FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00084962 3 COMMITTEE NAME **OFFICE USE ONLY** The Charles Butt Public Education Political Action Committee Date Received **ELECTRONICALLY FILED** 02/26/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 6033 Date Hand-delivered or Date Postmarked Change of Address San Antonio, TX 78209 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Charles NAME NICKNAME LAST **SUFFIX** Clines STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** PO Box 6033 STREET **ADDRESS** (Residence or Business) San Antonio, TX 78209 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 6033 MAILING **ADDRESS** San Antonio, TX 78209 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 585-4246 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/26/2024 02/24/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/05/2024 General Special

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME		13 Filer ID (Ethics Commission Filers)				
The Charles Butt Public	00084962	!				
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Rep. Ernest Bailes State Repr	esentative			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 2,800,0					
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00		
	4. TOTAL POLITICA	L EXPENDITURES	\$	2,626,126.00		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	10,772,507.19		
OUTSTANDING LOAN TOTALS	I .	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00		
16 AFFIDAVIT	•		<u>'</u>			
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.				
		Mr. Char	les Clines			
		Signature of Car	npaign Treasi	urer		
AFFIX NOTARY	STAMP / SEAL ABOVE					
Sworn to and subscribed	before me, by the said	, th	nis the	day		
of	_, 20, to certify v	which, witness my hand and seal of office.				
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offi	cer administering oath		

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COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)				
				1-0 :				
The Charles Butt Public	Education Political	Action Commit	tee	00084962				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Rep. Keith Bell State Representative						
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported						
		B. Opposed						
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rep. Glenn Rogers State Repre	esentative				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported						
		B. Opposed						
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rep. John Kuempel State Repre	esentative				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported						
		B. Opposed						
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
	ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	(Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Identify by name or, if applicable, classify by party.) 2. Measures (Identify by name or, if applicable, classify by party.) 2. Measures (Identify by name or, if applicable, classify by party.) 3. Officeholders (Identify by name or, if applicable, classify by party.) 3. Officeholders (Identify by name or, if applicable, classify by party.) 3. Officeholders (Identify by name or, if applicable, classify by party.) 3. Officeholders (Identify by name or, if applicable, classify by party.)	ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed COMMITTEE A. Supported (Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed COMMITTEE A. Supported (Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed COMMITTEE A. Supported (Identify by name or, if applicable, classify by party.) B. Opposed COMMITTEE ACTIVITY 2. Measures (Identify by name or, if applicable, classify by party.) B. Opposed COMMITTEE ACTIVITY 2. Measures (Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed 3. Officeholders Assisted A. Supported (Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed B. Opposed	(Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (definity by name or, if applicable, classify by party.) (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (definity by name or, if applicable, classify by party.) 4. Supported Rep. Glenn Rogers State Representation of election and nature of issue.) 5. Opposed 6. Opposed 8. Opposed 8. Opposed 8. Opposed 9. Opposed 9. Opposed 9. Opposed 1. Candidates (definity by name or, if applicable, classify by party.) 1. Candidates (definity by name or, if applicable, classify by party.) 8. Opposed 9. Opposed 1. Candidates (definity by name or, if applicable, classify by party.) 1. Candidates (definity by name or, if applicable, classify by party.) 1. Candidates (definity by name or, if applicable, classify by party.) 1. Candidates (definity by name or, if applicable, classify by party.) 1. Candidates (definity by name or, if applicable, classify by party.) 1. Candidates (definity by name or, if applicable, classify by party.) 1. Candidates (definity by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 1. Candidates (definity by name or, if applicable, classify by party.)				

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COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)				
The Charles Butt Public	Education Political A	Action Commit	ttee	00084962				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Rep. Jay Dean State Representative						
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported						
		B. Opposed						
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rep. Justin Holland State Repre	esentative				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported						
		B. Opposed						
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rep. Steve Allison State Repres	sentative				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported						
		B. Opposed						
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
	ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this paper to complete	ACTIVITY (Attach lists on plain caper to complete this report if necessary.) 2. Measures (Describe by date and location and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) (Attach lists on plain caper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Identify by name or, if applicable, classify by party.) (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE (Identify by name or, if applicable, classify by party.) COMMITTEE (Identify by name or, if applicable, classify by party.) ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted A. Supported (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted A. Supported (Describe by date and location of election and nature of issue.) B. Opposed	ACTIVITY (Attach lists on plain paper to complete this eport if necessary.) 2. Measures (Describe by date and nearer of isoue.) 3. Officeholders Assisted (identify by name or, if applicable, classify by party.) Attach lists on plain paper to complete this eport if necessary.) 2. Measures (identify by name or, if applicable, classify by party.) Attach lists on plain paper to complete this eport if necessary.) 2. Measures (Describe by date and location of election and nearer of issue.) 3. Officeholders Assisted (identify by name or, if applicable, classify by party.) B. Opposed B. Opposed B. Opposed B. Opposed COMMITTEE A. Supported B. Opposed B. Opposed				

