

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

| | | | | |
|---|--|---|---|--|
| The C/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00083809 | 2 Total pages filed: 37 | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR Mr. | FIRST Matthew R. | MI | OFFICE USE ONLY |
| | NICKNAME | LAST Morgan | SUFFIX | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 503 FM 359 #264 Suite 130 #226 Richmond, TX 77406 | | | Date Hand-delivered or Date Postmarked |
| | | | | Receipt # Amount |
| | | | | Date Processed |
| | | | | Date Imaged |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR Mr. | FIRST Dave | MI | |
| | NICKNAME | LAST Vrshek | SUFFIX | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 503 FM 359 #264 Richmond, TX 77406 | | | |
| | | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION | |
| | (832) | 520-9042 | | |
| 8 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) | | | |
| | <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR) | | | |
| 9 PERIOD COVERED | Month Day Year 01/26/2024 | THROUGH | Month Day Year 02/24/2024 | |
| 10 ELECTION | ELECTION DATE Month Day Year 03/05/2024 | | ELECTION TYPE | |
| | | | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | |
| 11 OFFICE | OFFICE HELD (if any) None | | 12 OFFICE SOUGHT (if known) State Representative District 26 | |

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2 of 37

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

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

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

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

| | | | |
|-------------------------------|---|----|------------|
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 60,606.43 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 125,763.11 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 8,914.97 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 145,564.56 |

