CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commi 00065973		2 Total pages file 7:	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY
OFFICEHOLDER NAME	The Honorable	Giovanni S.			Date Received	
10 001					ELECTRONICA	JII V EII ED
					02/26/2024	CLI FILLD
	NICKNAME	LAST		SUFFIX	02/20/2024	
		Capriglione				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING	1352 Ten Bar Trail					
ADDRESS					Receipt #	Amount
Change of Address	Southlake, TX 76092					
	Southake, 17 70032				Date Processed	
					Date Imaged	
- 044541041	140 / 14D0 / 14D	FIRST			<u> </u>	
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI		
NAME	Mrs.	Elisa B.				
	NICKNAME	LAST		SUFFIX		
		Capriglione				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP ⁻	Γ/SUITE#; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	1352 Ten Bar Trail					
(Residence or Business)	Southlake, TX 76092					
7 CAMPAIGN	AREA CODE PHON	IE NUMBER E	EXTENSION			
TREASURER PHONE	(214) 500-3302					
8 REPORT						
TYPE	January 15	30th day before	e election	Runoff	15th day after can appointment (offic	
	July 15	8th day before	election \square	Exceeded modified	Final Report (Atta	
		Can day before		reporting limit	I mai report (rata	on Grotting
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/26/2024	TH	IROUGH	02/24/202		
	01/20/2024			02/24/202	.4	
10 ELECTION	ELECTION DATE	- 1		ELECTION TYPE		
LIO ELECTION	Month Day Year	XP	rimary	Runoff	Other	
	03/05/2024		Timary			
	00/00/2024		eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	State Representative Distr	rict 98 Tarrant		State Represent	ative District 98	
				1		
		CO T				
		GO I	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

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13 C / OH NAME	Capriglione, Giovann	i S. (The Honorable)	14 Filer ID 00065973	(Ethics Com	mission Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	eholder's kno	wledge or				
X Additional Pages	COMMITTEE TYPE	COMMITTEE NAME							
	X GENERAL	TREPAC							
		COMMITTEE ADDRESS							
	SPECIFIC	1115 San Jacinto Blvd							
		Ste 200							
		Austin, TX 78701							
		COMMITTEE CAMPAIGN TREASURER NAME							
		Cantu, Leslie							
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS						
		PO Box 2246							
		Austin, TX 78701		_					
16 CONTRIBUTION TOTALS	\$	150.00							
	\$	123,040.49							
EXPENDITURE TOTALS									
	4. TOTAL POLITIC	AL EXPENDITURES		\$	84,567.31				
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE I	LAST DAY OF THE	\$	341,312.32				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00				
17 AFFIDAVIT				-					
		I swear, or affirm, under penal true and correct and includes a under Title 15, Election Code.	ty of perjury, that the accall information required t	companying o be reporte	report is d by me				
		The Honoral	ole Giovanni S. Capriç	glione					
			of Candidate or Officehol						
AFFIX NO	TARY STAMP / SEAL ABO	OVE							
		aid	, this the		_ day				
of	, 20, to ce	ertify which, witness my hand and seal of office.							
Signature of office	cer administering	Printed name of officer administering	Title of office	r administeri	ng oath				

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH ADDENDUM

Page 3 of 71

				Fage 3 01 / 1
C / OH NAME	Capriglione, Giovanni	S. (The Honorable)	Filer ID 00065973	(Ethics Commission Filers)
.7 NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have b	of political expenditures by political committees to been made without the candidate's or officeholded to report this information only if they receive no	r's knowledge or co	onsent. Candidates and
. ,	COMMITTEE TYPE			
	X GENERAL	Texas Alliance for Life PAC		
		COMMITTEE ADDRESS		
	SPECIFIC	8000 Centre Park Dr		
	-	Suite 380		
		Austin, TX 78754		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Shaw, James		
		COMMITTEE CAMPAIGN TREASURER ADDR	ESS	
		4505 Corazon CV		
		Round Rock, TX 78681		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

					4 of 71
_	ER NAN	ME ne, Giovanni S. (The Honorable)	19 Filer ID 00065973	(Ethio	cs Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	106,634.86
2.	X	\$	16,405.63		
3.		\$			
4.		\$			
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	84,567.31	
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10	. 🗆	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	. 🗆	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this for	orm.	1	Total pages Schedule A1: Sch: 1/32 Rpt: 5/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)			3	Filer ID (Ethics Commission 00065973	on Filers)
4	Date 02/09/2024	5 Full name of contributorA. & M. PAC6 Contributor address; City; S	out-of-state PAC (ID#:_ ate; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78768					
8	Principal occu	pation / Job title (See Instructions	s)	9 Employer (See Instructions	()		
	Date 02/09/2024	Full name of contributor Abbott Laboratories Empl Contributor address; City; S Abbott Park, IL 60064		C00040279)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Date 02/03/2024	Full name of contributor Adams, Mark Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$52.05
	Dringing aggr	Grapevine, TX 76051		Employer (See Instructions	_		
	retired	pation / Job title (See Instructions) 	Employer (See Instructions retired	')		
	Date 02/09/2024				Amount of Contribution (\$)	\$1,000.00	
	Principal occu Radiologist	pation / Job title (See Instructions	s)	Employer (See Instructions Self	()		
	Date 02/06/2024	Full name of contributor Alwxander, Beth Contributor address; City; S Southlake, TX 76092	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$52.05
	Principal occu Teacher	pation / Job title (See Instructions	5)	Employer (See Instructions Carroll ISD	i)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 2/32 Rpt: 6/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)		3	Filer ID (Ethics Commission 00065973	on Filers)
4	Date 02/09/2024	 Full name of contributor out-of-state PAC (ID# Ancira Strategic Partners LLP Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$500.00
		Austin, TX 78701	1			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 01/29/2024	Full name of contributor out-of-state PAC (ID# Anderson, Gary Contributor address; City; State; Zip Code	<u>; </u>		Amount of Contribution (\$)	\$250.00
	Dringing agg	Southlake, TX 76092	Employer (See Instruction	<u></u>		
	Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date 02/14/2024	Full name of contributor out-of-state PAC (ID# Associated General Contractors of Texas PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
		Austin, TX 78768				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 02/09/2024	Full name of contributor out-of-state PAC (ID# Atmos Energy Corporation PAC Contributor address; City; State; Zip Code Dallas, TX 75240	÷)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date 02/07/2024	Full name of contributor out-of-state PAC (ID# Autry, Carmen Contributor address; City; State; Zip Code Keller, TX 76248	#:)		Amount of Contribution (\$)	\$26.03
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions NTD Mechanical	s)		
			-			

	MONET	ARY POLITICAL (CONTRIBUTIO	Ν	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 3/32 Rpt: 7/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)				3	Filer ID (Ethics Commission 00065973	n Filers)
4	Date 01/31/2024	5 Full name of contributor Baker, William6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
8	Dringing! goog	Southlake, TX 76092		_	Employer (See Instructions	<u>''</u>		
0	accounting (1	pation / Job title (See Instructions treasurer))	9	Southlake Jewelers	·)		
	Date 02/06/2024	Full name of contributor Bartlett, Lee Contributor address; City; Si				•	Amount of Contribution (\$)	\$52.05
	Principal occu	Southlake, TX 76092 pation / Job title (See Instructions	s)		Employer (See Instructions	<u> </u>		
	retired				retired			
	Date 02/06/2024	Full name of contributor Beck, Richard Contributor address; City; Si	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$26.03
		Southlake, TX 76092						
	Principal occu Business Ow	pation / Job title (See Instructions vner	s) 		Employer (See Instructions Self Employed	5)		
	Date O1/26/2024 Full name of contributor out-of-state PAC (ID#: Bollinger, Earl Contributor address; City; State; Zip Code Grapevine, TX 76051)		Amount of Contribution (\$)	\$75.00		
	Principal occu computer an	pation / Job title (See Instructions alyst	(3)		Employer (See Instructions retired GE	5)		
	Date 02/09/2024	Full name of contributor Bowling, John Contributor address; City; Si Southlake, TX 76092	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$250.00
	Principal occu NA	pation / Job title (See Instructions	(3)		Employer (See Instructions	5)		
			1					

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 4/32 Rpt: 8/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)				3	Filer ID (Ethics Commission 00065973	n Filers)
4	Date 02/04/2024	5 Full name of contributor Bowman, Kirk6 Contributor address; City; S	out-of-state PAC (ID#:ate; Zip Code)	7	Amount of Contribution (\$)	\$104.10
_	Deire die alle access	COLLEYVILLE, TX 76034		_	For all and (On a location of the co			
8		pation / Job title (See Instructions corporate Accounts	(1)	9	Employer (See Instructions ICU Medical	5)		
	Date 02/05/2024	Full name of contributor Braun, Louis Contributor address; City; S)		Amount of Contribution (\$)	\$52.05
	Principal occu	Southlake, TX 76092 pation / Job title (See Instructions) 1		Employer (See Instructions	;) 		
	retired	panon, ees and (ees menachens	,		retired	-,		
	Date 02/09/2024	Full name of contributor Brennan, Matt & Karen Contributor address; City; S	out-of-state PAC (ID#:_ ate; Zip Code)	•	Amount of Contribution (\$)	\$250.00
		Keller, TX 76248						
	Principal occu Engineers	pation / Job title (See Instructions)		Employer (See Instructions Lockheed Martin	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/09/2024 Brigham, Brad Contributor address; City; State; Zip Code Colleyville, TX 76034			Amount of Contribution (\$)	\$500.00			
	Principal occu Executive	pation / Job title (See Instructions)		Employer (See Instructions BEPCO, L.P.	5)		
	Date 02/03/2024	Full name of contributor Brinkschroeder, Dale Contributor address; City; S Fort Worth, TX 76137	out-of-state PAC (ID#:_			•	Amount of Contribution (\$)	\$260.25
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions The Floor Store of Kelle			

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to co	omplete this form	n.	1	Total pages Schedule A1: Sch: 5/32 Rpt: 9/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)			3	Filer ID (Ethics Commission 00065973	on Filers)
4	Date 01/30/2024	Brown, Gregory	c-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$250.00
_	Deinainal agai	Keller, TX 76262	lo-	Frankrick (Cook books estimate			
8	Sales	pation / Job title (See Instructions)		Employer (See Instructions WW Cannon, Ilc.	5)		
	Date 02/09/2024	Full name of contributor out Buczek, Gloria Contributor address; City; State; Zip	or Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Southlake, TX 76092 pation / Job title (See Instructions)		Employer (See Instructions			
	NA	pation / 300 title (3ee instructions)		NA	')		
	Date 02/09/2024	Full name of contributor X out-of-state PAC (ID#: C00354241) CGI Technologies and Solutions Inc PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00	
		Fairfax, VA 22030					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 02/06/2024	Cadiz, Jesse	of-state PAC (ID#:			Amount of Contribution (\$)	\$75.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 02/09/2024	Full name of contributor out Cammack & Strong, P.C. Contributor address; City; State; Zip Austin, TX 78701	o Code			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			l .				

