

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers) 00088008	2 Total pages filed: 23	OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Arthur D.	MI MI
	NICKNAME Trey	LAST Wharton	SUFFIX
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded modified reporting limit _____	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)	
	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report (Attach C/OH-FR)	
5 ORIGINAL PERIOD COVERED	Month Day Year 01/26/2024	THROUGH	Month Day Year 02/24/2024
Date Received ELECTRONICALLY FILED 02/25/2024 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged			

6 EXPLANATION OF CORRECTION
 Report was filed before information about in-kind donations was received. The in-kind donations are now included in the report.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mr. Arthur D. Wharton

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00088008	2 Total pages filed: 23	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Arthur D.	MI	OFFICE USE ONLY
	NICKNAME Trey	LAST Wharton	SUFFIX	
ELECTRONICALLY FILED 02/25/2024				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE PO Box 1242 Huntsville, TX 77342			Date Received
				Date Hand-delivered or Date Postmarked
				Receipt #
				Amount
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Clinton T.	MI	
	NICKNAME	LAST McLaren	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1 Grapevine Cir Huntsville, TX 77320			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
(936) 661-3711				
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month	Day	Year	Month
01/26/2024 THROUGH 02/24/2024				
10 ELECTION	ELECTION DATE Month Day Year 03/05/2024			ELECTION TYPE
				<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)
				State Representative Place Huntsville District 12

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

3 of 23

13 C / OH NAME Wharton, Arthur D. (Mr.)	14 Filer ID (Ethics Commission Filers) 00088008
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME Texas Alliance for Life PAC
		COMMITTEE ADDRESS 8000 Centre Park Drive Suite 380 Austin, TX 78754
		COMMITTEE CAMPAIGN TREASURER NAME Shaw, James
		COMMITTEE CAMPAIGN TREASURER ADDRESS 4505 Corazon Cv Round Rock, TX 78681

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 178,512.76
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,743.38
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 6,518.67
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 40,000.00

17 AFFIDAVIT

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

Mr. Arthur D. Wharton

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - C/OH

18 FILER NAME Wharton, Arthur D. (Mr.)	19 Filer ID (Ethics Commission Filers) 00088008
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20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 29,900.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 148,612.76
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 20,000.00
5. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 5,743.38
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/11 Rpt: 5/23
2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008
4 Date 02/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARENS, JAMES (Dr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code BRENHAM, TX 77833	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 02/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHFIELD, MIKE	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	
Principal occupation / Job title (See Instructions) ACQUITIONS		Employer (See Instructions) UNDINE GROUP LLC
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aiena, Lane	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Huntsville, TX 77320	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Huntsville Family Medicine
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRETT, MRS O. EUGENE	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADBURY, CHARLES	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) JBS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/11 Rpt: 6/23
2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008
4 Date 02/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURDETT, T JAY <hr/> 6 Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) TJ BURDETT & SON
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Russell <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77320	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) University Advancement		Employer (See Instructions) SHSU
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Jeff <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77320	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COALITION FOR GOOD GOVERNMENT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COGHLAN, BRETT <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CAPTAIN PARAMEDIC		Employer (See Instructions) AUSTIN COUNTY EMS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/11 Rpt: 7/23
2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008
4 Date 02/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER, BRYAN <hr/> 6 Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) EXEC DIRECTOR		9 Employer (See Instructions) TDCJ
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRYER-MOORMAN, CHRISITE <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) HUNTSVILLE ISD
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ROBERT <hr/> Contributor address; City; State; Zip Code CHAPPELL HILL, TX 77426	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEVENPORT, RAYMOND <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) EXE VICE PRESIDENT		Employer (See Instructions) TRADEMARKS PROMOTIONAL PRODUCTS
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICKERSON, GERALDINE <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/11 Rpt: 8/23
2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008
4 Date 02/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eglsaer, Richard <hr/> 6 Contributor address; City; State; Zip Code Huntsville, TX 77340	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, PATSY <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, Kevin <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Gallagher
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, JOE <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SMITHER MARTIN HENDERSON
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, JAMES <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) HBI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/11 Rpt: 9/23
2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008
4 Date 01/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IBAT PAC <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, MORRIS <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOOI, PAUL <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$800.00
Principal occupation / Job title (See Instructions) DENTIST		Employer (See Instructions) DENTAL HEALTH ASSOCIATES
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMPBERT, KAYLN <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) STYLIST
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCK LORD LLP <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/11 Rpt: 10/23
2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008
4 Date 02/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUEDTKE, TERRY <hr/> 6 Contributor address; City; State; Zip Code BURTON, TX 77835	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) J&J PACKING COMPANY
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucius, Sheryl <hr/> Contributor address; City; State; Zip Code Waller, TX 77484	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self employed
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, CHARLES <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, MARY VIRGINIA <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77342	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Alvin <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77342	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Smither Martin Henderson