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						rage 3 01 31
COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
The Charles Butt Public	Education Political A	Actior	n Commit	tee	00084962	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		upported	Rep. Stan Lambert State Repre	sentative	
(Attach lists on plain paper to complete this report if necessary.)		B. O	pposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. S	upported			
		B. O	pposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE	1. Candidates	A. S	upported	Rep. Travis Clardy State Repre	sentative	
ACTIVITY	(Identify by name or, if applicable, classify by party.)			Trop. Havis Guardy Guard Repre	Jemanyo	
(Attach lists on plain paper to complete this report if necessary.)		B. O	pposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. S	upported			
		B. O	pposed			
	Officeholders Assisted (Identify by name or, if					
0014147777	applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		upported	Rep. DeWayne Burns State Re	presentative	
(Attach lists on plain paper to complete this report if necessary.)		B. O	pposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. S	upported			
		B. O	pposed			
	3. Officeholders Assisted (Identify by name or, if					
	applicable, classify by party.)					

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	The Charles Butt Public	Education Political	Action Commit	ttee	00084962	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rep. Reggie Smith State Repres	sentative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rep. Gary VanDeaver State Re	oresentative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rep. Hugh Shine State Represe	entative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

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DMMITTEE NAME ne Charles Butt Public DMMITTEE CTIVITY ttach lists on plain uper to complete this port if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted	B. Op		tee Rep. Drew Darby State Represe	13 Filer ID 00084962 entative	(Ethics Commission Filers)
DMMITTEE CTIVITY ttach lists on plain uper to complete this	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders	B. Op	oposed upported			
CTIVITY ttach lists on plain per to complete this	(Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders	B. Op	oposed upported	Rep. Drew Darby State Represe	entative	
per to complete this	(Describe by date and location of election and nature of issue.) 3. Officeholders	A. Su	upported			
	(Describe by date and location of election and nature of issue.) 3. Officeholders					
		В. Ор	oposed			
	(Identify by name or, if applicable, classify by party.))				
OMMITTEE	1. Candidates		upported	Rep. Ken King State Represent	ative	
ACTIVITY (Identify by name or, if applicable, classify by party.				Topinon and Cauca topicoon.		
ttach lists on plain per to complete this port if necessary.)		В. Ор	oposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Su	upported			
		В. Ор	oposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
OMMITTEE CTIVITY	Candidates (Identify by name or, if	A. Su	upported	Rep. Charlie Geren State Repre	esentative	
ttach lists on plain per to complete this port if necessary.)		В. Ор	oposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Su	upported			
		В. Ор	oposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.))				
ו ו	DMMITTEE CTIVITY ctach lists on plain per to complete this	2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party. 1. Candidates (Identify by name or, if applicable, classify by party. 2. Measures (Describe by date and location of election and nature of issue.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.	tach lists on plain per to complete this port if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) DMMITTEE CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	tach lists on plain per to complete this port if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) DMMITTEE CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	tach lists on plain per to complete this port if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) DIMITTEE CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed Page 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed Page 2. Measures (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	tach lists on plain per to complete this port if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) DIMITTEE CTIVITY tach lists on plain per to complete this port if necessary.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed A. Supported Rep. Charlie Geren State Representative Charlie Geren State Representative Describe by date and location of election and nature of issue.) B. Opposed B. Opposed 3. Officeholders Assisted (Identify by name or, if geren state Representative of election and nature of issue.)

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				rage o or si
			13 Filer ID	(Ethics Commission Filers)
Education Political A	Action Commit	tee	00084962	
1. Candidates (Identify by name or, if applicable, classify by party.)		Patricia Hardy State Board Of	Education	
	B. Opposed			
2. Measures	A. Supported			
(Describe by date and location of election and nature of issue.)				
	B. Opposed			
3. Officeholders Assisted				
applicable, classify by party.)				
	A. Supported	Jeff Barry State Representative	e	
(Identify by name or, if applicable, classify by party.)				
	B. Opposed			
Measures (Describe by date and location of election and nature of issue.)	A. Supported			
	B. Opposed			
Officeholders Assisted				
(Identify by name or, if applicable, classify by party.)				
	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported A. Supported B. Opposed B. Opposed	(Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed A. Supported Jeff Barry State Representative (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported B. Opposed A. Supported B. Opposed	Education Political Action Committee 1. Candidates (Identify by name or, if applicable, classify by parry.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.) 1. Candidates (Identify by name or, if applicable, classify by parry.) B. Opposed A. Supported A. Supported Jeff Barry State Representative Clescribe by date and location of election and nature of issue.) B. Opposed A. Supported Jeff Barry State Representative B. Opposed A. Supported Jeff Barry State Representative Clescribe by date and location of election and nature of issue.) B. Opposed

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

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17 COMMIT	TEE NAME rles Butt Public Education Political Action Committee	18 Filer ID 00084962	(Ethics Commission Filers)
	LE SUBTOTALS = SCHEDULE		SUBTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,800,000.00	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION)R	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (\$	
9.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 2,626,126.00
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$ 43,868.09
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$ 12,940.16