17 AFFIDAVIT

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

Mr. Matthew R. Morgan

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

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

3 of 37

| | | |
|--|---|---|
| 18 FILER NAME Morgan, Matthew R. (Mr.) | | 19 Filer ID (Ethics Commission Filers) 00083809 |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 60,606.43 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 3. | <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ 0.00 |
| 4. | <input checked="" type="checkbox"/> SCHEDULE E: LOANS | \$ 0.00 |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 125,763.11 |
| 6. | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ 0.00 |
| 7. | <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 8. | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 0.00 |
| 9. | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ 0.00 |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/21 Rpt: 4/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/20/2024 | 5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00757120) Now Electing Honest Leadership and Service PAC <hr/> 6 Contributor address; City; State; Zip Code Hudson, WI 54016 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Larry <hr/> Contributor address; City; State; Zip Code Rockford, IL 61107 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENTLEY, MARLOWE <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Engineering Manager | | Employer (See Instructions) Wood |
| Date 02/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banttari, Jack <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Mark <hr/> Contributor address; City; State; Zip Code Spring, TX 77379 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/21 Rpt: 5/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/17/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bevis, Blair <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77494 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Principal occupation / Job title (See Instructions) unemployed | | 9 Employer (See Instructions) unemployed |
| Date 02/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bevis, Blair <hr/> Contributor address; City; State; Zip Code Katy, TX 77494 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) unemployed | | Employer (See Instructions) unemployed |
| Date 02/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birkelbach, Phil <hr/> Contributor address; City; State; Zip Code Waller, TX 77484 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) W-Industries, Inc |
| Date 02/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackwell, Thomas <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Manager | | Employer (See Instructions) Venom |
| Date 02/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blankenship, Deborah <hr/> Contributor address; City; State; Zip Code KATY, TX 77494 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/21 Rpt: 6/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 01/29/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonanzinga, Anthony <hr/> 6 Contributor address; City; State; Zip Code Meriden, CT 06451 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 02/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Darrell <hr/> Contributor address; City; State; Zip Code Katy, TX 77494 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Darrell <hr/> Contributor address; City; State; Zip Code Katy, TX 77494 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradshaw, Madelon <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Self-employed | | Employer (See Instructions) Self |
| Date 01/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Britton, William <hr/> Contributor address; City; State; Zip Code Katy, TX 77494 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/21 Rpt: 7/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/09/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, Clifford <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77494 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) retired |
| Date 02/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, DELORES <hr/> Contributor address; City; State; Zip Code Katy, TX 77450 | Amount of Contribution (\$) \$350.00 |
| Principal occupation / Job title (See Instructions) VP | | Employer (See Instructions) Tech-Labs. |
| Date 02/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Charles <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406 | Amount of Contribution (\$) \$150.00 |
| Principal occupation / Job title (See Instructions) Plumber | | Employer (See Instructions) S & B Plumbing |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Charles <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406 | Amount of Contribution (\$) \$150.00 |
| Principal occupation / Job title (See Instructions) Plumber | | Employer (See Instructions) Sugarland Plumbing |
| Date 02/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butcher, Larry <hr/> Contributor address; City; State; Zip Code Houston, TX 77025 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/21 Rpt: 8/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/19/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cave, Anna Cave (H) | 7 Amount of Contribution (\$) |
| | 6 Contributor address; City; State; Zip Code Richmond, TX 77469 | |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clack, Edward | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Burkburnett, TX 76354 | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Melba | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Arlington, TX 76012 | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) Retired |
| Date 02/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cockroft, Ida | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Leslie, MI 49251 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cordova, G | Amount of Contribution (\$) |
| | Contributor address; City; State; Zip Code Richmond, TX 77469 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/21 Rpt: 9/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dabney, Faye <hr/> 6 Contributor address; City; State; Zip Code New Boston, TX 75570 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daily, Robert <hr/> Contributor address; City; State; Zip Code Pasadena, CA 91106 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel, Margaret <hr/> Contributor address; City; State; Zip Code Katy, TX 77494 | Amount of Contribution (\$) \$150.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dick, Eric <hr/> Contributor address; City; State; Zip Code Houston, TX 77007 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Eric Dick |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elswick, Roger <hr/> Contributor address; City; State; Zip Code Houston, TX 77068 | Amount of Contribution (\$) \$10,000.00 |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Community Honda Lafayette |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/21 Rpt: 10/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/06/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUQUA, MATTHEW <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, TX 77469 | 7 Amount of Contribution (\$) \$200.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, Martha <hr/> Contributor address; City; State; Zip Code Lufkin, TX 75904 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gouger, Stephen <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 91040 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grasham, William <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 02/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greeson, Gayla <hr/> Contributor address; City; State; Zip Code Richmond, TN 77469 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/21 Rpt: 11/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/18/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gremminger, Lois <hr/> 6 Contributor address; City; State; Zip Code Richmond, TX 77406 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) retired |
| Date 01/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagin, Karen <hr/> Contributor address; City; State; Zip Code Katy, TX 77494 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Larry <hr/> Contributor address; City; State; Zip Code Garfield, AR 72732 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) Retired |
| Date 02/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Harold <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406 | Amount of Contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heyden, Donald <hr/> Contributor address; City; State; Zip Code Irving, TX 75061 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/21 Rpt: 12/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/16/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heywood, Christie <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77494 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) homemaker | | 9 Employer (See Instructions) homemaker |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Taeko <hr/> Contributor address; City; State; Zip Code Santa Barbara, CA 93105 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Star <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huckeby, Vera <hr/> Contributor address; City; State; Zip Code Mead, NE 68041 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huls, Mark <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406 | Amount of Contribution (\$) \$800.00 |
| Principal occupation / Job title (See Instructions) NA | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/21 Rpt: 13/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/05/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Bryan | 7 Amount of Contribution (\$) \$50.00 |
| 6 Contributor address; City; State; Zip Code Vadnais Heights, MN 55127 | | |
| 8 Principal occupation / Job title (See Instructions) Tool Designer | | 9 Employer (See Instructions) Innovative Tool |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kannel, Patricia | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Sweetwater, TX 79556 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knott, Myrleen | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Richmond, TX 77469 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koenig, Bonnie | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Seguin, TX 78155 | | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) Retired |
