County |
| | Office held Montgomery County | |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Wheeler, Ritch | Office sought Montgomery County |
| | Office held None | |

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: 44/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Cash, Philip | Office sought Montgomery County Constable |
| | | Office held Montgomery County Constable |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Pena, Daniel | Office sought Montgomery County Constable |
| | | Office held Montgomery County Constable |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Gable, Ryan | Office sought Montgomery County Constable |
| | | Office held Montgomery County Constable |

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: 45/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 | | | |
| 4 Date | 5 Payee name (see previous) | | | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | | | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate/Officeholder name Hayden, Kenneth Rowdy</td> <td style="width:25%;">Office sought Montgomery County Constable</td> <td style="width:25%;">Office held Montgomery County Constable</td> </tr> </table> | | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Hayden, Kenneth Rowdy | Office sought Montgomery County Constable |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Hayden, Kenneth Rowdy | Office sought Montgomery County Constable | Office held Montgomery County Constable | | |
| Date | Payee name (see previous) | | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate/Officeholder name Jones, Chris</td> <td style="width:25%;">Office sought Montgomery County Constable</td> <td style="width:25%;">Office held Montgomery County Constable</td> </tr> </table> | | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Jones, Chris | Office sought Montgomery County Constable |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Jones, Chris | Office sought Montgomery County Constable | Office held Montgomery County Constable | | |
| Date | Payee name (see previous) | | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:25%;">Candidate/Officeholder name Withrow, Gwen</td> <td style="width:25%;">Office sought Montgomery County Republican</td> <td style="width:25%;">Office held Montgomery County Republican</td> </tr> </table> | | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Withrow, Gwen | Office sought Montgomery County Republican |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Withrow, Gwen | Office sought Montgomery County Republican | Office held Montgomery County Republican | | |

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: 46/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Sager, Joe | Office sought Montgomery County Republican |
| | Office held None | |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Taylor, Douglas | Office sought Montgomery County Republican |
| | Office held Montgomery County Republican | |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Wesley, Phoebe | Office sought Montgomery County Republican |
| | Office held None | |

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: 47/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Springer, Lana | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name McMinn, Dawn | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Labelle, Tony | Office sought Montgomery County Republican |
| | | Office held None |

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: 48/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Becka, Jim | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Fessenden, Dale | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Reagen, Jason | Office sought Montgomery County Republican |
| | | Office held None |

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: 49/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Davis, Julie | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Rendon Sherman, Terry | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Shibley, Sunday | Office sought Montgomery County Republican |
| | | Office held None |

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: 50/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Bagley, Bob | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Caddy, Phill | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Smith, Caleb | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |

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: 51/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Kent, Steve | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Brock, John | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Furber, Mark | Office sought Montgomery County Republican |
| | | Office held None |

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: 52/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Anderson, Betty | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Cox, Glenn | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Allen, Kenneth | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |

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: 53/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Kelver, Tammy | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Crowson, Paul | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Plaisance, Kristen | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |

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: 54/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 | | | |
| 4 Date | 5 Payee name (see previous) | | | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | | | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| | <table style="width:100%; border:none;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:30%;">Candidate/Officeholder name Vickers, Brad</td> <td style="width:30%;">Office sought Montgomery County Republican</td> <td style="width:20%;">Office held Montgomery County Republican</td> </tr> </table> | | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Vickers, Brad | Office sought Montgomery County Republican |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Vickers, Brad | Office sought Montgomery County Republican | Office held Montgomery County Republican | | |
| Date | Payee name (see previous) | | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| | <table style="width:100%; border:none;"> <tr> <td style="width:20%;">Complete ONLY if direct expenditure to benefit C/OH</td> <td style="width:30%;">Candidate/Officeholder name Mitchell, Jay</td> <td style="width:30%;">Office sought Montgomery County Republican</td> <td style="width:20%;">Office held None</td> </tr> </table> | | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Mitchell, Jay | Office sought Montgomery County Republican |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Mitchell, Jay | Office sought Montgomery County Republican | Office held None | | |
| Date | Payee name (see previous) | | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| | <table style="width:100%; border:none;"> <tr> <td style="width:20%;">Complete ONLY if direct expenditure to benefit C/OH</td> <td style="width:30%;">Candidate/Officeholder name Lee, Theresa</td> <td style="width:30%;">Office sought Montgomery County Republican</td> <td style="width:20%;">Office held None</td> </tr> </table> | | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Lee, Theresa | Office sought Montgomery County Republican |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Lee, Theresa | Office sought Montgomery County Republican | Office held None | | |

