CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to com	plete this form.	1 Filer ID (Ethics Commiss 00087395	sion Filers)	2 Total pages file	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE U	SE ONLY
NAME	Mr.	Stephen M.			Date Received ELECTRONICA	LLY FILED
	NICKNAME	LAST		SUFFIX	02/26/2024	
	Skeeter	Hubert				
4 CANDIDATE /	ADDRESS / PO BOX; AF	PT / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	2523 Pine Acres Dr.				Receipt #	Amount
Change of Address	Conroe, TX 77384					
	Comoc, 17, 77304				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	<u>.</u>	
TREASURER NAME	Dr.	Bonnie L.				
	NICKNAME	LAST		SUFFIX		
		Hubert		M.A.		
6 CAMPAIGN	STREET ADDRESS (NO F	PO BOX PLEASE);	APT	/ SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	2523 Pine Acres Dr					
(Residence or Business)	Conroe, TX 77384					
7 CAMPAIGN	AREA CODE PHO	ONE NUMBER E	XTENSION			
TREASURER PHONE	(936) 777-2848					
8 REPORT						
TYPE	January 15	30th day before	election I	Runoff	15th day after cam appointment (office	
	July 15	X 8th day before 6	election	Exceeded modified	Final Report (Attac	
				reporting limit	_ ` `	,
9 PERIOD	Month Day Yea	r		Month Day	Year	
COVERED	01/26/2024	TH	ROUGH	02/24/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Yea	r X Pi	rimary	Runoff	Other	
	03/05/2024	П	eneral	Special		
11 OFFICE	OFFICE HELD (if any)	ı		12 OFFICE SOUGHT	(if known)	
	None Montgomery			State Representa	ative District 15	
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 45

13 C / OH NAME	Hubert, Stephen M. (Mr.)	14 Filer ID (E 00087395	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without a d officeholders are required to report this information	the candidate's or officel	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION	1. TOTAL UNITEM	ZED POLITICAL CONTRIBUTIONS (OTHER THA	N PLEDGES, LOANS,	<u> </u>
TOTALS	CTRONICALLY)	\$ 0.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 291,347.72
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 28,118.77
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 9,445.38
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		Mr. S	stephen M. Hubert	
			Candidate or Officehold	ler
AFFIX NO	TARY STAMP / SEAL ABO	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			3	of 45
18 FILER NAM Hubert, S	ME tephen M. (Mr.)	19 Filer ID 00087395	(Ethics Commission Fi	lers)
	E SUBTOTALS SCHEDULE		SUBTOTAL AMO	UNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 13	,125.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 278	,222.72
3.		\$		
4. X	\$	0.00		
5. X	\$ 27	,605.88		
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	512.89
10.	\$			
11.	DNS	\$		
12.	RETURNED	\$		
			•	

	MONET	ARY POLITICAL CONTRIE	BUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complet	te this for	m.	1	Total pages Schedule A1: Sch: 1/9 Rpt: 4/45	
2	FILER NAME Hubert, Step	hen M. (Mr.)			3	Filer ID (Ethics Commission 00087395	n Filers)
4	Date 01/29/2024	 Full name of contributor out-of-state in anthony, Forrest (Mr.) Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$200.00
8	Principal occu	Spring, TX 77382 pation / Job title (See Instructions)	9	Employer (See Instructions	 - s)		
	Retired			Retired			
	Date 01/30/2024	Full name of contributor out-of-state for Cheney, Tommy (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Conroe, TX 77384					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 02/03/2024	Full name of contributor out-of-state F Coons, Jay (Mr.) Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$100.00
		The Woodlands, TX 77381					
		pation / Job title (See Instructions) sor of Practice		Employer (See Instructions Sam Houston State Unit		sity	
	Date 02/01/2024	Full name of contributor out-of-state in Crawford, Dustin (Mr.) Contributor address; City; State; Zip Code Conroe, TX 77304				Amount of Contribution (\$)	\$500.00
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions Union Pacific Railroad	5)		
	Date 02/06/2024	Full name of contributor out-of-state in Deretchin, Joel (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77380	PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	s)		
			'				

	MONET	ARY POLITICAL CONTRI	BUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to comple	ete this forn	n.	1	Total pages Schedule A1: Sch: 2/9 Rpt: 5/45	
2	FILER NAME Hubert, Step	hen M. (Mr.)			3	Filer ID (Ethics Commission 00087395	on Filers)
4	Date 01/27/2024	 Full name of contributor out-of-state out-of-state)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Conroe, TX 77385 pation / Job title (See Instructions)	9	Employer (See Instructions	.) 		
Ū	Research So			College Board	')		
	Date 02/18/2024	Full name of contributor out-of-state Fox, Robin (Mrs.) Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$250.00
	Principal occu	Spring, TX 77382 pation / Job title (See Instructions)		Employer (See Instructions			
	Retired	pation / Job title (See instructions)		Retired	')		
	Date 02/04/2024	Full name of contributor out-of-state Gain, Michael (Mr.) Contributor address; City; State; Zip Code	e PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Spring, TX 77382					
	Principal occu VP	pation / Job title (See Instructions)		Employer (See Instructions Entergy	i)		
	Date 02/10/2024	Garner, Phillip (Mr.)				Amount of Contribution (\$)	\$2,000.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
	Date 02/14/2024	Full name of contributor out-of-state Goin, Jennifer (Mrs.) Contributor address; City; State; Zip Code Spring, TX 77382	PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
			•				