	MONEI	ARY POLITICAL CONTRIBUTION	יוכ	NS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 6/32 Rpt: 10/71
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Capriglione,	Giovanni S. (The Honorable)			L	00065973
4	Date 02/06/2024	5 Full name of contributor out-of-state PAC (ID#:_ Capriglione, Frank			7	Amount of Contribution (\$) \$500.00
		6 Contributor address; City; State; Zip Code Dallas, TX 75214				
8	Principal occu	pation / Job title (See Instructions)	۹	Employer (See Instructions	:) 	
Ĭ	NA	patient to be the coordinate of the coordinate o	ľ	NA	,,	
	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>)		Amount of Contribution (\$)
	02/09/2024	Carriage House Partners LLC		,		\$2,500.00
		Contributor address; City; State; Zip Code				
		, , , , , , , , , , , , , , , , , , ,				
	5: : 1	Austin, TX 78767	_		Ĺ	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>)		Amount of Contribution (\$)
	02/08/2024	Caterpillar Inc. PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Irving, TX 75039				
	Principal occu	pation / Job title (See Instructions)	Г	Employer (See Instructions	<u> </u>	
		,		, ., . (,	
	Date	Full name of contributor x out-of-state PAC (ID#:	C0	0397651)		Amount of Contribution (\$)
	02/09/2024	Centene Corporation Political Action Committee	9			\$500.00
		Contributor address; City; State; Zip Code				
		St. Louis, MO 63105				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>	
	Date	Full name of contributor X out-of-state PAC (ID#:	C0	0397651)		Amount of Contribution (\$)
	02/09/2024	Centene Corporation Political Action Committee	; 			\$750.00
		Contributor address; City; State; Zip Code				
		St. Louis, MO 63105				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/32 Rpt: 11/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)		3	Filer ID (Ethics Commission 00065973	on Filers)
4	Date 02/09/2024	 Full name of contributor out-of-state PAC (ID#:_Centerpoint Energy, Inc. Political Action Commi Contributor address; City; State; Zip Code 	ttee	7	Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77210				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 02/06/2024	Full name of contributor out-of-state PAC (ID#:_Chapman, Chris Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Denton, TX 76207	1			
	Entrepreneu	pation / Job title (See Instructions) r	Employer (See Instructions Consave Consulting LLC			
	Date 02/09/2024	Full name of contributor out-of-state PAC (ID#:_ Charter Communications inc Texas PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 02/14/2024	Full name of contributor out-of-state PAC (ID#:_ Charter Schools Now PAC Contributor address; City; State; Zip Code Austin, TX 78704			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/09/2024	Full name of contributor X out-of-state PAC (ID#:_ Chevron Employees PAC Contributor address; City; State; Zip Code San Ramon, CA 94583	C00035006)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			l			

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how t	o complete this form	m.	1	Total pages Schedule A1: Sch: 8/32 Rpt: 12/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)			3	Filer ID (Ethics Commission 00065973	n Filers)
4	Date 02/09/2024	6 Contributor address; City; Stat	out-of-state PAC (ID#:e; Zip Code)	7	Amount of Contribution (\$)	\$500.00
_	Delevieral	Keller, TX 76248	T _o	Frankrick (Control to the street)	_		
8	Self-Employe	pation / Job title (See Instructions) ed	9	Employer (See Instructions Peachtree Construction		d.	
	Date 02/09/2024	Full name of contributor Clark, Doug Contributor address; City; Stat)		Amount of Contribution (\$)	\$50.00
		Grapevine, TX 76051					
	Principal occu EVP	pation / Job title (See Instructions)		Employer (See Instructions Loan Express	5)		
	Date 02/06/2024	Full name of contributor Clegg, Travis Contributor address; City; Stat	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$25.00
		Fort Worth, TX 76244					
	Principal occu Civil Enginee	pation / Job title (See Instructions) er		Employer (See Instructions Westwood	5)		
	Date 02/09/2024	Full name of contributor Cochran, Stacy Contributor address; City; Stat Roanoke, TX 76262				Amount of Contribution (\$)	\$100.00
	Principal occu Chief Service	pation / Job title (See Instructions) e Officer		Employer (See Instructions 90 Degree Benefits	()		
	Date 02/09/2024	Full name of contributor Congress Avenue Partners, Contributor address; City; Stat Austin, TX 78701)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			L				

	MONET	MONETARY POLITICAL CONTRIBUTIONS						E A1
	The Instru	ction Guide explains hov	v to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 9/32 Rpt: 13/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)				3	Filer ID (Ethics Commission 00065973	on Filers)
4	Date 02/05/2024	5 Full name of contributor Contaldi, Mario6 Contributor address; City; S	out-of-state PAC (ID#:_			7	Amount of Contribution (\$)	\$260.25
_		Keller, TX 76248		_				
8	Eye doctor	pation / Job title (See Instruction	S)	9	Employer (See Instructions Self	5)		
	Date 02/04/2024	Full name of contributor Coplen, Nancy Contributor address; City; S)	•	Amount of Contribution (\$)	\$260.25
	Principal occu	Colleyville, TX 76034	ls ls		Employer (See Instructions	<u>:)</u>		
	retired	pation / 300 title (See instruction	5)		retired	•)		
	Date 01/29/2024	Full name of contributor Coy, Carol Contributor address; City; S)		Amount of Contribution (\$)	\$50.00
	Dringing aggr	Watauga, TX 76148	2)		Employer (Coo Instructions	<u></u>		
	Citizen Activ	pation / Job title (See Instruction ist	5)		Employer (See Instructions Retired	·)		
	Date 02/09/2024	Full name of contributor DTH Strategies, LLC Contributor address; City; S Austin, TX 78701)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instruction	s)		Employer (See Instructions	5)		
	Date 02/09/2024	Full name of contributor Danielle Delgadillo Conso Contributor address; City; S Austin, TX 78701					Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instruction	s)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 10/32 Rpt: 14/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)		3	Filer ID (Ethics Commission 00065973	on Filers)
4	Date 02/09/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
		Mansfield, TX 76063	1			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 02/06/2024	Full name of contributor out-of-state PAC (ID#: Davies, Michael Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Colleyville, TX 76034				
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Ryan Law Firm, PLLC	s)		
	Date 02/09/2024	Full name of contributor			Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701	,			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/09/2024	Full name of contributor x out-of-state PAC (ID#: Deloitte Political Action Committee Contributor address; City; State; Zip Code Washington, DC 20044	C00211318)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/09/2024	Full name of contributor out-of-state PAC (ID#: Energy Transfer Partners Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			I			

	MONET	ARY POLITICAL C		SCHEDULE A1				
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 11/32 Rpt: 15/71		
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)			3	Filer ID (Ethics Commission 00065973	on Filers)	
4	Date 02/09/2024	5 Full name of contributor Erben & Yarbrough6 Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00	
		Austin, TX 78701						
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)			
	Date 02/09/2024	Full name of contributor FOMCPAC Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$1,500.00	
	Dringing Lagra	Dallas, TX 75230	\	Frankrian (Can Instruct	ia ma)			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)			
	Date 02/09/2024	Full name of contributor Fickes, Grover (Gary) Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$300.00	
		Colleyville, TX 76034						
	Principal occu County Com	pation / Job title (See Instructions missioner)	Employer (See Instruct Tarrant County	ions)			
	Date 02/05/2024	Full name of contributor Finley, Jacqueline Contributor address; City; St Colleyville, TX 76034				Amount of Contribution (\$)	\$52.05	
	Principal occu Wealth Advis	pation / Job title (See Instructions sor)	Employer (See Instruct Saorsa Wealth Mana		nt LLC		
	Date 02/06/2024	Full name of contributor Fitzner, William Dustin Contributor address; City; St Euless, TX 76040	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00	
	Principal occu Tech	pation / Job title (See Instructions)	Employer (See Instruct Cisco	ions)			
			'					

	MONET	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 12/32 Rpt: 16/71			
2	FILER NAME	Giovanni S. (The Heneralis)			3	Filer ID (Ethics Commission 00065973	on Filers)		
_		Giovanni S. (The Honorable)			Ļ				
4	Date 02/09/2024	5 Full name of contributor Foley & Lardner LLP	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$1,500.00		
		6 Contributor address; City; St	tate; Zip Code						
		Dallas, TX 75201							
8	Principal occu	pation / Job title (See Instructions	9	Employer (See Instructions	s)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)			
	02/06/2024	GASMIRE, Denise	out of state 1 No (15#			, another of contribution (¢)	\$104.10		
		Contributor address; City; Si	tate; Zip Code		l				
		North Richland Hills, TX 7	'6180						
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	<u> </u>				
	HCS Provide		,	Champion Services	,				
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)			
	01/28/2024	Garabedian, Michael					\$500.00		
		Contributor address; City; Si	tate; Zip Code						
		Southlake, TX 76092							
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	5)				
	Builder			Garabedian					
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)			
	01/26/2024	Goff, Beverly					\$100.00		
		Contributor address; City; Si							
		Grapevine, TX 76051							
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	5)				
	Retired			Retired					
	Date	Full name of contributor	x out-of-state PAC (ID#: C0	0266585		Amount of Contribution (\$)			
	02/09/2024	Greenberg Traurig, P.A. F	Political Action Committe	е			\$1,000.00		
		Contributor address; City; Si	tate; Zip Code						
		Albany, NY 12207							
	Principal occu	pation / Job title (See Instructions	(3)	Employer (See Instructions	5)				