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: 55/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Philibert, Bill | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Schulter, John | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Steas, Peter | Office sought Montgomery County Republican |
| | | Office held None |

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: 56/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Lawrence, Steven | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Lightfood, Christina | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Walker, Sandra | Office sought Montgomery County Republican |
| | | Office held None |

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: 57/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 | | | |
| 4 Date | 5 Payee name (see previous) | | | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | | | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| | <table style="width:100%; border: none;"> <tr> <td style="width:20%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:30%; border: none;">Candidate/Officeholder name Pearson, Jerald Wyne</td> <td style="width:20%; border: none;">Office sought Montgomery County Republican</td> <td style="width:30%; border: none;">Office held Montgomery County Republican</td> </tr> </table> | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Pearson, Jerald Wyne | Office sought Montgomery County Republican |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Pearson, Jerald Wyne | Office sought Montgomery County Republican | Office held Montgomery County Republican | | |
| Date | Payee name (see previous) | | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| | <table style="width:100%; border: none;"> <tr> <td style="width:20%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:30%; border: none;">Candidate/Officeholder name Blair, Sharon</td> <td style="width:20%; border: none;">Office sought Montgomery County Republican</td> <td style="width:30%; border: none;">Office held None</td> </tr> </table> | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Blair, Sharon | Office sought Montgomery County Republican |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Blair, Sharon | Office sought Montgomery County Republican | Office held None | | |
| Date | Payee name (see previous) | | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | | |
| <input type="checkbox"/> Expenditure from corporate funds | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| | <table style="width:100%; border: none;"> <tr> <td style="width:20%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:30%; border: none;">Candidate/Officeholder name Grega, Tom</td> <td style="width:20%; border: none;">Office sought Montgomery County Republican</td> <td style="width:30%; border: none;">Office held None</td> </tr> </table> | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Grega, Tom | Office sought Montgomery County Republican |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Grega, Tom | Office sought Montgomery County Republican | Office held None | | |

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: 58/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Allison, Sarah | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Burks, Mary | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Rickard, Elizabeth | Office sought Montgomery County Republican |
| | | Office held None |

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: 59/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Dinaso, Jim | Office sought Montgomery County Republican |
| | Office held None | |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Williams, Herschel | Office sought Montgomery County Republican |
| | Office held Montgomery County Republican | |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Marshall, Jeff | Office sought Montgomery County Republican |
| | Office held None | |

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: 60/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Yockey, Wendy | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Boyd, Denise | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Wertz, John | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |

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: 61/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Withrow, Bob | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name van den Bert, Rik | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Russell, Rajene | Office sought Montgomery County Republican |
| | | Office held None |

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: 62/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Jaros, Josh | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Love, Susan | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Stage, Daniel | Office sought Montgomery County Republican |
| | | Office held None |

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: 63/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Stage, Daniel | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Isbell, Leslie | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Johns, David | Office sought Montgomery County Republican |
| | | Office held None |

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: 64/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Walker, Robert | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Olinde, Melinda | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Bigford, Carrie | Office sought Montgomery County Republican |
| | | Office held None |

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: 65/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Lewis, Mary | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Tavel, Sherry | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Weber, Kimberly | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |

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: 66/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Hankins, Linda | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Fike, Doris | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name hatfield, Richard | Office sought Montgomery County Republican |
| | | Office held None |

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: 67/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Clevinger, Bill | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Hord, Lonna | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Church, Graham | Office sought Montgomery County Republican |
| | | Office held None |

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: 68/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Zeller, Karen | Office sought Montgomery County Republican |
| | | Office held None |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Pedraza, Luis | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Telch, Patrick | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 F1: Sch: 69/69 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| <input type="checkbox"/> Expenditure from corporate funds | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Goeddertz, Pete | Office sought Montgomery County Republican |
| | | Office held Montgomery County Republican |

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(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 - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F2: Sch: 1/1 Rpt: 115/151 | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
|--|---|--|

| | |
|--|----|
| 4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS | \$ |
|--|----|

| | |
|-----------------------------|--|
| 5 Date 02/20/2024 | 6 Payee name Tripple Threat Strategies |
|-----------------------------|--|

| | |
|------------------------------------|--|
| 7 Amount (\$) \$2,367.00 | 8 Payee address; City; State; Zip Code Clearfork, 5049 Edwards Ranch Rd. Fort Worth, TX 76109 |
|------------------------------------|--|