	MONEI	A	RY POLITICAL C	ONTRIBUTIO	יוכ	NS		SCHEDUL	E A1
	The Instru	ctio	on Guide explains how	to complete this f	or	m.	1	Total pages Schedule A1: Sch: 3/9 Rpt: 6/45	
2	FILER NAME		a M. (Mr.)				3	Filer ID (Ethics Commission 00087395	n Filers)
	Hubert, Step	_					L		
4	Date 02/06/2024	<u> </u>	Full name of contributor Harris, Jeff (Mr.)	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$250.00
		6	Contributor address; City; Sta	ate; Zip Code					
			Spring, TX 77381		_				
8	Principal occu	ıpati	on / Job title (See Instructions))	9	Employer (See Instructions	s)		
	Treasurer					Compassion United			
	Date		Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	01/29/2024		Hauser, Daniel (Mr.)	–		·		,	\$500.00
		ļ	Contributor address; City; Sta	ata: 7in Coda			ł		,
			Continuator address, City, Su	ate, 21p Code					
			The Woodlands, TX 77380)					
	Principal occu	ı ıpati	on / Job title (See Instructions)		Г	Employer (See Instructions	<u>L</u> S)		
	Retired		(Retired	,		
_	Date	Т	Full name of contributor	out-of-state PAC (ID#:_	<u> </u>		Г	Amount of Contribution (\$)	
	01/31/2024		Head, Linda (Mrs.)	out of state 1710 (ibii		<i></i>		7 mileant of Continuation (4)	\$250.00
	01,01,101	ļ	Contributor address; City; Sta	ate: Zin Code			ł		+200.00
			Continuator address, City, St	ate, Zip Code					
			Spring, TX 77381						
	Principal occu	ı ıpati	on / Job title (See Instructions))	Г	Employer (See Instructions	<u>L</u> 3)		
	Exec					Lone Star College	,		
_	Data	Т	Full name of contributor	David of state DAC (ID)	_		Г	Amount of Contribution (\$)	
	Date 02/14/2024			out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$500.00
	02/14/2024	ļ	Hubert, Martin (Mrs.)						\$500.00
			Contributor address; City; Sta	ate; Zip Code					
			Austin, TX 78703						
	Principal occu	ı ıpati	on / Job title (See Instructions))	Г	Employer (See Instructions	<u>L</u> 3)		
	Principal		,			Cornerstone Governme		Affairs	
_	Date	Т	Full name of contributor	out-of-state PAC (ID#:	<u> </u>		Г	Amount of Contribution (\$)	
	01/29/2024		Jakovac, Rich	U out-oi-state PAC (ID#)		Amount of Contribution (\$)	\$100.00
	01/29/2024	ļ							\$100.00
			Contributor address; City; Sta	ate; Zip Code					
			Tomball, TX 77375						
	Principal occu	l Ipati	on / Job title (See Instructions))		Employer (See Instructions	<u>L</u>		
	Retired	اعمم.	300 and (200 mondonolo)	,		Retired	-,		
_					<u> </u>				

	MONET	ARY POLITICAL CONTRIBUTION	ON	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 4/9 Rpt: 7/45	
2	FILER NAME Hubert, Step	hen M. (Mr.)			3	Filer ID (Ethics Commission 00087395	n Filers)
4	Date 01/30/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$500.00
8		The Woodlands, TX 77380 pation / Job title (See Instructions)	9	Employer (See Instructions) S)		
	Date 02/16/2024	Full name of contributor out-of-state PAC (ID# Kendall, Cythia (Mrs.) Contributor address; City; State; Zip Code Spring, TX 77382		Retired		Amount of Contribution (\$)	\$250.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u>l</u> S)		
	Date 02/17/2024	Full name of contributor out-of-state PAC (ID# Languell, C Contributor address; City; State; Zip Code	t:)	•	Amount of Contribution (\$)	\$100.00
	Principal occu	Houston, TX 77061 pation / Job title (See Instructions)		Employer (See Instructions	 s)		
	Pilot	·		SWA			
	Date 02/01/2024	Contributor address; City; State; Zip Code)	-	Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u> </u> s)		
	Date 01/29/2024	Full name of contributor out-of-state PAC (ID# Lisiewski Esq., Walter (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77381	t:)		Amount of Contribution (\$)	\$100.00
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions WJL Consultancy LLC	s)		

	MONET	ARY POLITICAL C	CONTRIBUTION			SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 5/9 Rpt: 8/45	
2	FILER NAME Hubert, Step	hen M. (Mr.)			3	Filer ID (Ethics Commission 00087395	n Filers)
4	Date 01/29/2024	5 Full name of contributor Lowe, Zachary (Mr.)6 Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code		7	Amount of Contribution (\$)	\$500.00
		The Woodlands, TX 77381					
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions Retired	s)		
	Date 01/29/2024	Full name of contributor Lux, Robert (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code)		Amount of Contribution (\$)	\$125.00
	Principal occu	The Woodlands, TX 77381 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Finance Con			Next Generation Ventur		onsulting	
	Date 02/23/2024	Full name of contributor Mabry, Mary (Mrs.) Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$100.00
		The Woodlands, TX 77381					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	s)		
	Date 01/30/2024	Full name of contributor Myers, Suellen (Mrs.) Contributor address; City; Sta The Woodlands, TX 77381	ate; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	s)		
	Date 01/29/2024	Full name of contributor Norton, David (Mr.) Contributor address; City; Sta The Woodlands, TX 77381	·			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	s)		
			1				

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 6/9 Rpt: 9/45	
2	FILER NAME	ohen M. (Mr.)		3	Filer ID (Ethics Commission 00087395	on Filers)
4	Date 02/21/2024	Full name of contributor		7	Amount of Contribution (\$)	\$250.00
		Conroe, TX 77384				
8	Principal occu Marketing M	'	Employer (See Instructions Repair One Auto	s)		
	Date 02/16/2024	Full name of contributor)	•	Amount of Contribution (\$)	\$100.00
	Deinsinal	Conroe, TX 77385	Familia var (Can Instructions	<u></u>		
	Construction	pation / Job title (See Instructions)	Employer (See Instructions Hoggatt LP	5)		
	Date 01/29/2024	Full name of contributor out-of-state PAC (ID#: Perez, Joseph (Mr.) Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$2,500.00
		The Woodlands, TX 77381				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date 01/29/2024	Full name of contributor out-of-state PAC (ID#: Powers, John K (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77381)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date 02/12/2024	Full name of contributor out-of-state PAC (ID#: Reese, Harry (Mr.) Contributor address; City; State; Zip Code Canton, TX 75103			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions			
	Ciliulett's D	II ECILOI	Ovilla Road Baptist Chu	U		

	MONET	ARY POLITICAL CONTRIBUTION	ΝC	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 7/9 Rpt: 10/45	
2	FILER NAME Hubert, Step	hen M. (Mr.)			3	Filer ID (Ethics Commission 00087395	n Filers)
4	Date 02/22/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
_	Deinsinal assu	Spring, TX 77381	٦,				
8		pation / Job title (See Instructions) mercial Advisor	9	Employer (See Instructions Oxy	5)		
	Date 02/04/2024	Full name of contributor out-of-state PAC (ID#: Seefeldt, Patricia (Mrs.) Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00
	<u> </u>	The Woodlands, TX 77381			<u></u>		
				Employer (See Instructions Woodforest Financial Se		ces	
	Date 01/30/2024	Full name of contributor out-of-state PAC (ID#: Sorenson, Nick (Mr.) Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
		New Caney, TX 77357	_				
	Attorney	pation / Job title (See Instructions)		Employer (See Instructions Porter Hedges LLP	5)		
	Date 01/29/2024	Full name of contributor out-of-state PAC (ID#: Srikowskid, Ron (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77385)		Amount of Contribution (\$)	\$250.00
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions Quest Engineering	s)		
	Date 01/29/2024	Full name of contributor out-of-state PAC (ID#: Sutton, Alex (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77380)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	s)		
			•				