	MONET	MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1		
	The Instruc	ction Guide explains how	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 13/32 Rpt: 17/71			
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)				3	Filer ID (Ethics Commission 00065973	on Filers)		
4	Date 02/15/2024	5 Full name of contributor HARVEY, TONI6 Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code			7	Amount of Contribution (\$)	\$10.00		
		FORT WORTH, TX 7624								
8	Principal occu retired	pation / Job title (See Instruction	5)	9	Employer (See Instructions retired	5)				
	Date 02/13/2024	Full name of contributor HAWKS, GEORGE Contributor address; City; S)		Amount of Contribution (\$)	\$25.00		
	Principal occu	Southlake, TX 76092 pation / Job title (See Instruction	s)		Employer (See Instructions	<u>:)</u>				
	retired	pation / cob title (eee monaction	-)		retired	-,				
	Date 02/09/2024	Full name of contributor HCA Good Government Contributor address; City; S)	•	Amount of Contribution (\$)	\$500.00		
		Dallas, TX 75240								
	Principal occu	pation / Job title (See Instruction	5)		Employer (See Instructions	s)				
	Date 02/09/2024	Full name of contributor HOMEPAC of TEXAS Contributor address; City; S Austin, TX 78701)		Amount of Contribution (\$)	\$1,500.00		
	Principal occu	pation / Job title (See Instruction	5)		Employer (See Instructions	<u>I</u> S)				
	Date 02/09/2024	Full name of contributor HS Law PAC Contributor address; City; S Austin, TX 78701	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$500.00		
	Principal occu	pation / Job title (See Instruction	s)		Employer (See Instructions	5)				

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 14/32 Rpt: 18/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)			3	Filer ID (Ethics Commission 00065973	on Filers)
4	Date 02/09/2024	5 Full name of contributor Hammer and Nails Club - Ca6 Contributor address; City; State;)	7	Amount of Contribution (\$)	\$1,000.00
		Fort Worth, TX 76102					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 01/31/2024	Full name of contributor Hanlon, Blake Contributor address; City; State;				Amount of Contribution (\$)	\$100.00
	Dringing agg	Atlanta, GA 30306		Employer (See Instructions	_		
	VP, Texas	pation / Job title (See Instructions)		Equifax Workforce Solut		IS	
	Date 02/05/2024	Full name of contributor Hartman, Charles Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$52.05
		Keller, TX 76248					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	i)		
	Date 02/03/2024	Hill, Laura	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$26.03
	Principal occu Publisher	pation / Job title (See Instructions)		Employer (See Instructions Downey Publishing	()		
	Date 01/30/2024	Full name of contributor Huddleston, Gary Contributor address; City; State; Southlake, TX 76092	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Texas Retailers Associa		n	

	MONET	ARY POLITICAL COI	NTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 15/32 Rpt: 19/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)			3	Filer ID (Ethics Commission 00065973	n Filers)
4	Date 02/09/2024	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Austin, TX 76751 pation / Job title (See Instructions)	9	Employer (See Instructions)		
•	Consultant	panon, our and (our monache)		Hillco	,		
	Date 02/13/2024	Full name of contributor Grant	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 02/15/2024	Full name of contributor Contributor Contributor address; City; State; 2	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78750					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 02/03/2024	Jesberg, William Contributor address; City; State; 2	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$26.03
	Principal occu	Grapevine, TX 76051 pation / Job title (See Instructions)		Employer (See Instructions retired)		
	Date 02/06/2024	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Director	pation / Job title (See Instructions)		Employer (See Instructions United Care)		
			l				

	MONEI	ARY POLITICAL CONTI	RIBUTION	is 		SCHEDUI	E A1
	The Instru	ction Guide explains how to com	plete this for	m.	1	Total pages Schedule A1: Sch: 16/32 Rpt: 20/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)			3	Filer ID (Ethics Commission 00065973	on Filers)
4	Date 02/06/2024	 5 Full name of contributor out-of- Jones, Kellen 6 Contributor address; City; State; Zip Contributor 	state PAC (ID#:)	7	Amount of Contribution (\$)	\$25.00
8		Keller, TX 76248 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> ;)		
	Date 02/07/2024		state PAC (ID#:	Cowtown Caller		Amount of Contribution (\$)	\$26.03
	Principal occu Floor Coveri	pation / Job title (See Instructions)		Employer (See Instructions Self	<u>(</u>		
	Date 02/09/2024	K&L Gates LLP Committee for Goo Contributor address; City; State; Zip Co				Amount of Contribution (\$)	\$2,000.00
	Principal occu	Dallas, TX 75201 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Date 02/07/2024	Keller, John)		Amount of Contribution (\$)	\$26.03
	Principal occu Sales	pation / Job title (See Instructions)		Employer (See Instructions NTD Mechanical	<u> </u> 5)		
	Date 02/09/2024	Full name of contributor out-of- Kelley, Russell (Mr.) Contributor address; City; State; Zip Co	state PAC (ID#:			Amount of Contribution (\$)	\$2,500.00
	Principal occu Partner	pation / Job title (See Instructions)		Employer (See Instructions Blackridge	5)		

	MONET	ARY POLITICAL CON	ITRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to c	omplete this forn	n.	1	Total pages Schedule A1: Sch: 17/32 Rpt: 21/71	
2	FILER NAME	Giovanni S. (The Honorable)			3	Filer ID (Ethics Commission 00065973	on Filers)
4	Date 01/31/2024	·	ut-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
		Southlake, TX 76092					
8	Principal occu Consulting	pation / Job title (See Instructions)		Employer (See Instructions Deloitte	5)		
	Date 02/09/2024	Full name of contributor on LAW PAC Contributor address; City; State; Z	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Deireciant	Austin, TX 78701	1	English (On Instruction	$\overline{\Gamma}$		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 02/09/2024	Full name of contributor on Laine, Dale Contributor address; City; State; Z	ut-of-state PAC (ID#: ip Code)		Amount of Contribution (\$)	\$250.00
		Austin, TX 78701					
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions Laine Strategy Group	s)		
	Date 02/03/2024	Lawson, Drew				Amount of Contribution (\$)	\$25.00
	Principal occu consultant	pation / Job title (See Instructions)		Employer (See Instructions self	5)		
	Date 02/09/2024	Locke Lord LLP Contributor address; City; State; Z	ut-of-state PAC (ID#:ip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu	Dallas, TX 75201 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		

	MONET	ARY POLITICAL C	ONTRIBUTION	N:	S 		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	rn	1.	1	Total pages Schedule A1: Sch: 18/32 Rpt: 22/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)				3	Filer ID (Ethics Commission 00065973	n Filers)
4	Date 02/04/2024	5 Full name of contributor Lotterhos, Joseph6 Contributor address; City; Sta	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$50.00
		Keller, TX 76248						
8	Principal occu retired	pation / Job title (See Instructions)	9		Employer (See Instructions retired	s)		
	Date 02/13/2024	Full name of contributor McGee, Michael Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code				Amount of Contribution (\$)	\$25.00
	Dringing occu	COLLEYVILLE, TX 76034 pation / Job title (See Instructions)			Employer (See Instructions	<u></u>		
		Real Estate Broker	'		McGee Associates	·)		
	Date 02/09/2024	Full name of contributor McGrail, Pat Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$100.00
		Keller, TX 76248						
	Principal occu Retired	pation / Job title (See Instructions			Employer (See Instructions Retired	5)		
	Date 02/09/2024	Full name of contributor McGuire Woods Federal F Contributor address; City; Sta			225342		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)			Employer (See Instructions	5)		
	Date 02/09/2024	Full name of contributor Mccallum, Paul Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)			Employer (See Instructions Convention & Visitors B		au	
	Excodive Di				CO.NO.IIIO.II & VISILOIS D			

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 19/32 Rpt: 23/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)			3	Filer ID (Ethics Commission 00065973	on Filers)
4	Date 02/09/2024	5 Full name of contributor Mccallum, Paul6 Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code		7	Amount of Contribution (\$)	\$100.00
_	Deirectional	Grapevine, TX 76051	I a	Faralas (Os a la struction	Ĺ		
8	Executive Di	pation / Job title (See Instructions) rector	9	Employer (See Instructions Convention & Visitors B		au	
	Date 01/29/2024	Full name of contributor Miller, Douglas Contributor address; City; Sta)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Fort Worth, TX 76179 pation / Job title (See Instructions)		Employer (See Instructions RDA Solutions	<u> </u>		
	Date 02/06/2024	Full name of contributor Miller, John Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu Missionary	HURST, TX 76053 pation / Job title (See Instructions)		Employer (See Instructions Seed company	5)		
	Date 02/09/2024	Full name of contributor MoakCasey, LLC Contributor address; City; Sta Austin, TX 78701	out-of-state PAC (ID#: atte; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 02/05/2024	Full name of contributor Mogged, Chuck Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired)		
			<u>'</u>				

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 20/32 Rpt: 24/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)			3	Filer ID (Ethics Commission 00065973	n Filers)
4	Date 02/09/2024	5 Full name of contributor Morin, Thomas6 Contributor address; City; State;)	7	Amount of Contribution (\$)	\$500.00
_	5	Houston, TX 77005					
8	CEO	pation / Job title (See Instructions)	9	Employer (See Instructions Daily Court Review	5)		
	Date 02/09/2024	Morris, Carolyn (Mrs.) Contributor address; City; State;)		Amount of Contribution (\$)	\$150.00
	Principal occu	Southlake, TX 76092 pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Retired			
	Date 02/13/2024	Full name of contributor Mrasek, Michael Contributor address; City; State;	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Keller, TX 76248					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 01/27/2024	Full name of contributor Muras, Andrew Contributor address; City; State; Grapevine, TX 76051	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions Bae ststems	5)		
	Date 02/06/2024	Full name of contributor Mutemberezi, Augustin Contributor address; City; State; Fort worth, TX 76244	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$52.05
	Principal occu Interpreter	pation / Job title (See Instructions)		Employer (See Instructions Self	<u>,</u>		
			1				

	MONET	ARY POLITICAL C	CONTRIBUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 21/32 Rpt: 25/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)			3	Filer ID (Ethics Commissio 00065973	n Filers)
4	Date 02/09/2024	5 Full name of contributor Nabers, Mary6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$500.00
		Austin, TX 78735					
8	Principal occu CEo	pation / Job title (See Instructions	9	Employer (See Instructions Strategic Partnerships	s)		
	Date 01/31/2024	Full name of contributor Nash, Mark Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	Southlake, TX 76092 pation / Job title (See Instructions	<u>.</u>	Employer (See Instructions	?) 		
	СРА	panon, oos ano (coo mondonono	,,	DFO	-,		
	Date 02/09/2024	Full name of contributor Ohmstede, Roger Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Southlake, TX 76092					
	Principal occu Retired	pation / Job title (See Instructions	5)	Employer (See Instructions Retired	5)		
	Date 02/20/2024	Full name of contributor One World Strategy Grou Contributor address; City; St Houston, TX 77254	·)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	(5)	Employer (See Instructions	5)		
	Date 02/09/2024	Full name of contributor POLITICAL ACTION CON Contributor address; City; St Austin, TX 78768			•	Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
			l.				