Expenditure from corporate funds

| | |
|------------------------------|--|
| 9 TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political |
|------------------------------|--|

| | | |
|----------------------------------|--|---|
| 10 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 Text message services - PAC adv |
|----------------------------------|--|---|

| | | | |
|--|-----------------------------|---------------|-------------|
| 11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

| |
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| |
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|----------------------------------|---|--|
| 1 Total pages Schedule F4: Sch: 1/36 Rpt: | | 2 FILER NAME Texas Patriots State PAC | | 3 Filer ID (Ethics Commission Filers) 00066799 | |
| 4 CREDIT CARD ISSUER | | Name of financial institution Capital One | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ | |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$352.85 | (b) Date of Charge 01/29/2024 | (c) Date(s) Credit Card Issuer Paid 02/24/2024 | |
| 7 PAYEE | | (a) Payee name Amazon | | (b) Payee address; City, State, Zip Code 1010 Church St Nashville, TN 37203 | |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Computer for Treasurer Reporting | | (b) Description Computer for Treasurer Reporting | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| | | | | Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$29.00 | (b) Date of Charge 01/29/2024 | (c) Date(s) Credit Card Issuer Paid 02/24/2024 | |
| PAYEE | | (a) Payee name Aweber | | (b) Payee address; City, State, Zip Code 1100 Manor Dr. Chalfont, PA 18914 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Email software | | (b) Description Email software | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| | | | | Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$13.20 | (b) Date of Charge 01/26/2024 | (c) Date(s) Credit Card Issuer Paid 02/24/2024 | |
| PAYEE | | (a) Payee name USPS | | (b) Payee address; City, State, Zip Code 10800 Gosling Rd. Spring, TX 77381 | |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Postage Stamps | | (b) Description Postage Stamps | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| | | | | Office held | |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F4: Sch: 2/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution see previous | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged \$35.00 | (b) Date of Charge 01/29/2024 |
| 7 PAYEE | (a) Payee name Moonclerk | (c) Date(s) Credit Card Issuer Paid 02/24/2024 |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Payee address; City, State, Zip Code 1040 W. Washington St. Greenville, SC 29601 |
| 9 Complete ONLY if direct expenditure to benefit C/OH | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| PAYMENT | (a) Amount Charged | (b) Date of Charge (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name | (b) Payee address; City, State, Zip Code |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete ONLY if direct expenditure to benefit C/OH | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| PAYMENT | (a) Amount Charged | (b) Date of Charge (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name | (b) Payee address; City, State, Zip Code |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete ONLY if direct expenditure to benefit C/OH | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F4: Sch: 3/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution UBS Visa | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged \$1,423.38 | (b) Date of Charge 02/21/2024 |
| 7 PAYEE | (a) Payee name Wright's Printing & Marketing | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description Voter Guides for Parking Lot |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Toth, Steve | Office sought State Representative District 15 |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Craddick, Christi | Office sought Railroad Commissioner |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Blacklock, Jimmy | Office sought Supreme Court Justice Place 2 |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 4/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Divine, John | Office sought Supreme Court Justice Place 6 |
| | Office held Supreme Court Justice Place 6 | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Bland, Jane | Office sought Supreme Court Justice Place 6 |
| | Office held Supreme Court Justice Place 6 | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Schenck, David | Office sought Court of Criminal Appeals, |
| | Office held None | |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 5/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Parker, Gina | Office sought Court Of Criminal Appeals, |
| | | Office held None |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Finley, Lee | Office sought Court Of Criminal Appeals, |
| | | Office held None |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Bettencourt, Paul | Office sought State Senator District 7 |
| | | Office held State Senator District 7 |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F4: Sch: 6/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Bell Jr., Cecil | Office sought State Representative District 3 |
| | | Office held State Representative District 3 |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Metcalf, Will | Office sought State Representative District 16 |
| | | Office held State Representative District 16 |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Holt, Janis | Office sought State Representative District 18 |
| | | Office held None |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 7/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Johnson, Leanne | Office sought Court Of Appeals, Justice Place |
| | Office held Court Of Appeals, Justice Place | Office held Court Of Appeals, Justice Place |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Seiler, Kenna | Office sought Court Of Appeals, Justice Place |
| | Office held None | Office held None |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Grant, Phil | Office sought District Judge District 9th |