	MONET	ARY POLITICAL CONTRIBU	JTION	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how to complete t	his forr	n.	1	Total pages Schedule A1: Sch: 8/9 Rpt: 11/45	
2	FILER NAME Hubert, Step	hen M. (Mr.)			3	Filer ID (Ethics Commission 00087395	on Filers)
4	Date 01/29/2024	 5 Full name of contributor out-of-state PAC Trapp, Amanda (Mrs.) 6 Contributor address; City; State; Zip Code 	-)	7	Amount of Contribution (\$)	\$100.00
8	Principal occu	The Woodlands, TX 77382 pation / Job title (See Instructions)	la	Employer (See Instructions	-/- 		
_	Attorney	pation 7 Job title (See Instructions)		StibbsCo.	·)		
	Date 02/10/2024	Full name of contributor out-of-state PAC Tweed, Edward Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
	Dringing agg	Conroe, TX 77384		Employer (See Instructions	<u>''</u>		
	Business ow	pation / Job title (See Instructions) ner		Employer (See Instructions Letter Ride	5)		
	Date 02/10/2024	Full name of contributor out-of-state PAC Walker, Suzy (Mrs.) Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$50.00
		Spring, TX 77380					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 01/29/2024	Full name of contributor out-of-state PAC West, Waylan (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77381	-)		Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 02/14/2024	Full name of contributor out-of-state PAC Wholesale Beer Distributors of Texas Contributor address; City; State; Zip Code Austin, TX 78701	C (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL CONTRIBUTION	IS		SCHEDULE A1	
	The Instru	ction Guide explains how to complete this	m.	1	Total pages Schedule A1: Sch: 9/9 Rpt: 12/45	
2	FILER NAME Hubert, Step	ohen M. (Mr.)	3	Filer ID (Ethics Commission Filers) 00087395		
4	Date 01/29/2024 5 Full name of contributor out-of-state PAC (ID#:) Wolfthal, Leah (Mrs.) 6 Contributor address; City; State; Zip Code				7	Amount of Contribution (\$) \$100.00
8	Principal occu	Houston, TX 77096 upation / Job title (See Instructions)	9	Employer (See Instructions City of Houston	S)	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/8 Rpt: 13/45				
2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
Hubert, Step	ohen M. (Mr.)		00087395			
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$			
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution			
02/12/2024	Associated Republicans of Texas Campaign Fu	nd	contribution (\$) description \$13,849.65 Mailer			
	7 Contributor address; City; State; Zip Code		I			
	Aughin TV 70701					
10 Drive in all acco	Austin, TX 78701	14 F	Check if travel outside of Texas. Complete Schedule T.			
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)			
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)			
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution			
02/12/2024	Associated Republicans of Texas Campaign Fu	nd	contribution (\$) description \$2,459.88 Text Messaging			
	Contributor address; City; State; Zip Code		φ ₂ ,459.661 Text Messaging			
	:		_			
5: : .	Austin, TX 78701	T = 1 (505,110)	Check if travel outside of Texas. Complete Schedule T.			
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)			
Continuators	principal occupation (FOR JODICIAL)	Contributor's job title	(FOR JODICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
Contributors	employemaw iiiii (i Ok 00510ii/L)	Law iiiii oi contiibat	or a spouse (if any) (if or the blowne)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
ii continuator	is a sima, have mini or parent(e) (ii any) (i en section te)					
Date	Full name of contributor Quit-of-state PAC (ID#:		Amount of ! In-kind contribution			
02/12/2024	Full name of contributor out-of-state PAC (ID#: Associated Republicans of Texas Campaign Ful		contribution (\$) description			
02/12/2021	Contributor address; City; State; Zip Code		\$29,151.60 Digital Advertising			
	Continuator address, City, State, 21p code		į į			
	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule T.			
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON				
Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions)						
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
If contributor	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 2/8 Rpt: 14/45 3 Filer ID (Ethics Commission Filers) FILER NAME Hubert, Stephen M. (Mr.) 00087395 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution Date out-of-state PAC (ID#: Amount of contribution (\$) description 02/12/2024 Associated Republicans of Texas Campaign Fund \$16,867.50 Mailer 7 Contributor address; City; State; Zip Code Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) description 02/12/2024 Associated Republicans of Texas Campaign Fund \$80,075.00 Television Advertising Contributor address; City; State; Zip Code Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Full name of contributor In-kind contribution Date Amount of out-of-state PAC (ID#: contribution (\$) description 02/12/2024 Associated Republicans of Texas Campaign Fund \$13,500.00 i Polling Contributor address; City; State; Zip Code Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's employer/law firm (FOR JUDICIAL)

(See instructions)

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 3/8 Rpt: 15/45 3 Filer ID (Ethics Commission Filers) FILER NAME Hubert, Stephen M. (Mr.) 00087395 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution Date out-of-state PAC (ID#: Amount of contribution (\$) description 02/08/2024 Associated Republicans of Texas Campaign Fund \$8,000.00 Video Production 7 Contributor address; City; State; Zip Code Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) description 01/29/2024 Associated Republicans of Texas Campaign Fund \$14,618.40 | Mailer Contributor address; City; State; Zip Code Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor In-kind contribution Amount of out-of-state PAC (ID#: contribution (\$) description 02/05/2024 Associated Republicans of Texas Campaign Fund

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

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The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 4/8 Rpt: 16/45			
2 FILER NAME Hubert, Step	ohen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395			
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
5 Date 02/22/2024	7 Contributor address; City; State; Zip Code	8 Amount of contribution (\$) description \$500.00 Opposition Research			
10 Principal occu	Austin, TX 78701 upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. I-JUDICIAL) (See instructions)		
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)		
	p.mo.pa. cocapation (Control 2.00 in 2)		((((((((((((((((((((
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	L			
Date Full name of contributor out-of-state PAC (ID#:		nd	Amount of In-kind contribution contribution (\$) description \$2,272.41 Text Messaging		
	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule T.		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)		
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 02/22/2024	Full name of contributor out-of-state PAC (ID#: Associated Republicans of Texas Campaign Full Contributor address; City; State; Zip Code Austin, TX 78701	nd	Amount of In-kind contribution contribution (\$) description \$12,777.82 Mailer		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. I-JUDICIAL) (See instructions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributor's	Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL)				
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u>I</u>			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

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The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A2: Sch: 5/8 Rpt: 17/45		
2 FILER NAME	<u> </u>	3 Filer ID (Ethics Commission Filers)			
Hubert, Step	phen M. (Mr.)		00087395		
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution		
02/22/2024	Associated Republicans of Texas Campaign Fu	nd	contribution (\$) description		
	7 Contributor address; City; State; Zip Code		\$12,777.82 Mailer		
	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule T.		
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	N-JUDICIAL) (See instructions)		
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of ! In-kind contribution		
02/22/2024	Associated Republicans of Texas Campaign Fu	nd	contribution (\$) description		
	Contributor address; City; State; Zip Code		\$12,777.82 Mailer		
			į į		
			į		
	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule T.		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution		
02/22/2024	Associated Republicans of Texas Campaign Fu	nd	contribution (\$) description		
	Contributor address; City; State; Zip Code		\$12,777.82 Mailer		
			<u> </u>		
			į į		
	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule T.		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	N-JUDICIAL) (See instructions)		
Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•			