	MONETARY POLITICAL CONTRIBUTIONS		SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 10/37
2	FILER NAME The Charles Butt Public Education Political Action Committee	3	Filer ID (Ethics Commission Filers) 00084962
4	Date 01/29/2024 5 Full name of contributor out-of-state PAC (ID#:) Butt, Charles 6 Contributor address; City; State; Zip Code	7	Amount of Contribution (\$) \$800,000.00
8	San Antonio, TX 78209 Principal occupation / Job title (See Instructions) Chairman 9 Employer (See Instruction HEB	ns)	
	Date Full name of contributor out-of-state PAC (ID#:) 02/06/2024 Butt, Charles Contributor address; City; State; Zip Code San Antonio, TX 78209		Amount of Contribution (\$) \$2,000,000.00
	Principal occupation / Job title (See Instructions) Chairman Employer (See Instruction HEB	ns)	

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/Politica Credit Card Payment	/ - al Coi	mmittee	Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		xpens Vages	se s/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 1/25 Rpt: 11/37			s Butt Public Ed	ucation Poli	tical Act	tion			00084962	
4	Date	5	Payee name								
	02/01/2024		Arena Mail	and Digital							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode				
	\$52,484.00		1260 String	ham Ave							
			Suite 350								
	Expenditure from corporate funds		Salt Lake C	ity, UT 84106							
8	PURPOSE	(a)	Category (Se	ee Categories listed at t	he top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Advertising							de of Texas. Com	
	EXI ENDITORE							\Box		officeholder living	
								Travis Clardy			cal Advertising for the
								. ravio Olardy			
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	0	ffice sou	ıght		_	Office he	eld
	Date		Payee name								
	02/23/2024		Arena Mail	and Digital							
	Amount (\$)	H	Payee addres	ss; City;	State:	Zip Co	ode				
	\$52,073.71		1260 String	, ,,	,	,					
	Ψ02,010.11		Suite 350								
	Expenditure from										
느	corporate funds		Salt Lake C	ity, UT 84106							
	PURPOSE OF	(a)	Category (Se	ee Categories listed at t	he top of this sche	edule)	(b)	Description			
	EXPENDITURE		Advertising	Expense						de of Texas. Com	
								ш		officeholder living	cal Advertising for the
								Travis Clardy			cal Advertising for the
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	0	ffice sou	l Ight	<u> </u>		Office he	eld
	Date		Payee name								
	02/23/2024		DEWAYNE	BURNS CAMPA	AIGN						
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode				
	\$25,000.00		115 S. MAIN	N ST							
			SUITE 202								
	Expenditure from corporate funds		CLEBURNE	E, TX 76033							
	PURPOSE	(a)	Category (94	ee Categories listed at t	he top of this sche	edule)	(b)	Description			
	OF			ns/Donations Ma		,		:	outsio	de of Texas. Com	plete Schedule T.
	EXPENDITURE			Officeholder/Poli		ittee				officeholder living	
								Committee C	am	paign Contri	ibution
	Complete ONLY if direct		Candidate/Offi	ceholder name	0	ffice sou	ıght			Office he	eld
	expenditure to benefit C/OI	H									

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	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/25 Rpt: 12/37	The Charles Butt Public Education Political Action 00084962
4 Date	5 Payee name
02/23/2024	DREW DARBY CAMPAIGN
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$100,000.00	36 W BEAUREGARD
	SUITE 517
Expenditure from corporate funds	SAN ANGELO, TX 76903
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Committee Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/29/2024	Ernest Bailes Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$150,000.00	1414 11th St
Ψ130,000.00	1414 1101 30
Expenditure from corporate funds	Huntsville, TX 77340
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Committee Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
01/30/2024	Fidi Media LLC
Amount (\$)	Payee address; City; State; Zip Code
\$25,000.00	180 Water St
	Apt 416
Expenditure from corporate funds	New York, NY 10038
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Advertising for the Stan Lambert Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

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	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/25 Rpt: 13/37	The Charles Butt Public Education Political Action 00084962
4 Date	5 Payee name
02/08/2024	Fidi Media LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$50,000.00	180 Water St
Funanditura from	Apt 416
Expenditure from corporate funds	New York, NY 10038
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Advertising for the
	Stan Lambert Campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/23/2024	GLENN ROGERS CAMPAIGN
Amount (\$)	Payee address; City; State; Zip Code
\$50,000.00	100 E HUBBARD STREET
Expenditure from corporate funds	MINERAL WELLS, TX 76067
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
_/	Candidate/Officeholder/Political Committee
	Committee Campaign Contribution
2 1 2 2 1 1 2 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/05/2024	Gary VanDeaver Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$100,000.00	710 James Bowie Drive
Expenditure from corporate funds	New Boston, TX 75570
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Committee Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
5	