	MONEI	ARY POLITICAL CONTR	RIBUTIONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to comp	elete this form.	1	Total pages Schedule A1: Sch: 22/32 Rpt: 26/71	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Capriglione,	Giovanni S. (The Honorable)		┸	00065973	
4	Date 02/09/2024	 Full name of contributor x out-of-standards Pediatrix Medical Group, Inc. Texas Contributor address; City; State; Zip Coordinates 		7 	Amount of Contribution (\$)	\$1,000.00
			ac.			
		Sunrise, FL 33323				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	s)		
	Date	Full name of contributor out-of-st	ata BAC (ID#-	Т	Amount of Contribution (\$)	
	02/08/2024	Perkins, Dee	ate PAC (ID#:)		Amount of Continuation (\$)	\$100.00
	02,00,202	Contributor address; City; State; Zip Coc	1 ₀	-		Ψ200.00
		Continuation address, City, State, 21p Coc				
	Delevieral	Southlake, TX 76092	Faralana (Octobration	<u></u>		
	retired	pation / Job title (See Instructions)	Employer (See Instruction retired	iS)		
-	Date	Full name of contributor X out-of-sta	ate PAC (ID#: C00016683	Т	Amount of Contribution (\$)	
	02/09/2024	Pfizer PAC			()	\$1,000.00
		Contributor address; City; State; Zip Coo	de	1		
		New York, NY 10001				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	<u> </u> S)		
	· ····o.pa. oooa			,		
_	Date	Full name of contributor X out-of-sta	ate PAC (ID#: C00420950)	Τ	Amount of Contribution (\$)	
	02/08/2024	Pioneer Natural Resources USA INC	C Federal PAC			\$2,500.00
		Contributor address; City; State; Zip Coo	de	1		
		Irving, TX 75038				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ıs)		
	Date	Full name of contributor out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	02/09/2024	Plagenhoef, Jeffrey				\$250.00
		Contributor address; City; State; Zip Coo	de]		
		Southlake, TX 76092				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ıs)		
	Anesthesiolo	gist	Self			

	MONET	ARY POLITICAL CO	ONTRIBUTION	IS		SCHEDUI	_E A1
	The Instru	ction Guide explains how to	complete this for	n.		pages Schedule A1: 23/32 Rpt: 27/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)			3 Filer II 00065	O (Ethics Commission 5973	on Filers)
4	Date 02/09/2024	5 Full name of contributorPoinsett PLLC6 Contributor address; City; State)	7 Amoui	nt of Contribution (\$)	\$500.00
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 02/09/2024	Full name of contributor Porter, Mike Contributor address; City; State	out-of-state PAC (ID#:; Zip Code		Amoui	nt of Contribution (\$)	\$250.00
	Principal occu	Southlake, TX 76092 pation / Job title (See Instructions)		Employer (See Instructions	.,		
	Mortgage Ba	,		Red Diamond Home Loa			
	Date 02/13/2024	Full name of contributor Provider Coalition for Care F Contributor address; City; State)	Amoui	nt of Contribution (\$)	\$5,000.00
		Lewisville, TX 75057					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 02/05/2024	Full name of contributor Radaford, John Christi Contributor address; City; State Grapevine, TX 76051	out-of-state PAC (ID#: e; Zip Code		Amoui	nt of Contribution (\$)	\$52.05
	Principal occu Real Estate	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 02/05/2024	Full name of contributor Reynal, Beverly Contributor address; City; State Southlake, TX 76092	out-of-state PAC (ID#:;)	Amoui	nt of Contribution (\$)	\$104.10
	Principal occu Executive Di	pation / Job title (See Instructions) rector		Employer (See Instructions American Subcontractor		ation	
		-					

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how	to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 24/32 Rpt: 28/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)				3	Filer ID (Ethics Commission 00065973	on Filers)
4	Date 01/26/2024	5 Full name of contributor Reynolds, Ernest6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$100.00
_		Colleyville, TX 76034		_		Ĺ		
8	attorney	pation / Job title (See Instructions	;)	9	Employer (See Instructions self	5)		
	Date 02/05/2024	Full name of contributor Robinson, Joe Contributor address; City; Si)		Amount of Contribution (\$)	\$26.03
	<u> </u>	Euless, TX 76039	`		(O)	<u></u>		
	retired	pation / Job title (See Instructions	;) 		Employer (See Instructions retired	5)		
	Date 02/09/2024	Full name of contributor Rutherford, Teresa Contributor address; City; Si	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Contribution (\$)	\$25.00
	Dringing agg	Colleyville, TX 76034			Employer (See Instructions	<u></u>		
	Realtor	pation / Job title (See Instructions)		Employer (See Instructions Rutherford Realty	·)		
	Date 02/09/2024	Full name of contributor Sampson Public Affairs, L Contributor address; City; Si Austin, TX 78749)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	5)		
	Date 02/06/2024	Full name of contributor Shope, Sean Contributor address; City; St	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$25.00
	Principal occu retired	pation / Job title (See Instructions	s)		Employer (See Instructions retired	s)		

	MONEI	ARY POLITICAL CONTRIBUTIO	N	iS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 25/32 Rpt: 29/71	
2	FILER NAME				3	Filer ID (Ethics Commission F	ilers)
		Giovanni S. (The Honorable)				00065973	
4	Date 02/13/2024	 5 Full name of contributor out-of-state PAC (ID#:_ Sizemore, Julie 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$100.00
		Keller, TX 76248					
8	Principal occuretired	<u> </u>	9	Employer (See Instructions retired	<u>l</u> 5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/05/2024	Staples, Mary				:	\$104.10
		Contributor address; City; State; Zip Code	••••				
		Southlake, TX 76092					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Advocate			National Association of	Ch	ain Drug Stores	
	Date	Full name of contributor ut-of-state PAC (ID#:_				Amount of Contribution (\$)	
	02/04/2024	Sweet, Vera					\$52.05
		Contributor address; City; State; Zip Code KELLER, TX 76248					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	retired			retired			
	Date	Full name of contributor X out-of-state PAC (ID#: C	00)589663)		Amount of Contribution (\$)	
	02/06/2024	Sysco Corp. Good Government Committee, Inc. Contributor address; City; State; Zip Code				\$1	L,000.00
		Houston, TX 77077					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor X out-of-state PAC (ID#: C	:00)361758		Amount of Contribution (\$)	
	02/09/2024	T-Mobile PAC				\$1	1,000.00
		Contributor address; City; State; Zip Code					
		Washington DC, DC 20004					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUI	E A1
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 26/32 Rpt: 30/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)			3	Filer ID (Ethics Commission 00065973	on Filers)
4	Date 02/09/2024	5 Full name of contributor TREPAC6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$2,500.00
_		Austin, TX 78768					
8	Principal occu	pation / Job title (See Instructions	i) 	9 Employer (See Instructions	s)		
	Date 02/09/2024	Full name of contributor TXTA TruckPAC Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	•	Amount of Contribution (\$)	\$500.00
		Austin, TX 78762	, I		<u></u>		
	Principal occu	pation / Job title (See Instructions	i)	Employer (See Instructions	5)		
	Date 02/03/2024	Full name of contributor Tate, Frederick Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	•	Amount of Contribution (\$)	\$500.00
	Principal occu	Colleyville, TX 76034 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	Managing Di	,	,	CFO Shield, LLC	-,		
	Date 02/13/2024	Full name of contributor Tatum, Vickie Contributor address; City; St Southlake, TX 76092)		Amount of Contribution (\$)	\$25.00
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions retired	5)		
	Date 01/27/2024	Full name of contributor Terry, Mark Contributor address; City; St)	•	Amount of Contribution (\$)	\$50.00
		pation / Job title (See Instructions autive Director)	Employer (See Instructions TEPSA	5)		
	zopacy Enou						