| | Office held District Judge District 9th | Office held District Judge District 9th |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 8/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Robin, Jennifer James | Office sought District Judge District 410th |
| | Office held District Judge District 410th | Office held District Judge District 410th |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Gilbert, Tracy | Office sought District Judge District 418th |
| | Office held District Judge District 418th | Office held District Judge District 418th |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Maginnis, Patty | Office sought District Judge District 435th |
| | Office held District Judge District 435th | Office held District Judge District 435th |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 9/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Santini, Vince | Office sought District Judge District 457th |
| | | Office held District Judge District 457th |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Ligon, Brett | Office sought District Attorney District 9th |
| | | Office held District Attorney District 9th |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Stewart, Keith | Office sought Montgomery County Court at |
| | | Office held Montgomery County Court at |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 10/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Griffin, B.D. | Office sought Montgomery County Attorney |
| | Office held Montgomery County Attorney | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Henderson, Rand | Office sought Montgomery County Sheriff |
| | Office held Montgomery County Sheriff | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name McRae, Tammy | Office sought Montgomery County Tax |
| | Office held Montgomery County Tax | |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 11/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Walker, Robert | Office sought Montgomery County |
| | | Office held Montgomery County |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Wheeler, Ritch | Office sought Montgomery County |
| | | Office held None |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Cash, Philip | Office sought Montgomery County Constable, |
| | | Office held Montgomery County Constable, |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 12/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Pena, Daniel | Office sought Montgomery County Constable, None |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Gable, Ryan | Office sought Montgomery County Constable, Montgomery County Constable, |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Hayden, Kenneth (Rowdy) | Office sought Montgomery County Constable, Montgomery County Constable, |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 13/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Jones, Chris | Office sought Montgomery County Constable, |
| | | Office held Montgomery County Constable, |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Withrow, Gwen | Office sought County Party Chair |
| | | Office held None |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Sager, Joe | Office sought Montgomery County Pct Chair |
| | | Office held None |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | |
|---|---|--|---|
| 1 Total pages Schedule F4: Sch: 14/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid |
| 7 PAYEE | (a) Payee name (see previous) | (b) Payee address; City, State, Zip Code | |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Taylor, Douglas | Office sought Montgomery County Pct Chair | Office held None |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name (see previous) | (b) Payee address; City, State, Zip Code | |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Wesley, Phoebe | Office sought Montgomery County Pct Chair | Office held None |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name (see previous) | (b) Payee address; City, State, Zip Code | |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Springer, Lana | Office sought Montgomery County Pct Chair | Office held None |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 15/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name McMinn, Dawn | Office sought Montgomery County Pct Chair |
| | Office held None | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Labelle, Tony | Office sought Montgomery County Pct Chair |
| | Office held None | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Becka, Jim | Office sought Montgomery County Pct Chair |
| | Office held None | |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F4: Sch: 16/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Fessenden, Dale | Office sought Montgomery County Pct Chair |
| | | Office held Montgomery County Pct Chair |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Reagen, Jason | Office sought Montgomery County Pct Chair |
| | | Office held None |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Davis, Julie | Office sought Montgomery County Pct Chair |
| | | Office held Montgomery County Pct Chair |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 17/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Sherman, Terry Rendon | Office sought Montgomery County Pct Chair |
| | | Office held None |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Shibley, Sunday | Office sought Montgomery County Pct Chair |
| | | Office held None |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Bagley, Bob | Office sought Montgomery County Pct Chair |
| | | Office held Montgomery County Pct Chair |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F4: Sch: 18/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Cady, Phill | Office sought Montgomery County Pct Chair |
| | | Office held None |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Smith, Caleb | Office sought Montgomery County Pct Chair |
| | | Office held Montgomery County Pct Chair |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Kent, Steve | Office sought Montgomery County Pct Chair |
| | | Office held None |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|----------|--|---|--|---|---|
| 1 | Total pages Schedule F4: Sch: 19/36 Rpt: | 2 | FILER NAME Texas Patriots State PAC | 3 | Filer ID (Ethics Commission Filers) 00066799 |