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 6/8 Rpt: 18/45 3 Filer ID (Ethics Commission Filers) FILER NAME Hubert, Stephen M. (Mr.) 00087395 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution Date out-of-state PAC (ID#: Amount of contribution (\$) description 02/20/2024 Associated Republicans of Texas Campaign Fund \$8,558.96 i Mailer 7 Contributor address; City; State; Zip Code Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) description 02/20/2024 Associated Republicans of Texas Campaign Fund \$8,558.96 | Mailer Contributor address; City; State; Zip Code Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL)

Forms provided by Texas Ethics Commission

Date

02/20/2024

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Contributor address; City; State; Zip Code

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

out-of-state PAC (ID#:

Associated Republicans of Texas Campaign Fund

Full name of contributor

Austin, TX 78701

Contributor's principal occupation (FOR JUDICIAL)

Contributor's employer/law firm (FOR JUDICIAL)

www.ethics.state.tx.us

Version V3.5.1.9000c47

In-kind contribution

description

Check if travel outside of Texas. Complete Schedule T.

(See instructions)

(See instructions)

Amount of

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

Employer (FOR NON-JUDICIAL)

Contributor's job title (FOR JUDICIAL)

contribution (\$)

\$8,558.96 | Mailer

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 7/8 Rpt: 19/45
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Hubert, Ster	ohen M. (Mr.)		00087395
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 02/06/2024	 Full name of contributor out-of-state PAC (ID#:	8 Amount of solution (\$) In-kind contribution contribution (\$) description \$500.00 Event Hosting	
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	
Retired		Retired	,
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 contribute	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
16 ii contributor	is a crilid, law littii of parefil(s) (if any) (FOR JUDICIAL)		
Date 01/31/2024	Full name of contributor out-of-state PAC (ID#: King, Hailey (Ms.) Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$500.00 Record Keeping
	Conroe, TX 77385		
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
Student		Student	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 02/24/2024	Full name of contributor out-of-state PAC (ID#: King, Hailey (Ms.) Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$500.00 Record Keeping
	Conroe, TX 77385		Check if travel outside of Texas. Complete Schedule T.
Principal occu Student	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON Student	I-JUDICIAL) (See instructions)
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 8/8 Rpt: 20/45			
2 FILER NAME Hubert, Step	bhen M. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087395			
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
5 Date 01/31/2024	 6 Full name of contributor out-of-state PAC (ID#:	8 Amount of solution (\$) In-kind contribution (\$) description \$2,500.00 Social Media Management			
	Conroe, TX 77384		Check if travel outside of Texas. Complete Schedule T.		
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)		
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 02/24/2024)	Amount of In-kind contribution contribution (\$) description \$2,500.00 Social Media Management		
	Conroe, TX 77384				
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 01/29/2024	Full name of contributor out-of-state PAC (ID#: The Blair Law Firm PC Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$645.28 Event Hosting		
<u> </u>	The Woodlands, TX 77380	T = / (500 NO)	Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions)					
Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

	LOANS					SCHED	OULE E
	The Instruction Guide explains how to complete this fo			orm.	1 Total pages Schedule E: Sch: 1/1 Rpt: 21/45		
	FILER NAME Hubert, Stephen	ı M. (Mr.)			3 Filer ID 00087	(Ethics Commissi	on Filers)
4	TOTAL OF UN	IITEMIZED LOANS			'	\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount ((\$)
	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instruct	ons)		
14	Description of Coll None	ateral		15 Check if personal funds	were deposite	d into political accou (See Instructio	
	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guara	nteed (\$)
	not applicable	18 Guarantor address; City;	State;	Zip Code			
20	Principal occupation	I on		21 Employer (See Instruct	ons)	.1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/23 Rpt: 22/45	Hubert, Stephen M. (Mr.) 00087395
4	Date	5 Payee name
	02/15/2024	7 Eleven
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6.47	11209 E Highway 290
		Manor, TX 78653
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Fuel for Austin trip
		r doritor / dottin trip
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Dougo nomo
		Payee name
	02/15/2024	ART Station Vehicle
	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	25003 Pitkin Rd.
		Spring, TX 77386
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense
		Vehicle Wraps
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
_	_	
	Date	Payee name
	02/11/2024	ART Station Vehicle
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,550.00	25003 Pitkin Rd.
		Spring, TX 77386
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Advertising
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		
L		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 2/23 Rpt: 23/45	Hubert, Stephen M. (Mr.) 00087395
4 Date	5 Payee name
01/27/2024	Anedot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1.30	920 McKinney Ave 7th floor
	Dallas, TX 75201
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Online Donation Fee
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/O	
Date	Payee name
01/29/2024	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$4.30	920 McKinney Ave 7th floor
	Dallas, TX 75201
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Online Donation Collection Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/O	
Date	Payee name
01/29/2024	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$4.30	920 McKinney Ave 7th floor
	Dallas, TX 75201
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
LAI LINDITORE	Check if Austin, TX, officeholder living expense
	Online Donation Collection Fees
Operation Children	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla		kpense /ages/Contract Labor	Travel in Distr Travel Out of OTHER (ente	
1	Total pages Schedule F1:	2 FILER NAM	1E			3 Filer ID	(Ethics Commission Filers)
	Sch: 3/23 Rpt: 24/45	Hubert, St	ephen M. (Mr.)			00087395	5
4	Date	5 Payee nam	e			•	
	01/30/2024	Anedot					
6	Amount (\$)	7 Payee addr	ess; City; St	ate; Zip Co	de		
	\$20.30	920 McKir	nney Ave 7th floor				
		Dallas, TX	75201				
8	PURPOSE	(a) Category	See Categories listed at the top of this	s schedule)	(b) Description		
	OF EXPENDITURE	Accountin	g/Banking			outside of Texas. Co	
					ш	i, TX, officeholder liv	
9	Complete ONLY if direct		fficeholder name	Office sou	ght	Office	held
	expenditure to benefit C/OI	 					
	Date	Payee nam	e				
	01/30/2024	Anedot					
	Amount (\$)	Payee addr	ress; City; St	ate; Zip Co	de		
	\$1.30	920 McKir	nney Ave 7th floor				
		Dallas, TX	75201				
	PURPOSE	(a) Category	See Categories listed at the top of this	s schedule)	(b) Description		
	OF EXPENDITURE	Accountin	g/Banking		<u> </u>	outside of Texas. Co , TX, officeholder liv	
					ш	tion Collection	
Complete ONLY if direct Candidate/Officeholder name Office so				Office sou	ght	Office	held
	expenditure to benefit C/OI	4					
	Date	Payee nam	e				
	01/30/2024	Anedot					
	Amount (\$)	Payee addr	ess; City; St	ate; Zip Co	de		
	\$4.30	920 McKir	nney Ave 7th floor				
		Dallas, TX	75201				
	PURPOSE	(a) Category	See Categories listed at the top of this	s schedule)	(b) Description		
	OF EXPENDITURE	Accountin	g/Banking			outside of Texas. Co , TX, officeholder liv	
						tion Collection	
					Donat	50501101	-
	Complete ONLY if direct	Candidate/O	fficeholder name	Office sou	ght	Office	held
	expenditure to benefit C/OI	4					