	MONET	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 27/32 Rpt: 31/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)			3	Filer ID (Ethics Commission 00065973	on Filers)
4	Date 02/09/2024	5 Full name of contributor Terry, Mark (Mr.)6 Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)	7	Amount of Contribution (\$)	\$50.00
		Grapevine, TX 76051					
8		pation / Job title (See Instructions) cutive Director	9	Employer (See Instructions TEPSA	s)		
	Date 02/15/2024	Full name of contributor Texas Association of Busir Contributor address; City; Sta)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> s)		
	Date 02/09/2024	Full name of contributor Texas Building Branch AG Contributor address; City; Sta)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 02/09/2024	Full name of contributor Texas Construction Assoc Contributor address; City; Sta			-	Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>1 </u>		
	Date 02/09/2024	Full name of contributor Texas Cornerstone Credit Contributor address; City; Sta				Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 28/32 Rpt: 32/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)		3	Filer ID (Ethics Commission 00065973	on Filers)
4	Date 02/09/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78704				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Date 02/08/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Farm Bureau AGFUND Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Waco, TX 76702 pation / Job title (See Instructions)	Employer (See Instructions	_		
	r inicipal occu	pation / Job title (See Instructions)	Employer (See instructions	')		
	Date 02/09/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Food & Fuel Association PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,500.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 02/09/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Land Title Association PAC Contributor address; City; State; Zip Code Austin, TX 78703)		Amount of Contribution (\$)	\$7,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 01/30/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Leads PAC Contributor address; City; State; Zip Code Austin, TX 78767			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains hov	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 29/32 Rpt: 33/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)			3	Filer ID (Ethics Commission 00065973	on Filers)
4	Date 02/09/2024	5 Full name of contributorTexas Manufactured Hou6 Contributor address; City; S	-		7	Amount of Contribution (\$)	\$1,500.00
		Austin, TX 78759					
8	Principal occu	pation / Job title (See Instruction	5)	9 Employer (See Instructions	s)		
	Date 01/26/2024	Full name of contributor Texas Municipal Police A Contributor address; City; S)		Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78752 pation / Job title (See Instruction:	5)	Employer (See Instructions	<u> </u> S)		
	Date 02/09/2024	Contributor address; City; S				Amount of Contribution (\$)	\$2,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instruction	5)	Employer (See Instructions	<u> </u> S)		
	Date 02/09/2024	Full name of contributor Texas Optometric PAC Contributor address; City; S Austin, TX 78705	out-of-state PAC (ID#:_ tate; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instruction	5)	Employer (See Instructions	5)		
	Date 02/13/2024	Full name of contributor Texas Restaurant Associ Contributor address; City; S Austin, TX 78767)		Amount of Contribution (\$)	\$3,000.00
	Principal occu	pation / Job title (See Instruction	5)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 30/32 Rpt: 34/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)		3	Filer ID (Ethics Commissio 00065973	n Filers)
4	Date 02/09/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Austin, TX 78702 pation / Job title (See Instructions)	9 Employer (See Instructions			
_			2 Employer (See instructions	,	(2)	
	Date 02/16/2024	Full name of contributor out-of-state PAC (ID#:_ Texas State Association of Firefighters Action Co Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 02/09/2024	Full name of contributor out-of-state PAC (ID#: Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 02/09/2024	Full name of contributor out-of-state PAC (ID#: Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 02/14/2024	Full name of contributor out-of-state PAC (ID#:_ The Alan and Gay Erwin Trust Contributor address; City; State; Zip Code Austin, TX 78746)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
		,				

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 31/32 Rpt: 35/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)				3	Filer ID (Ethics Commission 00065973	n Filers)
4	Date 02/09/2024	5 Full name of contributor Tigue, Virginia6 Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code			7	Amount of Contribution (\$)	\$250.00
_	Deinsinal	Colleyville, TX 76034	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	_	Faralas as (October to the state of the stat			
8	Retired	pation / Job title (See Instructions	(1)	9	Employer (See Instructions Retired			
	Date 02/06/2024	Full name of contributor Townsend, Jack Contributor address; City; Si					Amount of Contribution (\$)	\$52.05
	Principal occu	Grapevine, TX 76051 pation / Job title (See Instructions)		Employer (See Instructions	·/		
	Insurance A				Insurance Solutions US			
	Date 02/09/2024	Full name of contributor Trott, William Contributor address; City; Si	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$100.00
		Keller, TX 76248						
	Principal occu NA	pation / Job title (See Instructions) 		Employer (See Instructions NA	5)		
	Date 02/09/2024	Full name of contributor Verizon Communications Contributor address; City; Si Austin, TX 78701					Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 02/09/2024	Full name of contributor Veterinarian PAC Contributor address; City; Si Austin, TX 78754	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			L					

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 32/32 Rpt: 36/71	
2	FILER NAME Capriglione,	Giovanni S. (The Honorable)		3	Filer ID (Ethics Commission 00065973	n Filers)
4	Date 02/06/2024	 Full name of contributor out-of-state PAC (ID#:_ White, Caren & Rick Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00
_		Southlake, TX 76092	I			
8	Principal occu Employee	pation / Job title (See Instructions)	9 Employer (See Instructions State Farm)		
	Date 02/09/2024	Full name of contributor out-of-state PAC (ID#:_Wilder, Thomas Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Bedford, TX 76021 pation / Job title (See Instructions)	Employer (See Instructions			
	District Clerk		Tarrant County	,		
	Date 02/20/2024	Full name of contributor out-of-state PAC (ID#:_ Wise, Andrew Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
		Austin, TX 78751				
	Principal occu NA	pation / Job title (See Instructions)	Employer (See Instructions NA)		
	Date 01/27/2024	Full name of contributor out-of-state PAC (ID#:_ Zimmer, Harry Contributor address; City; State; Zip Code Euless, TX 76039			Amount of Contribution (\$)	\$50.00
	Principal occu Investor	pation / Job title (See Instructions)	Employer (See Instructions Self)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/3 Rpt: 37/71	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
	Giovanni S. (The Honorable)	00065973	
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$	
5 Date 01/26/2024	 Full name of contributor out-of-state PAC (ID#:	8 Amount of solution (\$) In-kind contribution contribution (\$) description \$350.00 Email Blast Fundraiser	
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution
02/23/2024	Dade Phelan Campaign		contribution (\$) description
	Contributor address; City; State; Zip Code		\$6,750.00 Polling
	, , , , , , , , , , , , , , , , , , ,		
			į i
	Austin, TX 78763		Check if travel outside of Texas. Complete Schedule T.
Principal occı	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution
02/05/2024	MoakCasey, LLC		contribution (\$) description
	Contributor address; City; State; Zip Code		\$500.001 Food, drinks, and space !rental
	Austin, TX 78701	i .	Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
	, , , , , , , , , , , , , , , , , , , ,		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 2/3 Rpt: 38/71					
2 FILER NAME Capriglione,	Giovanni S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065973					
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$					
5 Date 02/12/2024 6 Full name of contributor out-of-state PAC (ID#: Tate, Frederick 7 Contributor address; City; State; Zip Code Colleyville, TX 76034			8 Amount of contribution (\$) In-kind contribution description \$250.00 Consulting Campaign Finance / Bookkeeping Check if travel outside of Texas. Complete Schedule T.				
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON					
Managing D		CFO Shield, LLC	,				
	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)				
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
10 ii continuator	is a clinic, law little of parent(s) (if any) (if of the source)						
Date 02/24/2024	Full name of contributor)	Amount of In-kind contribution contribution (\$) description \$1,799.88 Campaign Endorsement Text Message				
	Houston, TX 77046		Check if travel outside of Texas. Complete Schedule T.				
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)				
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date 02/14/2024	Full name of contributor out-of-state PAC (ID#: Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$6,750.00 Campaign Polling				
Principal occu	Austin, TX 78701 upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. -JUDICIAL) (See instructions)				
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 3/3 Rpt: 39/71 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Capriglione, Giovanni S. (The Honorable) 00065973 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 02/13/2024 Texas Farm Bureau AGFUND \$5.75 Website Endorsement 7 Contributor address; City; State; Zip Code Waco, TX 76702 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid	xpense F	-	nse es/Contract Labor	Tr	avel in District avel Out of Dis THER (enter a			
1	Total pages Schedule F1:	2 FILER NAM	ME				3 Fi	ler ID	(Ethics Commission Filers)	_
	Sch: 1/32 Rpt: 40/71	Capriglior	ne, Giovanni S. (The	e Honorable	!)		00	0065973		
4	Date	5 Payee nam	ne				•			
	02/14/2024	Ace Parki	ing							
6	Amount (\$)	7 Payee add	lress; City;	State;	Zip Code					_
	\$6.00	2200 N La	amar St							
		Dallas, T	X 75202							
8	PURPOSE	(a) Category	(See Categories listed at the	top of this schedu	_{ule)} (b) Description				
	OF EXPENDITURE	Event Exp							plete Schedule T.	
						Check if Austin	1, 1 X, 011	icenolaer living) expense	
						r arming				
9	Complete ONLY if direct	Candidate/C	Officeholder name	Off	ice sough	<u> </u>		Office he	eld	_
	expenditure to benefit C/O	4								
	Date	Payee nan	ne							
	02/12/2024	Amazon N	Marketplace							
	Amount (\$)	Payee add	ress; City;	State;	Zip Code					
	\$189.39	410 Terry	Avenue N							
		Seattle, V	VA 98109							
	PURPOSE	(a) Category	(See Categories listed at the	top of this schedu	_{ule)} (b) Description				
	OF EXPENDITURE	Office Ov	erhead/Rental Expe	ense		Check if travel Check if Austin			plete Schedule T.	
						Portable PC				
								(,	
	Complete ONLY if direct	Candidate/C	Officeholder name	Off	ice sough	t		Office he	eld	
	expenditure to benefit C/OI	-1								
	Date	Payee nan	ne							_
	02/20/2024	Amazon N	Marketplace							
	Amount (\$)	Payee add	lress; City;	State;	Zip Code					
	\$108.20	410 Terry	Avenue N							
		Seattle, V	VA 98109							
	PURPOSE	(a) Category	(See Categories listed at the	top of this schedu	_{ule)} (b) Description				_
	OF EXPENDITURE		erhead/Rental Expe			_			plete Schedule T.	
						Campaign Pl			gexpense es (Cables, Cases, Etc.	١
						Campaign Pi	i ioi ie /	100033011	co (Cabico, Cases, Ell.	٠,
	Complete ONLY if direct	Candidate/C	Officeholder name	Off	ice sough	<u> </u>		Office he	eld	_
	expenditure to benefit C/O			<i>y</i>	3					