| 4 | CREDIT CARD ISSUER | Name of financial institution | | 5 | TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 | PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code | |
| 8 | PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Brock, John | Office sought Montgomery County Pct Chair | Office held None | |
| 6 | PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code | |
| 8 | PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Furber, Mark | Office sought Montgomery County Pct Chair | Office held None | |
| 6 | PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code | |
| 8 | PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Anderson, Betty | Office sought Montgomery County Pct Chair | Office held Montgomery County Pct Chair | |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|----------|--|---|--|---|---|
| 1 | Total pages Schedule F4: Sch: 20/36 Rpt: | 2 | FILER NAME Texas Patriots State PAC | 3 | Filer ID (Ethics Commission Filers) 00066799 |
| 4 | CREDIT CARD ISSUER | Name of financial institution | | 5 | TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 | PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code | |
| 8 | PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Cox, Glenn | | Office sought Montgomery County Pct Chair | Office held None |
| 6 | PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code | |
| 8 | PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Allen, Kenneth | | Office sought Montgomery County Pct Chair | Office held Montgomery County Pct Chair |
| 6 | PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code | |
| 8 | PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Allen, Kenneth | | Office sought Montgomery County Pct Chair | Office held Montgomery County Pct Chair |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 21/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Kelder, Tammy | Office sought Montgomery County Pct Chair |
| | Office held Montgomery County Pct Chair | Office held Montgomery County Pct Chair |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Crowson, Paul | Office sought Montgomery County Pct Chair |
| | Office held Montgomery County Pct Chair | Office held Montgomery County Pct Chair |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Plaisance, Kristen | Office sought Montgomery County Pct Chair |
| | Office held Montgomery County Pct Chair | Office held Montgomery County Pct Chair |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F4: Sch: 22/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Vickers, Brad | Office sought Montgomery County Pct Chair |
| | | Office held Montgomery County Pct Chair |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Mitchell, Jay | Office sought Montgomery County Pct Chair |
| | | Office held None |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Lee, Theresa | Office sought Montgomery County Pct Chair |
| | | Office held None |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--------------------|---|--|
| 1 Total pages Schedule F4: Sch: 23/36 Rpt: | | 2 FILER NAME Texas Patriots State PAC | | 3 Filer ID (Ethics Commission Filers) 00066799 | |
| 4 CREDIT CARD ISSUER | | Name of financial institution | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ | |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid | |
| 7 PAYEE | | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code | |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name Philibert, Bill | | Office sought Montgomery County Pct Chair | Office held Montgomery County Pct Chair |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid | |
| PAYEE | | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code | |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name Schluter, John | | Office sought Montgomery County Pct Chair | Office held Montgomery County Pct Chair |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid | |
| PAYEE | | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code | |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name Steas, Peter | | Office sought Montgomery County Pct Chair | Office held None |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | |
|---|---|--|--|
| 1 Total pages Schedule F4: Sch: 24/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid |
| 7 PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Lawrence, Steven | Office sought Montgomery County Pct Chair | Office held Montgomery County Pct Chair |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid |
| 7 PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Lightfoot, Christina | Office sought Montgomery County Pct Chair | Office held Montgomery County Pct Chair |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid |
| 7 PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Walker, Sandra | Office sought Montgomery County Pct Chair | Office held None |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 25/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Pearson, Jerral (Wayne) | Office sought Montgomery County Pct Chair |
| | Office held Montgomery County Pct Chair | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Blair, Sharon | Office sought Montgomery County Pct Chair |
| | Office held None | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Grega, Tom | Office sought Montgomery County Pct Chair |
| | Office held None | |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 26/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Allison, Sarah | Office sought Montgomery County Pct Chair |
| | Office held None | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Burks, Mary | Office sought Montgomery County Pct Chair |
| | Office held None | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Rickard, Elizabeth | Office sought Montgomery County Pct Chair |
| | Office held None | |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|----------|--|---|--|---|---|
| 1 | Total pages Schedule F4: Sch: 27/36 Rpt: | 2 | FILER NAME Texas Patriots State PAC | 3 | Filer ID (Ethics Commission Filers) 00066799 |
| 4 | CREDIT CARD ISSUER | Name of financial institution | | 5 | TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 | PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code | |
| 8 | PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Dinaso, Jim | Office sought Montgomery County Pct Chair | Office held None | |