| Date 02/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Jami | Amount of Contribution (\$) \$18.36 |
| Contributor address; City; State; Zip Code Katy, TX 77494 | | |
| Principal occupation / Job title (See Instructions) homemaker | | Employer (See Instructions) homemaker |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/21 Rpt: 14/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lavine, David <hr/> 6 Contributor address; City; State; Zip Code Richmond, TX 77469 | 7 Amount of Contribution (\$) \$300.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levin, Herbert <hr/> Contributor address; City; State; Zip Code Burbank, CA 91501 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marsh, Jon <hr/> Contributor address; City; State; Zip Code Katy, TX 77494 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcmurray, Ellen <hr/> Contributor address; City; State; Zip Code Nocona, TX 76255 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) Retired |
| Date 02/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mercer, Dorothy <hr/> Contributor address; City; State; Zip Code Follett, TX 79034 | Amount of Contribution (\$) \$50.24 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/21 Rpt: 15/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/05/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metcalf, Maryann <hr/> 6 Contributor address; City; State; Zip Code Richmond, TX 77469 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michie, William <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459 | Amount of Contribution (\$) \$98.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Robert <hr/> Contributor address; City; State; Zip Code Greenville, NC 27858 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montesa, Sandra <hr/> Contributor address; City; State; Zip Code Harker Heights, TX 76548 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) Retired |
| Date 02/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Linda <hr/> Contributor address; City; State; Zip Code Schulenburg, TX 78956 | Amount of Contribution (\$) \$70.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 13/21 Rpt: 16/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Linda <hr/> 6 Contributor address; City; State; Zip Code Schulenburg, TX 78956 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mott, Michele <hr/> Contributor address; City; State; Zip Code Aledo, TX 76008 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) Retired |
| Date 02/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nehls for Congress <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77469 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Bannon, Glenn <hr/> Contributor address; City; State; Zip Code Glendale, AZ 85302 | Amount of Contribution (\$) \$33.33 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peng, Nathan <hr/> Contributor address; City; State; Zip Code Katy, TX 77494 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) NA | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 14/21 Rpt: 17/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/05/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollak, Bruce <hr/> 6 Contributor address; City; State; Zip Code Richmond, TX 77406 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 01/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pullen, Scott <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 02/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riggles, Thomas <hr/> Contributor address; City; State; Zip Code Austin, TX 78750 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rode, Jack <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Anne <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77406 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 15/21 Rpt: 18/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/05/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rothenberger, Ann | 7 Amount of Contribution (\$) \$10.00 |
| 6 Contributor address; City; State; Zip Code Los Angeles, CA 90027 | | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Geri | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Arlington, TX 76012 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Ronnie | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code Richmond, TX 77469 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rydin, Michael | Amount of Contribution (\$) \$4,000.00 |
| Contributor address; City; State; Zip Code Houston, TX 77081 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauberli, Dean | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code East Bernard, TX 77435 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 16/21 Rpt: 19/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/12/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuster, Leo <hr/> 6 Contributor address; City; State; Zip Code Sugar Land, TX 77478 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shan, Jennifer <hr/> Contributor address; City; State; Zip Code Katy, TX 77494 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Jon <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34231 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shoemate, C.G. <hr/> Contributor address; City; State; Zip Code Edna, TX 77957 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) Retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Sonja <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701 | Amount of Contribution (\$) \$110.00 |
| Principal occupation / Job title (See Instructions) reitred | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 17/21 Rpt: 20/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smart, Harold <hr/> 6 Contributor address; City; State; Zip Code Edmond, OK 73012 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 02/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Matthew <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steed, Martin <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stilwell, Leonard <hr/> Contributor address; City; State; Zip Code Portland, OR 97220 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Samuel <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 18/21 Rpt: 21/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/05/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stumpf, Bobbette | 7 Amount of Contribution (\$) \$25.00 |
| 6 Contributor address; City; State; Zip Code Wylie, TX 75098 | | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturdivant, Allan | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Richmond, TX 77469 | | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Mark | Amount of Contribution (\$) \$20.00 |
| Contributor address; City; State; Zip Code Spring, TX 77379 | | |
| Principal occupation / Job title (See Instructions) NA | | Employer (See Instructions) UA H60 HBO |
| Date 02/08/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans United for a Conservative Majority | Amount of Contribution (\$) \$25,000.00 |
| Contributor address; City; State; Zip Code Victoria, TX 77901 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thistlethwaite, Barry | Amount of Contribution (\$) \$26.50 |
| Contributor address; City; State; Zip Code Dallas, TX 75238 | | |
| Principal occupation / Job title (See Instructions) Technical Writer | | Employer (See Instructions) GXO Inc. |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 19/21 Rpt: 22/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/05/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Carol <hr/> 6 Contributor address; City; State; Zip Code Richmond, TX 77469 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Truman, Mary <hr/> Contributor address; City; State; Zip Code Richmond, TX 77407 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) Retired |
| Date 02/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vacek, Jesse & Lezlie <hr/> Contributor address; City; State; Zip Code Schulenburg, TX 78956 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valerius, John <hr/> Contributor address; City; State; Zip Code Irving, TX 75062 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) Retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vogelsang, Lois <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 20/21 Rpt: 23/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/18/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vrshek, David <hr/> 6 Contributor address; City; State; Zip Code Richmond, TX 77469 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) retired |
| Date 02/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Maria <hr/> Contributor address; City; State; Zip Code Richmond, TX 77407 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 01/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Terence <hr/> Contributor address; City; State; Zip Code Katy, TX 77450 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Sr Manager | | Employer (See Instructions) Sysco |
| Date 01/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Terence <hr/> Contributor address; City; State; Zip Code Katy, TX 77450 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Sr Manager | | Employer (See Instructions) Sysco |
| Date 02/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yang, Xuemei <hr/> Contributor address; City; State; Zip Code Katy, TX 77494 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) Self | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 21/21 Rpt: 24/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeary, John <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77007 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) Legal Discovery | | 9 Employer (See Instructions) BP |
| Date 02/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yowell, Robert <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 02/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zinn, Betty <hr/> Contributor address; City; State; Zip Code Austin, TX 78750 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 02/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) tinderholt, tony <hr/> Contributor address; City; State; Zip Code arlington, TX 76003 | Amount of Contribution (\$) \$1,300.00 |
| Principal occupation / Job title (See Instructions) Military | | Employer (See Instructions) Retired |
| Date 02/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) white, susan <hr/> Contributor address; City; State; Zip Code Katy, TX 77494 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 25/37