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 4/23 Rpt: 25/45 Hubert, Stephen M. (Mr.) 00087395 4 Date Payee name 01/31/2024 Anedot 6 Amount (\$) Payee address; City; State; Zip Code \$10.30 920 McKinney Ave 7th floor Dallas, TX 75201 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Donation Collection Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/01/2024 Anedot Amount (\$) Payee address; City; State; Zip Code \$24.60 920 McKinney Ave 7th floor Dallas, TX 75201 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Donation Collection Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/03/2024 Anedot Amount (\$) Payee address; City: State; Zip Code \$4.30 920 McKinney Ave 7th floor Dallas, TX 75201 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Donation Collection Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/23 Rpt: 26/45	Hubert, Stephen M. (Mr.) 00087395
4	Date	5 Payee name
	02/04/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1.30	920 McKinney Ave 7th floor
		Dallas, TX 75201
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Online Donation Collection Fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/10/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$102.20	920 McKinney Ave 7th floor
		Dallas, TX 75201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Online Donation Collection Fees
		Chimic Behaueri Concoderi i coc
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	02/12/2024	Anedot
_	Amount (\$)	Payee address; City; State; Zip Code
	\$4.30	920 McKinney Ave 7th floor
	Φ4.30	520 Michinies Ave 7th nooi
		Dallas, TX 75201
\vdash	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Online Donation Collection Fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Polit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	Salaries	/Wage	es/Contract Labor		OTHER (enter a	category not listed abov	re)
				The Instruction Guid	de explains how to o	ompl	lete this form.	_			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commissio	n Filers)
	Sch: 6/23 Rpt: 27/45		Hubert, Step	ohen M. (Mr.)					00087395		
4	Date	5	Payee name								
	02/14/2024		Anedot								
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip C	Code					
	\$1.30		920 McKinn	ey Ave 7th floor							
			Dallas, TX 7	5201							
8	PURPOSE	(a)				(b)	Description				
ľ	OF	(")	Accounting/	e Categories listed at the	top of this schedule)	(5)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Accounting	Danking					officeholder living		
							Online Donat	ion	Collection I	=ees	
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Office so	ught			Office h	eld	
	expenditure to benefit C/OI	Н									
	Date		Payee name								
	02/16/2024		Anedot								
	Amount (\$)	H	Payee addres	ss; City;	State; Zip C	Code					
	\$14.60		920 McKinn	ey Ave 7th floor							
				,							
			Dallas, TX 7	5201							
	DUDDOCE	(-)				//->	\ _ · · ·				
	PURPOSE OF	(a)		e Categories listed at the	top of this schedule)	(0)	Description Check if travel (nutei	de of Teyes Com	iplete Schedule T.	
	EXPENDITURE		Accounting/	вапкing			<u> </u>		officeholder living		
							Online Donat				
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office so	ught			Office h	eld	
	expenditure to benefit C/OI	Н									
	Date		Payee name								
	02/17/2024		Anedot								
	Amount (\$)		Payee addres	ss; City;	State; Zip C	Code					
	\$4.30		•	ey Ave 7th floor	, ,						
	¥55		0_00	0,7.10.1.1.1.100.							
			Dallas, TX 7	5201							
	BUBBOOF	(-)				(1-)					
	PURPOSE OF	(a)		e Categories listed at the	top of this schedule)	(a)	Description Check if travel (nutsi	de of Texas, Com	iplete Schedule T.	
	EXPENDITURE		Accounting/	Banking					officeholder living		
							Online Donat				
	Complete ONLY if direct		 Candidate/Offic	ceholder name	Office so	ught	·		Office h	eld	
	expenditure to benefit C/OI					-					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/23 Rpt: 28/45	Hubert, Stephen M. (Mr.) 00087395
4	Date	5 Payee name
	02/18/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.30	920 McKinney Ave 7th floor
		Dallas, TX 75201
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Online Donation Collection Fees
		Offiline Boriation Collection (Ces
_	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/21/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.30	920 McKinney Ave 7th floor
		Dallas, TX 75201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Donation Collection Fees
		Bollation Concotton 1 ccs
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/22/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.30	920 McKinney Ave 7th floor
		Dallas, TX 75201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Donation Collection Fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onponantino to benefit 6/01	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide 6	Salaries/\	Nages	/Contract Labor		OTHER (enter a	category not listed ab	ove)
1	Total pages Schedule F1:	2 FILER NAM	 E				3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 8/23 Rpt: 29/45	1	ephen M. (Mr.)					00087395	•	,
4	Date	5 Payee name)							
	02/23/2024	Anedot								
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode					
	\$4.30	920 McKin	ney Ave 7th floor							
		Dallas, TX	75201							
8	PURPOSE	(a) Category (s	See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Accounting	/Banking			므		de of Texas. Com		
						Donation Col		officeholder living	expense	
						Donation Co.	100	1101111 000		
9	Complete ONLY if direct expenditure to benefit C/Ol		ficeholder name	Office sou	<u>l</u> ıght			Office he	eld	
	Date	Payee name								
	01/29/2024	Baker, Am								
		·		Ot-t-: 7:- 0:						
	Amount (\$)	Payee addre		State; Zip Co	oue					
	\$100.00	8754 Stone	ey Brook Lane							
		Magnolia, ⁻	ΓX 77354							
	PURPOSE	(a) Category (S	See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Salaries/W	ages/Contract Labor			=		de of Texas. Com		
						_		officeholder living	expense	
						Campaign W	UIK	•		
	Complete ONL V if direct	Candidate/Of	ficeholder name	Office cou	ıabt			Office he	ald.	
	Complete ONLY if direct expenditure to benefit C/OI		icenoider name	Office sou	igni			Office ne	eiu	
	Date	Payee name)							
	02/20/2024	Baker, Am	ee (Mrs.)							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$100.00	8754 Stone	ey Brook Lane							
		Magnolia, [.]	ΓX 77354							
	PURPOSE	(a) Category (S	See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Salaries/W	ages/Contract Labor					de of Texas. Com		
	2/11/2/10/12							officeholder living	expense	
						Campaign W	OIK			
	Commission Chill V. V. II	000000000000000000000000000000000000000	Saabalda: :	Ott:				O#: 1	اما	
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	ignt			Office he	eiu	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Leg	e Instruction Guide explains		ages/Contract La		OTHER (enter	a category not listed above)	
_	Total marca Cabadula F1.						Files ID	/Ethias Commission File	.ro\
1	Total pages Schedule F1: Sch: 9/23 Rpt: 30/45	Hubert, Stephe	on M. (Mr.)			3	Filer ID 00087395	(Ethics Commission File	ris)
_	•		=11 IVI. (IVII.)				00007393		
4	Date	5 Payee name							
	02/12/2024	Baker, Amee (Mrs.)						
6	Amount (\$)	7 Payee address;	•	e; Zip Co	de				
	\$100.00	8754 Stoney E	Brook Lane						
		Magnolia, TX	77354						
8	PURPOSE	(a) Category (See C	ategories listed at the top of this scl	hedule)	(b) Descript	tion			
	OF EXPENDITURE		es/Contract Labor				side of Texas. Co	mplete Schedule T.	
	EXPENDITORE	_					X, officeholder livir	ng expense	
					Campa	ign Wor	'k		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	nolder name	Office sou	ght		Office h	neld	
	experialitate to beliefit 6/01	!							
	Date	Payee name							
	02/05/2024	Baker, Amee (Mrs.)						
	Amount (\$)	Payee address;	City; State	e; Zip Co	de				
	\$100.00	8754 Stoney E	Brook Lane						
		Magnolia, TX	77354						
	PURPOSE	(a) Category (See C	ategories listed at the top of this scl	hedule)	(b) Descript	tion			
	OF		es/Contract Labor	neddie)	_		side of Texas. Co	mplete Schedule T.	
	EXPENDITURE	3			Check	if Austin, T	X, officeholder livir	ng expense	
					Campa	ign Wor	k		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Office	nolder name	Office sou	ght		Office h	neld	
	experientare to benefit Great								
	Date	Payee name							
	01/29/2024	Brown, Rache	l (Mrs.)						
	Amount (\$)	Payee address;	City; State	e; Zip Co	de				
	\$144.34	147 Country C	rossing Circle						
		Magnolia, TX	77354						
	PURPOSE	(a) Category (See C	ategories listed at the top of this scl	hedule)	(b) Descript	tion			
	OF EXPENDITURE		s/Contract Labor					mplete Schedule T.	
	LAFENDITORE						X, officeholder livir	ng expense	
					Campa	ign Wor	K		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeh	nolder name	Office sou	ght		Office h	neld	
	Onditale to belief Of Of	-							