SCHEDULE F1

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

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

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

	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: 2/32 Rpt: 41/71	Capriglione, Giovanni S. (The Honorable) 00065973
4	Date	5 Payee name
	02/21/2024	American Airlines
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$217.10	4333 Amon Carter Boulevard
		Fort Worth, TX 76155
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Expense Travel - DFW to Austin
_		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/16/2024	Boots, Aimee
	Amount (\$)	Payee address; City; State; Zip Code
	\$660.00	312 Equine Lane
		Celina, TX 75009
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Work
		Campaign Work
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/11/2024	Boots, Aimee
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	312 Equine Lane
	Ψ000.00	ore Equito Euro
		Celina, TX 75009
	DUDDOCE	1
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Work
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/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: 3/32 Rpt: 42/71	Capriglione, Giovanni S. (The Honorable) 00065973	
4	Date	5 Payee name	
	02/02/2024	Boots, Aimee	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$540.00	312 Equine Lane	
		Celina, TX 75009	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
		Check if Austin, TX, officeholder living expense	
		Campaign Work	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	_
	01/26/2024	Bullock Texas State History Museum	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$491.46	1800 North Congress Ave	
	Ψ-01.10	1000 North Congress / No	
		A 15 TV 70704	
		Austin, TX 78701	_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Auction items for ISD events	
		Addition licing for 15D events	
	Commission ONII V if alignent	Constitute / Office helder mores Office accords	_
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	·		_
	Date	Payee name	
	02/12/2024	Campaign Sidekick, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	1515 W STATE HWY 114	
		Cheyenne, WY 82001	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Software Check if travel outside of Texas. Complete Schedule T.	
	LAFENDITORE	Check if Austin, TX, officeholder living expense	
		Canvassing Software	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	п 	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/32 Rpt: 43/71	Capriglione, Giovanni S. (The Honorable) 00065973
4	Date	5 Payee name
	02/08/2024	Capitol Grill
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$11.74	1400 Congress Ave
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Meeting
		Campaign Mooting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
⊨	Date	Power name
	01/26/2024	Payee name Custom Ink
	Amount (\$)	Payee address; City; State; Zip Code
	\$361.00	1151 E Southlake Blvd
		Southlake, TX 76092
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Custom Campaign Shirts
		Custom Campaign Shirts
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date 02/13/2024	Payee name Domino's Pizza
	Amount (\$)	Payee address; City; State; Zip Code
	\$32.44	600 W Northwest Hwy
		Grapevine, TX 76051
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Phone Bank Food / Beverage
		Fliolic Dalik Food / Develage
	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 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:		rc)
1	Sch: 5/32 Rpt: 44/71	Capriglione, Giovanni S. (The Honorable) 00065973	5)
4	Date	5 Payee name	
	02/07/2024	Doubletree Suites	
6	Amount (\$) \$205.75	7 Payee address; City; State; Zip Code 303 W 15th St Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		C/OH Duties - Hotel	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	02/01/2024	EFile4Biz	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.43	3300 Gateway Dr.	
		Pompano Beach, FL 33062	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Toyon Complete Schedule T	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		1099 Forms	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	01/29/2024	Eatzi's Market & Bakery	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$30.27	1200 W State Hwy 114	
		Grapevine, TX 76051	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Campaign Meeting	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/32 Rpt: 45/71	Capriglione, Giovanni S. (The Honorable) 00065973
4	Date	5 Payee name
	01/27/2024	Facebook, Inc.
_	Amount (\$)	7 Payee address; City; State; Zip Code
Ü	\$401.82	1601 Willow Road
	Ψ401.02	1001 Willow Road
		M. J. B. J. 04 04005
		Menlo Park, CA 94025
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
		Facebook Ads
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
	Date	Payee name
	02/12/2024	Facebook, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$908.93	1601 Willow Road
		Menlo Park, CA 94025
	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 Facebook Ads
		1 account Aus
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	02/07/2024	Fastsigns
	Amount (\$)	Payee address; City; State; Zip Code
	\$101.34	2300 Dean Way
		Suite 120
		Southlake, TX 76092
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Printing Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Donor Board
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiorale to belieff C/OI	'
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/32 Rpt: 46/71	Capriglione, Giovanni S. (The Honorable) 00065973
4	Date	5 Payee name
	02/20/2024	Fastsigns
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$417.49	2300 Dean Way
		Suite 120
		Southlake, TX 76092
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Retractable Banner for Campaign Event
		Treatable Barner for Gampaign Event
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/12/2024	Fiverr.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$302.73	460 Park Avenue South
		New York, NY 10022
	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 Graphic Photoshopping / Endorsement Graphics /
		Etc
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	01/26/2024	GRAPEVINE CHAMBER OF COMMERCE
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	200 Vine Street
		Grapevine, TX 76051
	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 Sponsorship of Chamber Event
		Sportsofship of Shariber Event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
1		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributing 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: 8/32 Rpt: 47/71	Capriglione, Giovanni S. (The Honorable) 00065973
4	Date	5 Payee name
	02/22/2024	Google.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1600 Amphitheatre Parkway
		Mountain View, CA 94043
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.
	LXI LINDITORE	Check if Austin, TX, officeholder living expense
		Google Ads
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/01/2024	Google
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.79	1600 Amphitheatre Pkwy
	Ψ12.73	1000 / imprimicate i kwy
		Mountain View, CA 94043
	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 Google G Suite Fee
		Google G Suite i ee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	02/07/2024	Hyatt Place
	Amount (\$)	Payee address; City; State; Zip Code
	\$128.39	3201 Alliance Town Center
		Fort Worth, TX 76177
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Campaign Work Overhead Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Overnight for Campaign Work
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experiorare to benefit C/Of	
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica 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		Gift/Awards/Memorials Ex Legal Services	Salaries	/Wage	s/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)	
			The Instruction Guid	e explains now to t	ompi	ete triis iorm.	_			_
1	Total pages Schedule F1: Sch: 9/32 Rpt: 48/71		≣ •, Giovanni S. (The	e Honorable)			3	Filer ID 00065973	(Ethics Commission Filers)	
4	Date	5 Payee name								_
	02/01/2024		e Ristorante							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip C	Code					
	\$122.84	1281 E Sta	te HWY 114							
		Southlake,	TX 76092							
8	PURPOSE	(a) Category (S	ee Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Food/Beve	rage Expense						plete Schedule T.	
						_		officeholder living	g expense	
						Campaign M	eeu	iriy		
Ļ					<u> </u>					_
9	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office so	ought			Office he	eld	
	experialitate to benefit of of	•								
	Date	Payee name								
	02/09/2024	Install Con	nect Inc							
	Amount (\$)	Payee addre	ess; City;	State; Zip C	Code					_
	\$2,000.00	505 W Stat	e St	·						
	, —, · · · · · ·									
		Carland T	V 75040							
		Garland, T			1					
	PURPOSE OF		ee Categories listed at the		(b)	Description				
	EXPENDITURE	Salaries/W	ages/Contract Lab	oor		<u> </u>		officeholder living	plete Schedule T.	
						Campaign Si			у схрепос	
						oapa.g o.	9			
	Complete ONLY if direct	Candidate/Off	iceholder name	Office so	uaht			Office he	ald.	_
	expenditure to benefit C/O		iceriolaei riairie	Omice 3c	Jugini			Omice in	ciu	
L										_
	Date	Payee name								
	02/12/2024	Johnson St	rategies, LLC							
	Amount (\$)	Payee addre	ess; City;	State; Zip C	Code					
	\$4,200.00	4612 DUS	IK LN							
		Asutin, TX	78746		_					
	PURPOSE		ee Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Advertising	Expense						plete Schedule T.	
						_		officeholder living		
						Video Comm	CIC	iai FTUUUUUII	ווע	
_	0 1: 0	0			<u> </u>			O		_
	Complete ONLY if direct expenditure to benefit C/Ol		iceholder name	Office so	ought			Office he	ela	
	Emportance to borient 0/01	•								

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

	Credit Card Payment	The Instruction Guide explains how to compl	olete	this form.		
1	Total pages Schedule F1: Sch: 10/32 Rpt: 49/71	FILER NAME Capriglione, Giovanni S. (The Honorable)			Filer ID 00065973	(Ethics Commission Filers)
4	Date 02/13/2024	5 Payee name Lawson Strategies, LLC		•		
	Amount (\$) \$8,554.85	7 Payee address; City; State; Zip Code 1115 Kinney Avenue Unit 5 Austin, TX 78704				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		escription Check if travel outsid Check if Austin, TX, or pigital Outreach	officeholder living	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	nt		Office h	eld
	Date 02/13/2024	Payee name Lawson Strategies, LLC				
	Amount (\$) \$14,058.38	Payee address; City; State; Zip Code 1115 Kinney Avenue Unit 5 Austin, TX 78704	9			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		escription Check if travel outsid Check if Austin, TX, rint Material, Ma	officeholder living	g expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	nt		Office he	eld
	Date 02/13/2024	Payee name Lawson Strategies, LLC				
	Amount (\$) \$14,434.55	Payee address; City; State; Zip Code 1115 Kinney Avenue Unit 5 Austin, TX 78704	9			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b)		escription Check if travel outsid Check if Austin, TX, rint Material, Ma	officeholder living	g expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	nt		Office h	eld

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/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/32 Rpt: 50/71	Capriglione, Giovanni S. (The Honorable) 00065973
4	Date	5 Payee name
	02/06/2024	Lawson Strategies, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,000.00	1115 Kinney Avenue
		Unit 5
		Austin, TX 78704
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
		Consultant Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	4
	Date	Payee name
	02/06/2024	Lawson Strategies, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,000.00	1115 Kinney Avenue
		Unit 5
		Austin, TX 78704
	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 Consultant Fee
		Solidaria i do
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/06/2024	Lawson Strategies, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,792.85	1115 Kinney Avenue
		Unit 5
		Austin, TX 78704
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Doorhangers
		Doomangers
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Event Ex Accounting/Banking Fees Consulting Expense Food/Bev Contributions/ Donations Made By - Gift/Awai