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment									
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)								
Sch: 4/25 Rpt: 14/37	The Charles Butt Public Education Political Action 00084962								
4 Date	5 Payee name								
02/07/2024	HTTV Direct LLC								
6 Amount (\$)	7 Payee address; City; State; Zip Code								
\$40,608.82	2300 Wilson Blvd								
Evnanditura from	Suite 700								
Expenditure from corporate funds	Arlington, VA 22201								
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.								
EXPENDITURE	Check if Austin, TX, officeholder living expense								
	In-Kind Contribution of Political Advertising for the								
	Gary VanDeaver Campaign								
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held								
Date	Payee name								
02/07/2024	HTTV Direct LLC								
Amount (\$)	Payee address; City; State; Zip Code								
\$40,608.82	2300 Wilson Blvd								
	Suite 700								
Expenditure from									
corporate funds	Arlington, VA 22201								
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description								
EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
	In-Kind Contribution of Political Advertising for the								
	Keith Bell Campaign								
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held								
Date	Payee name								
02/07/2024	HTTV Direct LLC								
Amount (\$)	Payee address; City; State; Zip Code								
\$40,608.82	2300 Wilson Blvd								
	Suite 700								
Expenditure from corporate funds	Arlington, VA 22201								
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
OF	Polling Expense								
EXPENDITURE	Check if Austin, TX, officeholder living expense								
	In-Kind Contribution of Political Advertising for the Jay Dean Campaign								
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
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

Contributions/ Donations Made By 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:	
Sch: 5/25 Rpt: 15/37	The Charles Butt Public Education Political Action 00084962
4 Date	5 Payee name
02/07/2024	HTTV Direct LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$40,608.82	2300 Wilson Blvd
— Foresedit ve from	Suite 700
Expenditure from corporate funds	Arlington, VA 22201
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
LXI LIBITORE	Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Advertising for the Travis Clardy Campaign
O Complete CAUV & disc-t	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/07/2024	HTTV Direct LLC
Amount (\$)	Payee address; City; State; Zip Code
\$40,608.82	2300 Wilson Blvd
Expenditure from	Suite 700
corporate funds	Arlington, VA 22201
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In-Kind Contribution of Political Advertising for the
	Ernest Bailes Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	v
Date	Payee name
02/07/2024	HTTV Direct LLC
Amount (\$)	Payee address; City; State; Zip Code
\$40,608.82	2300 Wilson Blvd
Ψ40,000.02	Suite 700
Expenditure from	
corporate funds	Arlington, VA 22201
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Advertising for the
	Justin Holland Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ng Expense Event Expense Loan Repayment/Reimbu

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

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	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:	
Sch: 6/25 Rpt: 16/37	The Charles Butt Public Education Political Action 00084962
4 Date	5 Payee name
02/07/2024	HTTV Direct LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$40,608.82	2300 Wilson Blvd
	Suite 700
Expenditure from corporate funds	Arlington, VA 22201
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Advertising for the John Kuempel Campaign
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/07/2024	HTTV Direct LLC
Amount (\$)	Payee address; City; State; Zip Code
\$40,608.82	2300 Wilson Blvd
	Suite 700
Expenditure from corporate funds	Arlington, VA 22201
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In-Kind Contribution of Political Advertising for the
	Hugh D. Shine Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/07/2024	HTTV Direct LLC
Amount (\$)	Payee address; City; State; Zip Code
\$40,608.82	2300 Wilson Blvd
- Forman (Co.)	Suite 700
Expenditure from corporate funds	Arlington, VA 22201
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
	Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Advertising for the DeWayne Burns Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Con 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	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:	
Sch: 7/25 Rpt: 17/37	The Charles Butt Public Education Political Action 00084962
4 Date	5 Payee name
02/07/2024	HTTV Direct LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$40,608.82	2300 Wilson Blvd
	Suite 700
Expenditure from corporate funds	Arlington, VA 22201
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Advertising for the Glenn Rogers Campaign
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/07/2024	HTTV Direct LLC
Amount (\$)	Payee address; City; State; Zip Code
\$40,608.82	2300 Wilson Blvd
	Suite 700
Expenditure from corporate funds	Arlington, VA 22201
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In-Kind Contribution of Political Advertising for the
	Reggie Smith Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/07/2024	HTTV Direct LLC
Amount (\$)	Payee address; City; State; Zip Code
\$40,608.82	2300 Wilson Blvd
	Suite 700
Expenditure from corporate funds	Arlington, VA 22201
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Advertising for the Stan Lambert Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Food/Beverage Expense