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

3 Filer ID (Ethics Commission Filers)
00083809

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule E: Sch: 1/1 Rpt: 26/37 |
| 2 FILER NAME Morgan, Matthew R. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 TOTAL OF UNITEMIZED LOANS | | \$ 0.00 |
| 5 Date of loan | 7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) | 9 Loan Amount (\$) |
| 6 Is lender a financial institution? | 8 Lender address; City; State; Zip Code | 10 Interest Rate |
| | | 11 Maturity Date |
| 12 Principal occupation / Job title (See Instructions) | | 13 Employer (See Instructions) |
| 14 Description of Collateral <input type="checkbox"/> None | | 15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/> |
| 16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable | 17 Name of guarantor | 19 Amount Guaranteed (\$) |
| | 18 Guarantor address; City; State; Zip Code | |
| 20 Principal occupation | | 21 Employer (See Instructions) |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 1/11 Rpt: 27/37 | 2 FILER NAME Morgan, Matthew R. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/08/2024 | 5 Payee name 512 New Media | |
| 6 Amount (\$) \$5,106.14 | 7 Payee address; City; State; Zip Code 6161 Savoy Dr Suite 1200A Houston, TX 77036 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/21/2024 | Payee name 512 New Media | |
| Amount (\$) \$2,481.54 | Payee address; City; State; Zip Code 6161 Savoy Dr Suite 1200A Houston, TX 77036 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ad |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/24/2024 | Payee name Anedot | |
| Amount (\$) \$277.52 | Payee address; City; State; Zip Code 1340 Poydras, Suite 1770 New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 2/11 Rpt: 28/37 | 2 FILER NAME Morgan, Matthew R. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00083809 |
|---|---|--|

| | |
|-----------------------------|--------------------------------|
| 4 Date 02/08/2024 | 5 Payee name B1 Bank |
|-----------------------------|--------------------------------|

| | |
|---------------------------------|--|
| 6 Amount (\$) \$20.00 | 7 Payee address; City; State; Zip Code 24701 Southwest Freeway Suite 700 Rosenberg, TX 77471 |
|---------------------------------|--|

| | | |
|---------------------------------|---|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee |
|---------------------------------|---|--|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|-----------------------|
| Date 02/20/2024 | Payee name B1 Bank |
|--------------------|-----------------------|

| | |
|------------------------|---|
| Amount (\$) \$40.00 | Payee address; City; State; Zip Code 24701 Southwest Freeway Suite 700 Rosenberg, TX 77471 |
|------------------------|---|

| | | |
|------------------------|--|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees |
|------------------------|--|--|

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

| | |
|--------------------|---------------------------------|
| Date 02/01/2024 | Payee name Bonfire Data, LLC |
|--------------------|---------------------------------|

| | |
|-------------------------|---|
| Amount (\$) \$900.00 | Payee address; City; State; Zip Code 1900 East 15th Street, Ste 600A Edmond, OK 73013 |
|-------------------------|---|

| | | |
|------------------------|---|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising |
|------------------------|---|--|