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/32 Rpt: 51/71	Capriglione, Giovanni S. (The Honorable) 00065973
4	Date	5 Payee name
	02/12/2024	Lettunich, Steve
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$460.00	1019 Winding Brook
		Garland, TX 75044
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Work
		Sampanga a sam
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-1
	Date	Payee name
	02/12/2024	Lettunich, Steve
	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	1019 Winding Brook
		Garland, TX 75044
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Work
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
	Date	Payee name
	02/02/2024	Lettunich, Steve
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,560.00	1019 Winding Brook
	+=,000.00	
		Garland, TX 75044
	PURPOSE	To.
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Work
	Complete ONLY if direct expenditure to benefit C/Ol	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/Politica Credit Card Payment	-	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	ILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 13/32 Rpt: 52/71	apriglione, Giovanni S. (The Hono	orable)	00065973
4	Date	ayee name		
	02/20/2024	inkedIn		
6	Amount (\$) \$75.76	ayee address; City; S 000 W Maude Ave unnyvale, CA 94085	tate; Zip Code	
8	DUDDOCE		(h) December	
8	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of thi dvertising Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense OSCription
9	Complete ONLY if direct expenditure to benefit C/Oh	ndidate/Officeholder name	Office sought	Office held
	Date	ayee name		
	01/27/2024	laria Cucas Mexican Cuisine		
	Amount (\$)		tate; Zip Code	
	\$100.14	00 S Main St		
	DUDDOCE	eller, TX 76248	[/L)	
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of thi ood/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense eeting
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sought	Office held
	Date	ayee name		
	02/02/2024	leat U Anywhere BBQ		
	Amount (\$) \$110.40	ayee address; City; S 19 W Northwest Hwy	tate; Zip Code	
		rapevine, TX 76051		
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of thi ood/Beverage Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense eeting
	Complete ONLY if direct expenditure to benefit C/Oh	ndidate/Officeholder name	Office sought	Office held

SCHEDULE F1

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 14/32 Rpt: 53/71	2 FILER NAME Capriglione, Giovanni S. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00065973
4	Date 02/08/2024	5 Payee name Metroport Chamber of Commerce
6	Amount (\$) \$75.00	7 Payee address; City; State; Zip Code 381 W Byron Nelson Blvd
8	PURPOSE OF EXPENDITURE	Roanoke, TX 76262 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Chamber Meeting
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 02/20/2024	Payee name Name Tag Wizard
	Amount (\$) \$32.99	Payee address; City; State; Zip Code 2021 St. Augustine Road E Suite #6 Jacksonville, FL 32207
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Employee Badge
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 02/16/2024	Payee name North Texas Commission
	Amount (\$) \$95.00	Payee address; City; State; Zip Code 8445 Freeport Pkwy #640
		Irving, TX 75063
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Forum Event Expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gifl/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor

	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)
l	Sch: 15/32 Rpt: 54/71	Capriglione, Giovanni S. (The Honorable) 00065973
4	Date	5 Payee name
l	02/06/2024	Phone.com
	Amount (\$) \$73.65	7 Payee address; City; State; Zip Code 625 Broad Street #240 Newark, NJ 07102
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Voip Phones
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
l	01/26/2024	Piryx Inc
	Amount (\$) \$3.23	Payee address; City; State; Zip Code 144 2nd St
L		San Francisco, CA 94105
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Interchange Fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/26/2024	Piryx Inc
	Amount (\$) \$4.30	Payee address; City; State; Zip Code 144 2nd St
		San Francisco, CA 94105
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Interchange Fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: Sch: 16/32 Rpt: 55/71 2 FILER NAME	lers)
Sch: 16/32 Rpt: 55/71 Capriglione, Giovanni S. (The Honorable) 00065973 4 Date	
O1/26/2024 Piryx Inc 7 Payee address; City; State; Zip Code \$4.30 \$4.30 \$144 2nd St San Francisco, CA 94105 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Pees (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Interchange Fee Office sought Office sought Office held Payee name Piryx Inc Amount (\$) Payee address; City; State; Zip Code \$2.15 \$2.15 \$32.15 \$32.15 \$33 \$34 \$34 \$34 \$34 \$34 \$35 \$34 \$35 \$34 \$34 \$35 \$35 \$35 \$35 \$35 \$35 \$35 \$35 \$35 \$35	
O1/26/2024 Piryx Inc 7 Payee address; City; State; Zip Code \$4.30 \$4.30 \$144 2nd St San Francisco, CA 94105 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Pees (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Interchange Fee Office sought Office sought Office held Payee name Piryx Inc Amount (\$) Payee address; City; State; Zip Code \$2.15 \$2.15 \$32.15 \$32.15 \$33 \$34 \$34 \$34 \$34 \$34 \$35 \$34 \$35 \$34 \$34 \$35 \$35 \$35 \$35 \$35 \$35 \$35 \$35 \$35 \$35	
\$4.30 144 2nd St San Francisco, CA 94105 8	
San Francisco, CA 94105 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Interchange Fee 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name 01/27/2024 Piryx Inc Amount (\$) Payee address; City; State; Zip Code \$2.15 144 2nd St San Francisco, CA 94105 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.	
Purpose	
Purpose	
Fees Check if travel outside of Texas. Complete Schedule T.	
Pees Complete ONLY if direct expenditure to benefit C/OH Date O1/27/2024 Piryx Inc Amount (\$) Payee address; City; State; Zip Code \$2.15	
9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name Piryx Inc Amount (\$) Payee address; City; State; Zip Code \$2.15 144 2nd St San Francisco, CA 94105 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees Check if Austin, 1X, officeholder iving expense Interchange Fee	
9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name 01/27/2024 Piryx Inc Amount (\$) Payee address; City; State; Zip Code \$2.15 144 2nd St San Francisco, CA 94105 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Grees (b) Description Check if travel outside of Texas. Complete Schedule T.	
Date 01/27/2024 Piryx Inc Amount (\$) Payee address; City; State; Zip Code \$2.15 Purpose OF Fees (a) Category (See Categories listed at the top of this schedule) Fees Port Code (b) Description Check if travel outside of Texas. Complete Schedule T.	
Date 01/27/2024 Piryx Inc Amount (\$) Payee address; City; State; Zip Code \$2.15 Purpose OF Fees (a) Category (See Categories listed at the top of this schedule) Fees Port Code (b) Description Check if travel outside of Texas. Complete Schedule T.	
O1/27/2024 Piryx Inc Amount (\$) Payee address; City; State; Zip Code \$2.15 144 2nd St San Francisco, CA 94105 PURPOSE OF Fees (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.	
O1/27/2024 Piryx Inc Amount (\$) Payee address; City; State; Zip Code \$2.15 144 2nd St San Francisco, CA 94105 PURPOSE OF Fees (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T.	
Amount (\$) Payee address; City; State; Zip Code \$2.15 PURPOSE OF EXPENDITIES (a) Category (See Categories listed at the top of this schedule) Fees Pixed (See Categories listed at the top of this schedule) Fees City; State; Zip Code (b) Description Check if travel outside of Texas. Complete Schedule T.	
\$2.15	
San Francisco, CA 94105 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.	
PURPOSE OF Fees (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.	
PURPOSE OF Fees (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.	
OF FEES FEES Check if travel outside of Texas. Complete Schedule T.	
OF FUNDITURE Fees Check if travel outside of Texas. Complete Schedule T.	
Check if Austin, TX, officeholder living expense	
Interchange Fee	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
Date Payee name	
01/27/2024 Piryx Inc	
Amount (\$) Payee address; City; State; Zip Code	
\$10.75 144 2nd St	
San Francisco, CA 94105	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Fees Check if travel outside of Texas. Complete Schedule T.	
Check if Austin, 1X, officenoider living expense	
Interchange Fee	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 17/32 Rpt: 56/71 Capriglione, Giovanni S. (The Honorable) 00065973 4 Date Payee name 01/27/2024 Piryx Inc 6 Amount (\$) Payee address; City; State; Zip Code \$2.15 144 2nd St San Francisco, CA 94105 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Interchange Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/28/2024 Piryx Inc Amount (\$) Payee address; City; State; Zip Code \$21.50 144 2nd St San Francisco, CA 94105 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Interchange Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/29/2024 Piryx Inc Amount (\$) Payee address: City; State; Zip Code \$43.00 144 2nd St San Francisco, CA 94105 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Interchange Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/32 Rpt: 57/71	Capriglione, Giovanni S. (The Honorable) 00065973
4	Date	5 Payee name
	01/29/2024	Piryx Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.75	144 2nd St
		San Francisco, CA 94105
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Interchange Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/29/2024	Piryx Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.15	144 2nd St
		San Francisco, CA 94105
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Interchange Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/30/2024	Piryx Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.75	144 2nd St
		San Francisco, CA 94105
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Interchange Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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: 19/32 Rpt: 58/71	Capriglione, Giovanni S. (The Honorable) 00065973
4	Date	5 Payee name
	01/30/2024	Piryx Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2.15	144 2nd St
		San Francisco, CA 94105
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Interchange Fee
		interchange i ee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Date	Davida marra
	01/31/2024	Payee name Piryx Inc
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.15	144 2nd St
		San Francisco, CA 94105
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Interchange Fee
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
⊨	Data	
	Date	Payee name
	01/31/2024	Piryx Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.30	144 2nd St
		San Francisco, CA 94105
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Interchange Fee
1		interentinge Fee
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 20/32 Rpt: 59/71	2 FILER NAME Capriglione, Giovanni S. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00065973	
4	Date 01/31/2024	5 Payee name Piryx Inc	_
6	Amount (\$) \$4.30	7 Payee address; City; State; Zip Code 144 2nd St	
		San Francisco, CA 94105	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Interchange Fee	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	01/31/2024	Piryx Inc	
	Amount (\$) \$4.30	Payee address; City; State; Zip Code 144 2nd St	
		San Francisco, CA 94105	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Interchange Fee	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 02/01/2024	Payee name RE:defined Coffee House	
	Amount (\$) \$12.34	Payee address; City; State; Zip Code 220 N Main St	
		Grapevine, TX 76051	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Constituent Meeting	
	Complete ONLY if direct expenditure to benefit C/Oh	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 21/32 Rpt: 60/71	2 FILER NAME Capriglione, Giovanni S. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00065973
4	Date 02/06/2024	5 Payee name Raconteur Media Company
6	Amount (\$) \$212.14	7 Payee address; City; State; Zip Code 1717 West Sixth Street Suite 215 Austin, TX 78703
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 Email Marketing Program
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 02/10/2024	Payee name Raconteur Media Company
	Amount (\$) \$2,620.20	Payee address; City; State; Zip Code 1717 West Sixth Street Suite 215 Austin, TX 78703
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Digital Advertising, Hosting, Webpage Maintenace, Emails, etc.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 02/21/2024	Payee name Rumble Up
	Amount (\$) \$300.00	Payee address; City; State; Zip Code 2021 L St NW Ste 101-220 Washington DC, DC 20036
	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 Text Messages
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 22/32 Rpt: 61/71	2 FILER NAME Capriglione, Giovanni S. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00065973
4	Date 01/29/2024	5 Payee name SHUTTERSTOCK, INC
	Amount (\$) \$159.12	7 Payee address; City; State; Zip Code 350 Fifth Ave 21st Floor New York, NY 10118
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 Stock Images for Social Media Advertisements
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 02/20/2024	Payee name Smith, Joshua
	Amount (\$) \$730.00	Payee address; City; State; Zip Code 111 Sumac Drive Waxahachie, TX 75165
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Work
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 02/12/2024	Payee name Smith, Joshua
	Amount (\$) \$600.00	Payee address; City; State; Zip Code 111 Sumac Drive
		Waxahachie, TX 75165
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Work
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1		2 FILER NAME Consistions Circumsi C (The Henerable) 2 FILER NAME Consistions Circumsi C (The Henerable)
Ļ	Sch: 23/32 Rpt: 62/71	Capriglione, Giovanni S. (The Honorable) 00065973
4	Date	5 Payee name
Ļ	02/12/2024	Smith, Joshua
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	111 Sumac Drive
l		
L		Waxahachie, TX 75165
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		Campaign Work
l		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
l	expenditure to benefit C/O	1
F	Date	Payee name
l	02/02/2024	Smith, Joshua
┝	Amount (\$)	Payee address; City; State; Zip Code
l	\$1,000.00	111 Sumac Drive
l	, ,	
l		Waxahachie, TX 75165
⊢	PURPOSE	
l	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Campaign Work
L		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experientare to benefit 6/61	
l	Date	Payee name
	02/06/2024	Square
	Amount (\$)	Payee address; City; State; Zip Code
l	\$21.50	1455 Market St.
l		Suite 600
l		San Francisco, TX 94103
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
l		Check if Austin, TX, officeholder living expense
		Interchange Fees
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
\vdash		