Contributions/ Donations Made By - Gill/Awards/Memoriais Expense Printing Expense Travei Out of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above Credit Card Payment				
	The Instruction Guide explains how to complete thi	is form.		
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
Sch: 8/25 Rpt: 18/37	The Charles Butt Public Education Political Action	00084962		
4 Date	5 Payee name	•		
02/07/2024	HTTV Direct LLC			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$40,608.82	2300 Wilson Blvd			
	Suite 700			
Expenditure from corporate funds	Arlington, VA 22201			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	cription		
OF		Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE		Check if Austin, TX, officeholder living expense		
		Kind Contribution of Political Advertising for the		
	Dre	w Darby Campaign		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
expenditure to benefit C/OI	н			
Date	Payee name			
02/07/2024	HTTV Direct LLC			
Amount (\$)	Payee address; City; State; Zip Code			
\$40,608.82	2300 Wilson Blvd			
	Suite 700			
Expenditure from corporate funds	Arlington, VA 22201			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	cription		
OF EXPENDITURE	Polling Expense	Check if travel outside of Texas. Complete Schedule T.		
EXI ENDITORE	I —	Check if Austin, TX, officeholder living expense		
		Kind Contribution of Political Advertising for the n King Campaign		
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
expenditure to benefit C/O		Office field		
Doto	T 8			
Date	Payee name			
02/07/2024	HTTV Direct LLC			
Amount (\$)	Payee address; City; State; Zip Code			
\$40,608.82	2300 Wilson Blvd			
— Foregoedituus fores	Suite 700			
Expenditure from corporate funds	Arlington, VA 22201			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	cription		
OF EXPENDITURE	Polling Expense	Check if travel outside of Texas. Complete Schedule T.		
2/1 2/15/10/12		Check if Austin, TX, officeholder living expense		
		Kind Contribution of Political Advertising for the Arlie Geren Campaign		
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought	Office held		
expenditure to benefit C/Ol		Office field		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By 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:	
Sch: 9/25 Rpt: 19/37	The Charles Butt Public Education Political Action 00084962
4 Date	5 Payee name
02/07/2024	HTTV Direct LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$40,608.82	2300 Wilson Blvd
— Forest dit us form	Suite 700
Expenditure from corporate funds	Arlington, VA 22201
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Advertising for the Steve Allison Campaign
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/07/2024	HTTV Direct LLC
Amount (\$)	Payee address; City; State; Zip Code
\$40,608.88	2300 Wilson Blvd
— Constantitude forms	Suite 700
Expenditure from corporate funds	Arlington, VA 22201
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Committee Polling Expense
	Continued Found Expense
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/07/2024	HTTV Direct LLC
Amount (\$)	Payee address; City; State; Zip Code
\$152,925.00	2300 Wilson Blvd
	Suite 700
Expenditure from corporate funds	Arlington, VA 22201
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Committee Survey Expanse
	Committee Survey Expense
Complete <u>ONLY</u> 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 Committe 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 10/25 Rpt: 20/37	The Charles Butt Public Education Political Action 00084962
4 Date	5 Payee name
01/31/2024	Jefferson Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$35.00	P.O. Box 5190
Expenditure from corporate funds	San Antonio, TX 78201
8 PURPOSE	1
OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Committee Bank Fees
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/01/2024	Jefferson Bank
Amount (\$)	Payee address; City; State; Zip Code
\$2,017.98	P.O. Box 5190
Expenditure from corporate funds	San Antonio, TX 78201
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
	Committee Bank Fees
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/08/2024	John Kuempel Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$50,000.00	P.O. Box 177
Expenditure from corporate funds	Seguin, TX 78146
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Committee Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold
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
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

Candidate/Officeholder/Politica Credit Card Payment	cal Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed ab	ove)
	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commissi	ion Filers)
Sch: 11/25 Rpt: 21/37	The Charles Butt Public Education Political Action 00084962	
4 Date	5 Payee name	
02/05/2024	Justin Holland Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$50,000.00	101 E Rusk St	
	Suite 201	
Expenditure from corporate funds	Rockwall, TX 75087	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	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	
	Committee Campaign Contribution	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	JH	
Date	Payee name	
02/05/2024	KC Strategies, LLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$31,750.00	3571 Far West Blvd	
	No. 196	
Expenditure from corporate funds	Austin, TX 78731	
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.	
EXI ENDITORE	Check if Austin, TX, officeholder living expense	
	In-Kind Contribution of Political Advertising DeWayne Burns Campaign	for the
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Date	Payee name	
02/05/2024	KC Strategies, LLC	
Amount (\$)		
\$27,375.00		
Expenditure from	No. 196	
corporate funds	Austin, TX 78731	
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	for the
	In-Kind Contribution of Political Advertising DeWayne Burns Campaign	ioi trie
Complete <u>ONLY</u> 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 Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	,
1 Total pages Schedule F1:	
Sch: 12/25 Rpt: 22/37	The Charles Butt Public Education Political Action 00084962
4 Date	5 Payee name
02/05/2024	KC Strategies, LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$27,375.00	3571 Far West Blvd
	No. 196
Expenditure from corporate funds	Austin, TX 78731
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. Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Advertising for the
	Reggie Smith Campaign
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/05/2024	KC Strategies, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$35,000.00	3571 Far West Blvd
	No. 196
Expenditure from corporate funds	Austin, TX 78731
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
	In-Kind Contribution of Political Advertising for the
	Reggie Smith Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/05/2024	KC Strategies, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$35,000.00	3571 Far West Blvd
Ψ33,000.00	
Expenditure from	No. 196
corporate funds	Austin, TX 78731
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 In-Kind Contribution of Political Advertising for the
	Gary VanDeaver Campaign
Complete CNU V if all	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
p = 1 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2	