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

| | |
|--|--|
| | |
|--|--|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 3/11 Rpt: 29/37 | 2 FILER NAME Morgan, Matthew R. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00083809 |
|---|---|--|

| | |
|-----------------------------|--|
| 4 Date 02/06/2024 | 5 Payee name Bonfire Data, LLC |
|-----------------------------|--|

| | |
|----------------------------------|--|
| 6 Amount (\$) \$350.00 | 7 Payee address; City; State; Zip Code 1900 East 15th Street, Ste 600A Edmond, OK 73013 |
|----------------------------------|--|

| | | |
|---------------------------------|--|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad |
|---------------------------------|--|--|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|---------------------------------|
| Date 02/07/2024 | Payee name Bonfire Data, LLC |
|--------------------|---------------------------------|

| | |
|-------------------------|---|
| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 1900 East 15th Street, Ste 600A Edmond, OK 73013 |
|-------------------------|---|

| | | |
|------------------------|---|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad |
|------------------------|---|---|

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

| | |
|--------------------|---------------------------------|
| Date 02/12/2024 | Payee name Bonfire Data, LLC |
|--------------------|---------------------------------|

| | |
|-------------------------|---|
| Amount (\$) \$850.00 | Payee address; City; State; Zip Code 1900 East 15th Street, Ste 600A Edmond, OK 73013 |
|-------------------------|---|

| | | |
|------------------------|---|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad |
|------------------------|---|---|

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

| | |
|--|--|
| | |
|--|--|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|----------|--|--|--|---------------|---|
| 1 | Total pages Schedule F1: Sch: 4/11 Rpt: 30/37 | 2 | FILER NAME Morgan, Matthew R. (Mr.) | 3 | Filer ID (Ethics Commission Filers) 00083809 |
| 4 | Date 02/15/2024 | 5 | Payee name Bonfire Data, LLC | | |
| 6 | Amount (\$) \$800.00 | 7 | Payee address; City; State; Zip Code 1900 East 15th Street, Ste 600A Edmond, OK 73013 | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad | | |
| 9 | | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 02/16/2024 | | Payee name Bonfire Data, LLC | | |
| | Amount (\$) \$800.00 | | Payee address; City; State; Zip Code 1900 East 15th Street, Ste 600A Edmond, OK 73013 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ad | | |
| | | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 02/20/2024 | | Payee name Bonfire Data, LLC | | |
| | Amount (\$) \$1,370.96 | | Payee address; City; State; Zip Code 1900 East 15th Street, Ste 600A Edmond, OK 73013 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ad | | |
| | | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|----------|--|--|--|---------------|---|
| 1 | Total pages Schedule F1: Sch: 5/11 Rpt: 31/37 | 2 | FILER NAME Morgan, Matthew R. (Mr.) | 3 | Filer ID (Ethics Commission Filers) 00083809 |
| 4 | Date 02/21/2024 | 5 | Payee name Bonfire Data, LLC | | |
| 6 | Amount (\$) \$500.00 | 7 | Payee address; City; State; Zip Code 1900 East 15th Street, Ste 600A Edmond, OK 73013 | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ad | | |
| 9 | | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 02/24/2024 | | Payee name Bonfire Data, LLC | | |
| | Amount (\$) \$800.00 | | Payee address; City; State; Zip Code 1900 East 15th Street, Ste 600A Edmond, OK 73013 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ad | | |
| | | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 01/26/2024 | | Payee name Catamaran Consulting | | |
| | Amount (\$) \$3,735.00 | | Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing | | |
| | | Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 6/11 Rpt: 32/37 | 2 FILER NAME Morgan, Matthew R. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 01/26/2024 | 5 Payee name Catamaran Consulting | |
| 6 Amount (\$) \$6,000.00 | 7 Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/29/2024 | Payee name Catamaran Consulting | |
| Amount (\$) \$2,000.00 | Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/29/2024 | Payee name Catamaran Consulting | |
| Amount (\$) \$6,224.00 | Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 7/11 Rpt: 33/37 | 2 FILER NAME Morgan, Matthew R. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00083809 |
|---|---|--|

| | |
|-----------------------------|---|
| 4 Date 01/29/2024 | 5 Payee name Catamaran Consulting |
|-----------------------------|---|

| | |
|------------------------------------|--|
| 6 Amount (\$) \$7,063.00 | 7 Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036 |
|------------------------------------|--|

| | | |
|---------------------------------|---|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing |
|---------------------------------|---|--|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|------------------------------------|
| Date 02/09/2024 | Payee name Catamaran Consulting |
|--------------------|------------------------------------|

| | |
|---------------------------|---|
| Amount (\$) \$8,000.00 | Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036 |
|---------------------------|---|

| | | |
|-------------------------------|---|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing |
|-------------------------------|---|--|