SCHEDULE F1

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

Fees Office Overhead/r
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wages/C

	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: 24/32 Rpt: 63/71	Capriglione, Giovanni S. (The Honorable) 00065973	
4	Date	5 Payee name	
	02/21/2024	Staples Inc	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$442.37	200 N Kimball Ave	
		#200	
		Southlake, TX 76092	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Printing Expense	
		Check if Austin, TX, officeholder living expense Printer paper, envelopes, toner, office supplies	
		Filliter paper, envelopes, torier, office supplies	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
	Date	Payee name	
	02/06/2024	Stevens, Brock	
	Amount (\$)	Payee address; City; State; Zip Code	
\$1,200.00 8425 Whippoorwill			
		Fort Worth, TX 76123	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Music for Fundraiser	
		Wasio for Fariances	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OH		
	Date	Payee name	
	02/19/2024	Summer Moon Coffee	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$16.84	1004 Keller Pkwy	
		#104	
		Keller, TX 76248	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Campaign Meeting	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
\vdash			
1			
1			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comn 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			
<u> </u>	T			
1	Total pages Schedule F1: Sch: 25/32 Rpt: 64/71	2 FILER NAME Capriglione, Giovanni S. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00065973		
4	Date	5 Pavee name		
	02/01/2024	5 Payee name TDCJ Manufacturing & Logistics		
6	Amount (\$) \$108.25	7 Payee address; City; State; Zip Code 8801 S. 1st Street		
		Suite 100		
		Austin, TX 78748		
_	DUDDOCE			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Cift/Awards/Memorials Expense		
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Gift for Nonprofit Fundraiser		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
	Date	Payee name		
	02/06/2024	Texas Trade Graphics		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$1,396.43 2935 Irving			
		Suite 201		
	Dallas, TX 75247			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense Campaign Signs		
		Campaign Signs		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
	Date	Payee name		
	02/22/2024	Texas Trade Graphics		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$108.25	2935 Irving		
	Suite 201			
		Dallas, TX 75247		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF	Printing Expense		
	EXPENDITURE	Check if Austin, TX, officeholder living expense		
		Campaign Signs		
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	Complete ONLY 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 Com

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 26/32 Rpt: 65/71	Capriglione, Giovanni S. (The Honorable) 00065973				
4	Date	5 Payee name				
	02/06/2024	The Feedstore BBQ				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
l	\$630.00	530 S White Chapel Blvd				
		Southlake, TX 76092				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense Food for Fundraiser				
		1 ood for i difficulties				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
ľ	expenditure to benefit C/OI					
H	Date	Payee name				
	02/20/2024	Thompson, Payton				
┝						
	Amount (\$) Payee address; City; State; Zip Code					
\$510.00						
					PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
					EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Work				
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OH					
F	Date	Payee name				
	02/23/2024	Thomsen, Corey				
Н	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,130.00	2 Pin Oak Ct				
	Trophy Club, TX 76262					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Salaries/Wages/Contract Labor				
	EXI ENDITORE	Check if Austin, TX, officeholder living expense				
		Campaign Work				
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					
\vdash						

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1: Sch: 27/32 Rpt: 66/71	2 FILER NAME Capriglione, Giovanni S. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00065973				
4	Date 01/26/2024	5 Payee name Towne Park Ltd				
6	Amount (\$) \$21.64	7 Payee address; City; State; Zip Code 12720 Merit Dr Dallas, TX 75251				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Parking				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held				
	Date 02/15/2024	Payee name USPS				
	Amount (\$) \$273.36	Payee address; City; State; Zip Code 300 State St Southlake, TX 76092				
	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 Postage for Mailings				
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH					
	Date 02/11/2024	Payee name Vantage ROI				
	Amount (\$) \$3,840.87	Payee address; City; State; Zip Code PO Box 340836				
		Austin, TX 78734				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Research				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				

SCHEDULE F1

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

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

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				
1	Total pages Schedule F1:				
•	Sch: 28/32 Rpt: 67/71	Capriglione, Giovanni S. (The Honorable) 00065973			
4	Date	5 Payee name			
	01/29/2024	Verizon Wireless			
6	Amount (\$) \$825.64	7 Payee address; City; State; Zip Code			
	Ψ023.04				
		Ste 340			
		Southlake, TX 76093			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Telephones and Plans for Campaign Calls			
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
_					
	Date	Payee name			
	02/04/2024	Vonlane			
	Amount (\$) Payee address; City; State; Zip Code \$224.00 6310 Lemmon Ave				
	Dallas, TX 75209				
	PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense C/OH Travel Expense DFW-Austin			
	C/On Travel Expense Drvv-Austin				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	1			
	Date	Payee name			
	02/23/2024	Wilmot, Bob			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$360.00	PO Box 234			
	Roanoke, TX 76262				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Campaign Work			
		Sampaign Work			
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OH					

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 29/32 Rpt: 68/71 Capriglione, Giovanni S. (The Honorable) 00065973 4 Date Payee name 02/16/2024 Wilmot, Bob 6 Amount (\$) Payee address; City; State; Zip Code \$300.00 PO Box 234 Roanoke, TX 76262 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Work Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/11/2024 Wilmot, Bob Amount (\$) Payee address; City; State; Zip Code \$300.00 PO Box 234 Roanoke, TX 76262 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Work Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/05/2024 Wilmot, Bob Amount (\$) Payee address: City; State; Zip Code \$120.00 PO Box 234 Roanoke, TX 76262 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Work Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 30/32 Rpt: 69/71	Capriglione, Giovanni S. (The Honorable) 00065973	
4	Date	5 Payee name	
	02/18/2024	Winred	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$0.39 1776 Wilson Blvd		
		Arlington, VA 22209	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Interchange Fees	
		interchange rees	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
⊨	Date	Davisa nama	
	02/13/2024	Payee name Winred	
L			
	Amount (\$)	Payee address; City; State; Zip Code	
\$9.87 1776 Wilson Blvd			
		Arlington, VA 22209	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Interchange Fees	
⊢	Complete ONLY if direct Candidate/Officeholder name Office sought Office held		
	Complete ONLY if direct expenditure to benefit C/OI		
⊨	Data		
	Date	Payee name	
	02/07/2024	Winred	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3.09	1776 Wilson Blvd	
		Arlington, VA 22209	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Interchange Fees	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
\vdash			
L			

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

	Candidate/Officeholder/Politica Credit Card Payment	d 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: 31/32 Rpt: 70/71	Capriglione, Giovanni S. (The Honorable) 00065973		
4	Date	5 Payee name		
	02/06/2024	Winred		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$65.70 1776 Wilson Blvd			
		Arlington, VA 22209		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Interchange Fees		
		into-ortalige i eee		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O			
Г	Date	Payee name		
	02/05/2024	Winred		
Г	Amount (\$)	Payee address; City; State; Zip Code		
\$86.03 1776 Wilson Blvd				
Arlington, VA 22209				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Interchange Fees		
		interestating i deed		
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OH			
H	Date	Payee name		
	02/02/2024	Your New Neighbor		
H	Amount (\$)	Payee address; City; State; Zip Code		
	\$515.00	10 N Caddo ST		
	PMB 191			
Cleburne, TX 76031				
	PURPOSE	To a second seco		
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Check if Austin, TX, officeholder living expense		
		Door to Door Neighbor Service		
L				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/Ol	<u> </u>		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	cal Committee Legal Services Salaries/Wages/Contract Labor OTHER (er The Instruction Guide explains how to complete this form.	nter a category not listed above)		
1	Total pages Schedule F1:	: 2 FILER NAME 3 Filer ID	(Ethics Commission Filers)		
	Sch: 32/32 Rpt: 71/71	Capriglione, Giovanni S. (The Honorable) 000659	73		
4	Date	5 Payee name			
	01/29/2024	Ziprecruiter			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
l	\$537.26				
		Venice, CA 90291			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas.			
		Employee Recruiter	iiviiig expense		
9	Complete ONLY if direct expenditure to benefit C/O		e held		
Г	Date	Payee name			
	02/17/2024	Ziprecruiter			
H	Amount (\$)	Payee address; City; State; Zip Code			
	\$537.26	2115 Glencoe Ave			
		Venice, CA 90291			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas.			
		Employee Recruiter	iiviiig experise		
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office	e held		
	expenditure to benefit C/Ol	OH			
l					
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L					