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

Printing Expense Salaries/Wages/Contract Labor

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: 13/25 Rpt: 23/37	The Charles Butt Public Education Political Action 00084962
4 Date	5 Payee name
02/05/2024	KC Strategies, LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$31,750.00	3571 Far West Blvd
	No. 196
Expenditure from corporate funds	Austin, TX 78731
8 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 In-Kind Contribution of Political Advertising for the
	Gary VanDeaver Campaign
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Oi	
Date	Payee name
02/23/2024	KC Strategies, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$35,000.00	3571 Far West Blvd
	No. 196
Expenditure from corporate funds	Austin, TX 78731
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 In-Kind Contribution of Political Advertising for the
	Gary VanDeaver Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/23/2024	KC Strategies, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$27,375.00	3571 Far West Blvd
	No. 196
Expenditure from corporate funds	Austin, TX 78731
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
	In-Kind Contribution of Political Advertising for the Reggie Smith Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement
Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense

Fees

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	s/ Donations Made By - e/Officeholder/Political Committee			Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)
1 Total pages Schedule F1: 2 FILER N			FILER NAME						3	Filer ID	(Ethics Commission Filers)
L	Sch: 14/25 Rpt: 24/37		The Charles	s Butt Public Educ	cation Poli	tical Ac	tion			00084962	
4	Date	5	Payee name								
	02/23/2024		KC Strategi	es, LLC							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode				
	\$31,750.00		3571 Far W	est Blvd							
	- Evnanditura from		No. 196								
L	Expenditure from corporate funds		Austin, TX 7	78731							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Advertising	Expense						de of Texas. Comp	
								\Box		officeholder living	cal Advertising for the
								DeWayne Bu			ca tareraering for the
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder name	0	Office sou	ught			Office he	eld
	<u> </u>										
	Date	ı	Payee name								
	02/05/2024		Millan & Co	·							
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode				
	\$1,631.25		812 San An	tonio St							
Suite L17											
L	corporate funds		Austin, TX 7	78701							
	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description			
OF EXPENDITURE			Accounting/	Banking (de of Texas. Comp	
								Committee A		officeholder living	
								Committee 7 to	000	arting rees	
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder name	0	Office sou	ught			Office he	eld
	Date		Payee name								
	01/30/2024		Murphy Nas	sica							
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode				
	\$15,000.00		P.O. Box 16	648							
	Expenditure from corporate funds		Austin, TX 7	78767							
	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Consulting I	Expense				ш		de of Texas. Comp	
	-							ш		officeholder living	expense cal Consulting for the
								Keith Bell Ca			ca. Sonsaiming for the
	Complete ONLY if direct		Candidate/Offi	ceholder name	0	Office sou	ught			Office he	eld
	expenditure to benefit C/O	Н					-				

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

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: 15/25 Rpt: 25/37	The Charles Butt Public Education Political Action 00084962
4 Date	5 Payee name
01/30/2024	Murphy Nasica
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$32,344.20	P.O. Box 1648
Expenditure from corporate funds	Austin, TX 78767
8 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.
	Check if Austin, TX, officeholder living expense In-Kind Contribution of Political Consulting for the
	Glenn Rogers Campaign
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/30/2024	Murphy Nasica
Amount (\$)	Payee address; City; State; Zip Code
\$15,000.00	P.O. Box 1648
Ψ15,000.00	F.O. BOX 1040
Expenditure from corporate funds	Austin, TX 78767
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.
	Check if Austin, TX, officeholder living expense In-Kind Contribution of Political Consulting for the
	John Kuempel Campaign
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
01/30/2024	Murphy Nasica
Amount (\$)	Payee address; City; State; Zip Code
\$15,000.00	P.O. Box 1648
Expenditure from corporate funds	Austin, TX 78767
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.
	Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Consulting for the Jay Dean Campaign
Complete ONLY if direct	
Complete <u>ONLY</u> if direct 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 Committe 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	al 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: 16/25 Rpt: 26/37	The Charles Butt Public Education Political Action 00084962	
4 Date	5 Payee name	
01/30/2024	Murphy Nasica	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$25,211.53	P.O. Box 1648	
Expenditure from corporate funds	Austin, TX 78767	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	In-Kind Contribution of Political Consulting for the	
	Justin Holland Campaign	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H	
Date	Payee name	
01/30/2024	Murphy Nasica	
Amount (\$)	Payee address; City; State; Zip Code	
\$75,000.00	P.O. Box 1648	
Expenditure from corporate funds	Austin, TX 78767	
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	
	In-Kind Contribution of Political Consulting for the Steve Allison Campaign	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experientare to benefit 6/61		
Date	Payee name	
02/08/2024	Murphy Nasica	
Amount (\$)	Payee address; City; State; Zip Code	
\$15,000.00	P.O. Box 1648	
Expenditure from corporate funds	Austin, TX 78767	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	In-Kind Contribution of Political Consulting for the	
	Keith Bell Campaign	
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 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	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:	
Sch: 17/25 Rpt: 27/37	The Charles Butt Public Education Political Action 00084962
4 Date	5 Payee name
02/08/2024	Murphy Nasica
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$22,630.29	P.O. Box 1648
Expenditure from corporate funds	Austin, TX 78767
8 PURPOSE	
OF	
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Consulting for the
	Justin Holland Campaign
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
02/08/2024	Murphy Nasica
Amount (\$)	
\$27,518.16	P.O. Box 1648
Expenditure from	
corporate funds	Austin, TX 78767
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Consulting for the Glenn Rogers Campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to serious ever	
Date	Payee name
02/08/2024	Murphy Nasica
Amount (\$)	Payee address; City; State; Zip Code
\$27,518.16	P.O. Box 1648
Expenditure from corporate funds	Austin, TX 78767
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Consulting for the
	Glenn Rogers Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