| 6 | PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code | |
| 8 | PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Williams, Herschel | Office sought Montgomery County Pct Chair | Office held Montgomery County Pct Chair | |
| 6 | PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code | |
| 8 | PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Marshall, Jeff | Office sought Montgomery County Pct Chair | Office held None | |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | |
|---|---|--|--|
| 1 Total pages Schedule F4: Sch: 28/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid |
| 7 PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Yockey, Wendy | Office sought Montgomery County Pct Chair | Office held None |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Boyd, Denise | Office sought Montgomery County Pct Chair | Office held None |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Wertz, John | Office sought Montgomery County Pct Chair | Office held Montgomery County Pct Chair |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|----------|--|---|--|---|---|
| 1 | Total pages Schedule F4: Sch: 29/36 Rpt: | 2 | FILER NAME Texas Patriots State PAC | 3 | Filer ID (Ethics Commission Filers) 00066799 |
| 4 | CREDIT CARD ISSUER | Name of financial institution | | 5 | TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 | PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code | |
| 8 | PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Withrow, Bob | | Office sought Montgomery County Pct Chair | Office held None |
| 6 | PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code | |
| 8 | PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name van den Berg, Rik | | Office sought Montgomery County Pct Chair | Office held None |
| 6 | PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge | (c) Date(s) Credit Card Issuer Paid | |
| 7 | PAYEE | (a) Payee name (see previous) | | (b) Payee address; City, State, Zip Code | |
| 8 | PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | | (b) Description | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Russell, Rajene | | Office sought Montgomery County Pct Chair | Office held Montgomery County Pct Chair |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 30/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Jaros, Josh | Office sought Montgomery County Pct Chair |
| | | Office held None |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Love, Susan | Office sought Montgomery County Pct Chair |
| | | Office held Montgomery County Pct Chair |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Stage, Daniel | Office sought Montgomery County Pct Chair |
| | | Office held None |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 31/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Isbell, Leslie | Office sought Montgomery County Pct Chair |
| | | Office held None |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Johna, David | Office sought Montgomery County Pct Chair |
| | | Office held None |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Walker, Robert | Office sought Montgomery County Pct Chair |
| | | Office held Montgomery County Pct Chair |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F4: Sch: 32/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Olinde, Melinda | Office sought Montgomery County Pct Chair |
| | | Office held Montgomery County Pct Chair |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Bigford, Carrie | Office sought Montgomery County Pct Chair |
| | | Office held None |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Lewis, Mary | Office sought Montgomery County Pct Chair |
| | | Office held Montgomery County Pct Chair |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F4: Sch: 33/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Tavel, Sherry | Office sought Montgomery County Pct Chair |
| | | Office held Montgomery County Pct Chair |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Weber, Kimberly | Office sought Montgomery County Pct Chair |
| | | Office held Montgomery County Pct Chair |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Hawkins, Linda | Office sought Montgomery County Pct Chair |
| | | Office held Montgomery County Pct Chair |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F4: Sch: 34/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Fike, Doris | Office sought Montgomery County Pct Chair |
| | | Office held Montgomery County Pct Chair |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Hatfield, Richard | Office sought Montgomery County Pct Chair |
| | | Office held None |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Clevinger, Bill | Office sought Montgomery County Pct Chair |
| | | Office held None |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F4: Sch: 35/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Hord, Lonna | Office sought Montgomery County Pct Chair |
| | Office held Montgomery County Pct Chair | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Church, Graham | Office sought Montgomery County Pct Chair |
| | Office held None | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Payee address; City, State, Zip Code |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Zeller, Karen | Office sought Montgomery County Pct Chair |
| | Office held None | |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F4: Sch: 36/36 Rpt: | 2 FILER NAME Texas Patriots State PAC | 3 Filer ID (Ethics Commission Filers) 00066799 |
| 4 CREDIT CARD ISSUER | Name of financial institution | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Pedraza, Luis | Office sought Montgomery County Pct Chair |
| | | Office held Montgomery County Pct Chair |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Teich, Patrick | Office sought Montgomery County Pct Chair |
| | | Office held Montgomery County Pct Chair |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged | (b) Date of Charge |
| 7 PAYEE | (a) Payee name (see previous) | (c) Date(s) Credit Card Issuer Paid |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Goeddertz, Pete | Office sought Montgomery County Pct Chair |
| | | Office held Montgomery County Pct Chair |