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/23 Rpt: 31/45	Hubert, Stephen M. (Mr.) 00087395
4	Date	5 Payee name
	02/05/2024	Brown, Rachel (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	147 Country Crossing Circle
		Magnolia, TX 77354
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Work
		Campaign Work
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
٠	expenditure to benefit C/OI	
	Date	Payee name
	01/29/2024	Brown, Samuel (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	147 Country Crossing Circle
	Ψ100.00	147 Country Crossing Circle
		Magnolia, TX 77354
	DUDDOCE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Work
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/12/2024	Brown, Samuel (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	147 Country Crossing Circle
		Magnolia, TX 77354
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Work
		Campaign Work
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/23 Rpt: 32/45	Hubert, Stephen M. (Mr.) 00087395
4	Date	5 Payee name
	02/15/2024	Capitol Cafe
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$12.83	1001 Congress Ave
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food for Meetings
		i sau ioi maamiga
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
⊨	Date	Davies same
	02/19/2024	Payee name Church's Chicken
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.83	19153 IH-45
		Shenandoah, TX 77385
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Food for Workers
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	02/03/2024	Circle K
	Amount (\$)	Payee address; City; State; Zip Code
	\$11.00	172 FM 1488
		Conroe, TX 77384
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Food for meetings
L		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experience to beliefft G/O	·

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category not listed above)

Candidate/Officenoider/Politic	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 12/23 Rpt: 33/45	Hubert, Stephen M. (Mr.) 00087395
4 Date	5 Payee name
02/03/2024	Circle K
6 Amount (\$) \$74.72	7 Payee address; City; State; Zip Code 172 FM 1488 Conroe, TX 77384
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas for Meetings (Austin)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held OH
Date	Payee name
02/11/2024	Circle K
Amount (\$) \$74.59	Payee address; City; State; Zip Code 172 FM 1488 Conroe, TX 77384
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas for Blockwalking
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held OH
Date	Payee name
02/01/2024	Community Impact
Amount (\$) \$10,926.00	Payee address; City; State; Zip Code 9601 Jones Rd
	Houston, TX 77065
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Media Expense
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held OH

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card Payment	The Instruction Guide explains how to comp	nplete	this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 13/23 Rpt: 34/45	Hubert, Stephen M. (Mr.)		00087395
4	Date	5 Payee name		
	01/31/2024	Cutler, James (Mr.)		
6	Amount (\$)	7 Payee address; City; State; Zip Code	de	
	\$100.00	48 Wisteria Walk Circle		
		TI W II I TV 77000		
		The Woodlands, TX 77382		
8	PURPOSE OF	,	(b) D∈	escription Theck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor	E	Check if Austin, TX, officeholder living expense
			C	ampaign Work
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sough	ght	Office held
L				
	Date	Payee name		
	02/06/2024	Cutler, James (Mr.)		
	Amount (\$)	Payee address; City; State; Zip Code	de	
	\$100.00	48 Wisteria Walk Circle		
		The Woodlands, TX 77382		
	PURPOSE	T	(h) D	
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(D) D(escription Theck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Soritraet Eabor		Check if Austin, TX, officeholder living expense
			C	ampaign Work
	Operation ONLY if direct	Out distant (Office Institute of Control of	.1-4	Office held
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sough	gnt	Office held
H	Data			
	Date 02/06/2024	Payee name Emanuel, Emanuella (Mrs.)		
	Amount (\$)	Payee address; City; State; Zip Code	de a	
	\$80.00	14018 Chinook Drive	ac .	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		Conroe, TX 77384		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De	escription
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE			Check if Austin, TX, officeholder living expense
			C	ampaign Work
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sough	nht	Office held
	expenditure to benefit C/O		y···	Since note
ı				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment		ges/Contract Labor OTHER (enter a category not listed above)
	<u>'</u>	·
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 14/23 Rpt: 35/45	Hubert, Stephen M. (Mr.)	00087395
4 Date	5 Payee name	<u>.</u>
02/10/2024	Family Promise Gala	
6 Amount (\$)	7 Payee address; City; State; Zip Cod	е
\$303.75	109 Comercial Circle	
	Conroe, TX 77304	
8 PURPOSE	(a) Catagony	b) Description
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
	Canadate/Onicendiaen/ Onitical Committee	Tickets and Donation
Complete ONLY if direct	Condidate/Officeholder name Office cours	ot Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht Office held
Date	Payee name	
02/15/2024	Farrell Gjesdal Strategy Group	
Amount (\$)	Payee address; City; State; Zip Cod	e
\$6,617.96	4040 Hwy 6, Suite 200	
Ψ0,017.00	10 10 1111) 0, 04110 200	
	College Station, TX 77845	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Political Consulting
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/O	7	
Date	Payee name	
02/12/2024	Girl Scouts	
		_
Amount (\$)	Payee address; City; State; Zip Cod	e
\$72.00	2412 Chantilly Lane	
	Conroe, TX 77384	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	T dod/20vorage Expense	Check if Austin, TX, officeholder living expense
		Cookies for Poll Workers
Complete ONLY if direct	Candidate/Officeholder name Office soug	nt Office held
expenditure to benefit C/O		223.130