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

al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
2 FILER NAME 3 Filer ID (Ethics Commission Filers)
The Charles Butt Public Education Political Action 00084962
5 Payee name
Murphy Nasica
7 Payee address; City; State; Zip Code
P.O. Box 1648
Austin, TX 78767
(a) Category (See Categories listed at the top of this schedule) (b) Description
Consulting Expense Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, officeholder living expense In-Kind Contribution of Political Consulting for the
Justin Holland Campaign
Candidate/Officeholder name Office sought Office held
OH Carlotate Finance Finance Sought Cine Finance Finan
Payee name
Murphy Nasica
Payee address; City; State; Zip Code
P.O. Box 1648
Austin, TX 78767
(a) Category (See Categories listed at the top of this schedule) (b) Description
Consulting Expense Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, officeholder living expense In-Kind Contribution of Political Consulting for the
Ken King Campaign
Candidate/Officeholder name Office sought Office held
OH
Payee name
Murphy Nasica
Payee address; City; State; Zip Code P.O. Box 1648
P.O. Bux 1048
Austin, TX 78767
(a) Category (See Categories listed at the top of this schedule) (b) Description
Consulting Expense Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, officeholder living expense
In-Kind Contribution of Political Consulting for the
Glenn Rogers Campaign
Candidate/Officeholder name Office sought Office held
DH

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 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: 19/25 Rpt: 29/37	The Charles Butt Public Education Political Action 00084962
4 Date	5 Payee name
02/14/2024	Murphy Nasica
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$75,000.00	P.O. Box 1648
Expenditure from corporate funds	Austin, TX 78767
8 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.
LXI LINDITORE	Check if Austin, TX, officeholder living expense In-Kind Contribution of Political Consulting for the
	Steve Allison Campaign
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Dougo nomo
02/14/2024	Payee name Murphy Nasica
Amount (\$)	Payee address; City; State; Zip Code
\$15,000.00	P.O. Box 1648
Expenditure from corporate funds	Austin, TX 78767
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.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Consulting for the John Kuempel Campaign
Operation ONE Visiting of	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/14/2024	Murphy Nasica
Amount (\$)	Payee address; City; State; Zip Code
\$17,600.00	P.O. Box 1648
Expenditure from	
corporate funds	Austin, TX 78767
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Consulting for the
	John Kuempel Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	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

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 contrary not listed above)

Candidate/Officeholder/Politica Credit Card Payment	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: 20/25 Rpt: 30/37	The Charles Butt Public Education Political Action 00084962
4 Date	5 Payee name
02/14/2024	Murphy Nasica
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$22,630.29	P.O. Box 1648
Expenditure from corporate funds	Austin, TX 78767
8 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.
	Check if Austin, TX, officeholder living expense In-Kind Contribution of Political Consulting for the
	Justin Holland Campaign
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/14/2024	Murphy Nasica
Amount (\$)	Payee address; City; State; Zip Code
\$22,630.29	P.O. Box 1648
ΨΖΖ,030.29	F.O. BOX 1040
Expenditure from corporate funds	Austin, TX 78767
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.
	Check if Austin, TX, officeholder living expense In-Kind Contribution of Political Consulting for the
	Justin Holland Campaign
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/14/2024	Murphy Nasica
Amount (\$)	Payee address; City; State; Zip Code
\$22,630.29	P.O. Box 1648
Expenditure from corporate funds	Austin, TX 78767
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.
	☐ Check if Austin, TX, officeholder living expense In-Kind Contribution of Political Consulting for the
	Justin Holland Campaign
Complete ONLY if direct	
Complete <u>ONLY</u> if direct 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 Committee

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 21/25 Rpt: 31/37	The Charles Butt Public Education Political Action 00084962
4 Date	5 Payee name
02/14/2024	Murphy Nasica
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$50,000.00	P.O. Box 1648
Expenditure from corporate funds	Austin, TX 78767
	·
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Consulting for the
	Steve Allison Campaign
	Steve / till Soft Sumpaign
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/23/2024	Murphy Nasica
Amount (\$)	Payee address; City; State; Zip Code
\$25,000.00	P.O. Box 1648
Ψ23,000.00	1.0. Box 1040
Expenditure from corporate funds	Austin, TX 78767
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Consulting Expense Consulting Expense Consulting Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Consulting for the
	Jeff Barry Campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/15/2024	Patricia Hardy Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	1109 Roaring Springs Rd.
Ψ0,000.00	1100 Houring opinings Hu.
Expenditure from corporate funds	Fort Worth, TX 76114
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Committee Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