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

| | |
|--------------------|------------------------------------|
| Date 02/12/2024 | Payee name Catamaran Consulting |
|--------------------|------------------------------------|

| | |
|---------------------------|---|
| Amount (\$) \$8,335.00 | Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036 |
|---------------------------|---|

| | | |
|-------------------------------|---|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing |
|-------------------------------|---|--|

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

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 8/11 Rpt: 34/37 | 2 FILER NAME Morgan, Matthew R. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/15/2024 | 5 Payee name Catamaran Consulting | |
| 6 Amount (\$) \$3,235.00 | 7 Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/15/2024 | Payee name Catamaran Consulting | |
| Amount (\$) \$5,000.00 | Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/20/2024 | Payee name Catamaran Consulting | |
| Amount (\$) \$9,000.00 | Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 9/11 Rpt: 35/37 | 2 FILER NAME Morgan, Matthew R. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00083809 |
|---|---|--|

| | |
|-----------------------------|---|
| 4 Date 02/22/2024 | 5 Payee name Catamaran Consulting |
|-----------------------------|---|

| | |
|------------------------------------|--|
| 6 Amount (\$) \$2,000.00 | 7 Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036 |
|------------------------------------|--|

| | | |
|---------------------------------|---|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print |
|---------------------------------|---|---|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|------------------------------------|
| Date 02/22/2024 | Payee name Catamaran Consulting |
|--------------------|------------------------------------|

| | |
|---------------------------|---|
| Amount (\$) \$6,000.00 | Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036 |
|---------------------------|---|

| | | |
|-------------------------------|---|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print |
|-------------------------------|---|---|

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

| | |
|--------------------|------------------------------------|
| Date 02/23/2024 | Payee name Catamaran Consulting |
|--------------------|------------------------------------|

| | |
|---------------------------|---|
| Amount (\$) \$9,735.00 | Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036 |
|---------------------------|---|

| | | |
|-------------------------------|---|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print |
|-------------------------------|---|---|

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

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: Sch: 10/11 Rpt: 36/37 | 2 FILER NAME Morgan, Matthew R. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00083809 |
| 4 Date 02/24/2024 | 5 Payee name Catamaran Consulting | |
| 6 Amount (\$) \$9,000.00 | 7 Payee address; City; State; Zip Code 5042 Wilshire Blvd Suite 45064 Los Angeles, CA 90036 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/12/2024 | Payee name Conservative Media Properties | |
| Amount (\$) \$7,500.00 | Payee address; City; State; Zip Code 1533 W. Alabama Houston, TX 77006 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/21/2024 | Payee name Red Data Wins | |
| Amount (\$) \$1,758.80 | Payee address; City; State; Zip Code 651 N. BROAD STREET - SUITE 201 Niddletown, DE 19709 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ad |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 11/11 Rpt: 37/37 | 2 FILER NAME Morgan, Matthew R. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00083809 |
|--|---|--|

| | |
|-----------------------------|-------------------------------------|
| 4 Date 02/16/2024 | 5 Payee name Safari Ranch |
|-----------------------------|-------------------------------------|

| | |
|------------------------------------|--|
| 6 Amount (\$) \$1,265.55 | 7 Payee address; City; State; Zip Code 11627 FM 1464 Richmond, TX 77407 |
|------------------------------------|--|

| | | |
|---------------------------------|--|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event |
|---------------------------------|--|---|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|---|
| Date 02/01/2024 | Payee name The What's Up Radio Program |
|--------------------|---|

| | |
|----------------------------|--|
| Amount (\$) \$15,000.00 | Payee address; City; State; Zip Code 10924 Grant Road #133 Houston, TX 77070 |
|----------------------------|--|

| | | |
|-------------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising |
|-------------------------------|--|---|

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

| | |
|--------------------|------------------------------|
| Date 01/29/2024 | Payee name Tractor Supply |
|--------------------|------------------------------|

| | |
|-------------------------|--|
| Amount (\$) \$115.60 | Payee address; City; State; Zip Code 27127 Southwest Freeway Rosenberg, TX 77471 |
|-------------------------|--|

| | | |
|-------------------------------|--|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-Post |
|-------------------------------|--|--|

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