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	EII ER NAMI	· · · · · · · · · · · · · · · · · · ·					3	-iler ID	(Ethics Comn	nission Filers)	
_	Sch: 15/23 Rpt: 36/45			- phen M. (Mr.)						00087395	(Ethios Conni	110010111 11010)	
_	-	Ļ											
4	Date	5	Payee name										
	01/29/2024	L	Gunnell, Ja										
6	Amount (\$)	7	,		State	e; Zip Co	de						
	\$100.00		213 Dove N	/leadow Dr.									
			Conroe, TX	77384									
8	PURPOSE	(a)	Category (S	ee Categories listed	at the top of this so	chedule)	(b)	Description					
	OF EXPENDITURE			ages/Contract		ŕ		Check if travel or	utside	e of Texas. Com	plete Schedule T.		
	EXI ENDITORE							Check if Austin,		fficeholder living	g expense		
								Campaign Wo	ork				
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	iceholder name		Office sou	ght			Office h	eld		
	Date		Payee name										
	02/16/2024		HBA Parkir	ng									
	Amount (\$)	H	Payee addre	ss; City;	State	e; Zip Co	de						
	\$21.00		910 Bravos	St.									
			Austin, TX	78701									
	PURPOSE	(a)	Category (S	ee Categories listed	at the top of this so	chedule)	(b)	Description					
	OF EXPENDITURE		Travel Out	of District				—			plete Schedule T.		
								Check if Austin, Parking for Ca					
								r arking for Ge	хріц	ar mooning.	,		
	Complete ONLY if direct	<u> </u>	Candidate/Off	iceholder name		Office sou	aht			Office he	ald		
	expenditure to benefit C/O		ourididate/on	icentiaet name		Omice 30a	giit			Omice in	Siu		
	Date	_											
	Date		Payee name										
	01/29/2024		HEB										
	Amount (\$)		Payee addre	-	State	e; Zip Co	de						
	\$68.95		7988 FM-1	488									
			Conroe, TX	77354									
	PURPOSE	(a)	Category (S	ee Categories listed	at the top of this so	chedule)	(b)	Description					
	OF EXPENDITURE		Food/Beve	rage Expense							plete Schedule T.		
								Check if Austin,			g expense		
								TOUR IUI DIUCK	r VV	uinci 3			
	Complete ONLY !f allians	L	Condidate /C"	iooboldas		Office	al-+			Otti 1	ald		
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Off	iceholder name		Office sou	gnt			Office h	eid		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/23 Rpt: 37/45	Hubert, Stephen M. (Mr.) 00087395
4	Date	5 Payee name
	02/20/2024	HEB
6	Amount (\$) \$236,30	7 Payee address; City; State; Zip Code 7988 FM-1488
	,	
		Conroe, TX 77354
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food for Campaign Workers
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/21/2024	Harland Clarke Corp
	Amount (\$)	Payee address; City; State; Zip Code
	\$38.42	10931 Laureate Drive
		San Antonio, TX 78249
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Check Order
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/03/2024	Home Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$11.89	19103 I-45 North
		Conroe, TX 77385
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Sign Supplies
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/23 Rpt: 38/45	Hubert, Stephen M. (Mr.) 00087395
4	Date	5 Payee name
	02/12/2024	Mattison, Caleb (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$120.00	61 Lightwood Trace Dr
		The Woodlands, TX 77382
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Work
		Campaign Work
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	02/14/2024	Montgomery Bakehouse
H	Amount (\$)	Payee address; City; State; Zip Code
	\$21.64	240 Longmire
		Conroe, TX 77304
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food for Campaign Workers
		The state of the s
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-
	Date	Payee name
	02/05/2024	Navaro, Luke (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	47 Degas Park Drive
		The Woodlands, TX 77382
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	_,, _,,,,,,	Check if Austin, TX, officeholder living expense
		Campaign Work
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/O	
\vdash		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	mmittee	Gift/Awards/Memorials Legal Services The Instruction G	•		ages	/Contract Labor		Travel Out of D OTHER (enter	District a category not listed above)	
_	Total pages Cab - dula E4	1	EII ED NIANTE		ac enplaine			1	_	Filor ID	(Ethios Commission Eller)	_
1	Total pages Schedule F1:								ა	Filer ID	(Ethics Commission Filers)	
	Sch: 18/23 Rpt: 39/45		Hupert, Ste	phen M. (Mr.)						00087395	<u> </u>	
4	Date	5	Payee name									
	02/08/2024		OfficeMax									
6	Amount (\$)	7	Payee addre	ss; City;	State:	; Zip Co	de					_
	\$27.57			Noodlands Dr		•						
	+ =											
			The Meddle	ando TV 77000								
		_		ands, TX 77380		 -	-					
8	PURPOSE OF	(a)		ee Categories listed at t	he top of this sch	nedule)	(b)	Description				
	EXPENDITURE		Printing Exp	ense				브			mplete Schedule T.	
								Printing Ads	, ιλ,	officeholder livir	חוא בייהבוופה	
								ung / tus				
<u>_</u>	Complete ONLY if direct	Ц	Condidate /Off	aabaldar := = == =		Office servi	ab+			Office	hald	_
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Januidate/Offi	ceholder name	(Office sou	ynt			Office h	ieiu	
L		_										_
	Date		Payee name									
	02/18/2024		Party City									
	Amount (\$)		Payee addre	ss; City;	State:	; Zip Co	de					٦
	\$11.69		19189 Inter	state 45 S								
			Shenandoa	h, TX 77385								
	PURPOSE	(a)					(h)	Description				-
	OF	(")	Event Expe	ee Categories listed at t	ne top of this sch	iedule)	(~)		outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE		Event Exhe	1135				=		officeholder livir		
								Items for Fun	dra	iser		
	Complete ONLY if direct		Candidate/Offi	ceholder name	(Office sou	ght			Office h	held	٦
	expenditure to benefit C/O	Н				·						
H	Date	Ε	Payor nama									=
	02/18/2024		Payee name Party City									
	Amount (\$)		Payee addre	-	State:	; Zip Co	de					
	\$12.99		19189 Inter	state 45 S								
			Shenandoa	h, TX 77385								
	PURPOSE	(a)	Category (S	ee Categories listed at t	the top of this sch	nedule)	(b)	Description				٦
	OF EXPENDITURE		Event Expe			´		:	outsi	de of Texas. Co	mplete Schedule T.	
	EVENDLICKE		•					_		officeholder livir	ng expense	
								Items for Fun	dra	iser		
		L										
	Complete ONLY if direct		Candidate/Offi	ceholder name		Office sou	ght			Office h	held	
	expenditure to benefit C/OI	H										
												٦