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	
4 Tatal marian Calcadida F1.	
1 Total pages Schedule F1: Sch: 22/25 Rpt: 32/37	2 FILER NAME The Charles Butt Public Education Political Action 3 Filer ID (Ethics Commission Filers) 00084962
4 Date	5 Payee name
02/23/2024	STEVE ALLISON CAMPAIGN
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$100,000.00	200 MORNINGSIDE
— Forest dit us form	
Expenditure from corporate funds	SAN ANTONIO, TX 78209
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Committee Campaign Continuation
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/01/2024	Targeted Creative Communications
Amount (\$)	Payee address; City; State; Zip Code
\$15,983.98	106 South Columbus St
Expenditure from corporate funds	Alexandria, VA 22314
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 In-Kind Contribution of Political Advertising for the
	Ernest Bailes Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/05/2024	Targeted Creative Communications
Amount (\$)	Payee address; City; State; Zip Code
\$14,325.00	106 South Columbus St
Expenditure from	
corporate funds	Alexandria, VA 22314
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
	In-Kind Contribution of Political Advertising for the Ernest Bailes Campaign
Complete <u>ONLY</u> 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 Committee

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

nent Solicitation/Fundraising Expense
nse 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: Sch: 23/25 Rpt: 33/37	2 FILER NAME The Charles Butt Public Education Political Action 3 Filer ID (Ethics Commission Filers) 00084962
4 Date 02/08/2024	5 Payee name Targeted Creative Communications
6 Amount (\$) \$13,320.47	7 Payee address; City; State; Zip Code 106 South Columbus St
Expenditure from corporate funds	Alexandria, VA 22314
8 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 In-Kind Contribution of Political Advertising for the Ernest Bailes Campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 02/14/2024	Payee name Targeted Creative Communications
Amount (\$) \$12,472.47	Payee address; City; State; Zip Code 106 South Columbus St
Expenditure from corporate funds	Alexandria, VA 22314
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 In-Kind Contribution of Political Advertising for the Ernest Bailes Campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date 02/23/2024	Payee name Targeted Creative Communications
Amount (\$) \$13,320.47	Payee address; City; State; Zip Code 106 South Columbus St
Expenditure from corporate funds	Alexandria, VA 22314
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 In-Kind Contribution of Political Advertising for the Ernest Bailes Campaign
Complete ONLY 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 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	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: 24/25 Rpt: 34/37	The Charles Butt Public Education Political Action 00084962
4 Date	5 Payee name
02/23/2024	Targeted Creative Communications
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$12,472.47	106 South Columbus St
Expenditure from corporate funds	Alexandria, VA 22314
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
LAFENDITORE	Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Advertising for the
	Ernest Bailes Campaign
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
02/23/2024	Targeted Creative Communications
Amount (\$)	Payee address; City; State; Zip Code
\$12,472.47	106 South Columbus St
Expenditure from corporate funds	Alexandria, VA 22314
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Advertising for the Ernest Bailes Campaign
	Emest Bailes Campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experience to bettern eye	
Date	Payee name
02/23/2024	Targeted Creative Communications
Amount (\$)	Payee address; City; State; Zip Code
\$14,325.00	106 South Columbus St
Expenditure from corporate funds	Alexandria, VA 22314
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EAPENDITUKE	Check if Austin, TX, officeholder living expense
	In-Kind Contribution of Political Advertising for the
	Ernest Bailes Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

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/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 25/25 Rpt: 35/37	The Charles Butt Public Education Political Action 00084962
4 Date	5 Payee name
02/07/2024	The Political Group LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5,578.75	4835 Medical Dr
Expenditure from	No. 40111
corporate funds	San Antonio, TX 78229
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Committee Polling Expense
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

PURCHASE OF INVESTMENTS FROM POLITICAL SCHEDULE F3 **CONTRIBUTIONS** 1 Total pages Schedule F3: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 36/37 FILER NAME 3 Filer ID (Ethics Commission Filers) The Charles Butt Public Education Political Action Committee 00084962 Date 5 Name of person from whom investment is purchased 02/14/2024 Jefferson Bank 6 Address of person from whom investment is purchased; City; State; Zip Code P.O. Box 5190 San Antonio, TX 78201 Description of investment 4,360.645 Shares of Fidelity Conservative Income Bond I 8 Amount of investment (\$) 43,868.09

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 37/37 2 FILER NAME Filer ID (Ethics Commission Filers) The Charles Butt Public Education Political Action Committee 00084962 Date 8 Amount (\$) 5 Name of person from whom amount is received 02/01/2024 JEFFERSON BANK \$712.73 6 Address of person from whom amount is received; City; State; Zip Code SAN ANTONIO, TX 78201 Purpose for which amount is received Check if political contribution returned to filer Dividend: Fidelity Investments Money Market Government Portfolio I Amount (\$) Name of person from whom amount is received Date 02/02/2024 JEFFERSON BANK \$12,227.43 Address of person from whom amount is received; City; State; Zip Code SAN ANTONIO, TX 78201 Purpose for which amount is received Check if political contribution returned to filer Dividend: Fidelity Conservative Income Bond I