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/23 Rpt: 40/45	Hubert, Stephen M. (Mr.) 00087395
4	Date	5 Payee name
	02/09/2024	Preserve the Woodlands
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,500.00	6700 Woodlands Parkway
		The Woodlands, TX 77382
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	01/31/2024	Sampson, Ian (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	7 Lantern Hollow PI.
		The Woodlands, TX 77381
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Work
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/01/2024	Sullivan, Josh (Mr.)
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	8222 Terra Valley Lane
		Tomball, TX 77375
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Work
		Campaign Work
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 20/23 Rpt: 41/45	Hubert, Stephen M. (Mr.)	00087395
4	Date	5 Payee name	
	02/20/2024	Sullivan, Josh (Mr.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,083.17	8222 Terra Valley Lane	
	, ,		
		Tomball, TX 77375	
8	DUDDOCE		
ľ	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if tr	l avel outside of Texas. Complete Schedule T.
	EXPENDITURE	Galaries/Wages/Contract Eabor	ustin, TX, officeholder living expense
		Campaigr	n Work
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	H	
	Date	Payee name	
	02/05/2024	Sullivan, Josh (Mr.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	8222 Terra Valley Lane	
		Tomball, TX 77375	
_	PURPOSE		
	OF		avel outside of Texas. Complete Schedule T.
	EXPENDITURE		ustin, TX, officeholder living expense
		Campaigr	ı Work
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experialture to beliefit C/OI		
	Date	Payee name	
	01/29/2024	Sullivan, Shari (Mr.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	8222 Terra Valley Lane	
		Tomball, TX 77375	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		avel outside of Texas. Complete Schedule T.
	EXPENDITURE	l — l —	ustin, TX, officeholder living expense
		Campaigr	n work
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
L			
L			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
-	Total pages Schedule F1:	
1	Sch: 21/23 Rpt: 42/45	2 FILER NAME3 Filer ID(Ethics Commission Filers)Hubert, Stephen M. (Mr.)00087395
4	Date	5 Payee name
•	02/05/2024	Sullivan, Shari (Mr.)
	02/03/2024	Suilivan, Shan (ivin.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	8222 Terra Valley Lane
		Tarakall TV 77075
		Tomball, TX 77375
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Work
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
L	· 	
	Date	Payee name
	02/12/2024	Sunoco
	Amount (\$)	Payee address; City; State; Zip Code
	` ,	
	\$89.68	4160 FM-1488
		Conroe, TX 77384
_	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fuel for Block Walking
		Tach to Block Walking
_		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/13/2024	U-Haul Moving and Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$519.20	24540 I-45
		Spring, TX 77386
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Truck for Sign Wrap
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Tatal as a second of Education Education	<u> </u>
1	Total pages Schedule F1: Sch: 22/23 Rpt: 43/45	2 FILER NAME Hubert, Stephen M. (Mr.) 3 Filer ID (Ethics Commission Filers) 00087395
4	Date	5 Payee name
	02/17/2024	Ultra Screen Printing
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$587.13	603 County Rd 110
		Riviera, TX 78379
Ļ		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Compaign Toos
		Campaign Tees
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialture to benefit C/Oi	n
	Date	Payee name
	02/18/2024	Walgreens
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.61	
	\$25.01	560 Rayford Rd
		Spring, TX 77386
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Snacks for Campaign Helpers
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
H	Date	Payee name
	02/02/2024	Woodforest National Bank
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$69.95	1330 Lake Robbins Rd.
		The Woodlands, TX 77380
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Eom Fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 23/23 Rpt: 44/45	Hubert, Stephen M. (Mr.) 00087395
4	Date	5 Payee name
	02/10/2024	Woodforest National Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$2.50	1330 Lake Robbins Rd.
l		
		The Woodlands, TX 77380
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Bank Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
F	Date	Payee name
	02/10/2024	Woodforest National Bank
┡		
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.50	1330 Lake Robbins Rd.
l		
		The Woodlands, TX 77380
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Bank Fee
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
l	expenditure to benefit C/O	1
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politice Credit Card Payment		Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide explain		Expense Wages/Contract Labor	Travel Out of District OTHER (enter a category not	listed above)
1	Total pages Schedule G:	2	FILER NAME			3 Filer ID (Ethics Com	mission Filers)
	Sch: 1/1 Rpt: 45/45		Hubert, Stephen M. (Mr.)			00087395	
4	Date	5	Payee name				
	02/01/2024	(Circle K				
6	Amount (\$)	7	Payee address; City; Stat	e; Zip C	ode		
	\$11.00		172 FM 1488				
	Reimbursement from political contributions intended		Conroe, TX 77384				
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b) Description	Check if travel outside of Texas.	·
	OF EXPENDITURE	'	Advertising Expense		L	Check if Austin, TX, officeholder li	iving expense
					Ice for Meet and	Greet	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Can	didate/Officeholder name		Office sought	Office held	
	Date		Payee name				
	02/06/2024		Duncan, Heather (Mrs.)				
	Amount (\$)		Payee address; City; Stat	e; Zip C	ode		
	\$490.00		53 Lake Ridge Dr				
	Reimbursement from						
	x political contributions intended	;	Spring, TX 77381				
	PURPOSE		Category (See Categories listed at the top of this s	chedule)	Description	Check if travel outside of Texas.	Complete Schedule T.
	OF EXPENDITURE		Salaries/Wages/Contract Labor			Check if Austin, TX, officeholder li	iving expense
	EXPENDITORE				Campaign Work		
		Can	didate/Officeholder name		Office sought	Office held	
	expenditure to benefit C/OH						
		_					
	Date	ı	Payee name				
	02/01/2024	_	Home Depot				
	Amount (\$)	ı		e; Zip C	ode		
	\$11.89		19103 I-45 North				
	Reimbursement from political contributions intended		Conroe, TX 77385				
	PURPOSE		Category (See Categories listed at the top of this s	chedule)	Description	Check if travel outside of Texas.	
	OF EXPENDITURE	4	Advertising Expense		L	Check if Austin, TX, officeholder li	iving expense
					Sign Supplies		
	Operation Chilly III		distant (Office lead)			0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Can	didate/Officeholder name		Office sought	Office held	
l							