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/11 Rpt: 11/23
2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008
4 Date 02/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDaniel, Lana <hr/> 6 Contributor address; City; State; Zip Code Chappell Hill, TX 77426	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson Amaya LLC <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77340	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OVERKOTT, MARY LOU <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC THE INDEPENDENT INSURANCE AGENTS OF TEXAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78768	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARK, MANCE M <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PARK LAW FIRM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/11 Rpt: 12/23
2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008
4 Date 02/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patrick, Susan <hr/> 6 Contributor address; City; State; Zip Code Iola, TX 77861	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quimby, Jody <hr/> Contributor address; City; State; Zip Code Bryan , TX 77805	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, FRANK <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) PRESTIGE CONTRACTORS
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, JOHN <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) FIRST NATIONAL BANK
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, TANDY <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/11 Rpt: 13/23
2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008
4 Date 01/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, GARY <hr/> 6 Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, W GREG <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) SAM HOUSTON FUNERAL HOME
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, W GREG <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) SAM HOUSTON FUNERAL HOME
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOMMERFIELD, DIANA <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORY, DALE <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) REAL ESTATE BROKER		Employer (See Instructions) THE STORY TEAM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/11 Rpt: 14/23
2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008
4 Date 01/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, TERRI <hr/> 6 Contributor address; City; State; Zip Code WALLER, TX 77484	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) AIM AGENTS NETWORK LLC
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TARPEY, KENNETH <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 01/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THISTLETHWAITE, BARRY <hr/> Contributor address; City; State; Zip Code DALLAS , TX 75238	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECHNICAL WRITER		Employer (See Instructions) GXO INC.
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TomFoolery's LLC <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77340	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) U.S.A.P. Texas LC <hr/> Contributor address; City; State; Zip Code Dallas, TX 75251	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/11 Rpt: 15/23
2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008
4 Date 02/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULLRICH, JOHANNA <hr/> 6 Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) RANCHER		9 Employer (See Instructions) SELF
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISHUHN, LARRY <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLS, LLOYD <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICK, JOHN <hr/> Contributor address; City; State; Zip Code CHAPPELL HILL, TX 77426	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Randy <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77320	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Able's Sporting Inc.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/4 Rpt: 16/23	
2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/19/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Jeff	8 Amount of contribution (\$) \$925.00	9 In-kind contribution description caterer exp for event
	7 Contributor address; City; State; Zip Code Huntsville, TX 77320	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See instructions) Retired	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Abbott Campaign	Amount of contribution (\$) \$6,933.68	In-kind contribution description polling
	Contributor address; City; State; Zip Code Austin, TX 78767	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Abbott Campaign	Amount of contribution (\$) \$15,873.00	In-kind contribution description Canvassing
	Contributor address; City; State; Zip Code Austin, TX 78767	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor'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 Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/4 Rpt: 17/23	
2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 01/31/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Abbott Campaign	8 Amount of contribution (\$) \$390.06	9 In-kind contribution description Texting
	7 Contributor address; City; State; Zip Code Austin, TX 78767		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Abbott Campaign	Amount of contribution (\$) \$35,527.90	In-kind contribution description Digital
	Contributor address; City; State; Zip Code Austin, TX 78767		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Abbott Campaign	Amount of contribution (\$) \$2,910.00	In-kind contribution description Canvassing
	Contributor address; City; State; Zip Code Austin, TX 78767		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor'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 Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 3/4 Rpt: 18/23	
2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/15/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Abbott Campaign	8 Amount of contribution (\$) \$10,800.00	9 In-kind contribution description Polling
	7 Contributor address; City; State; Zip Code Austin, TX 78767	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Abbott Campaign	Amount of contribution (\$) \$668.72	In-kind contribution description Texting
	Contributor address; City; State; Zip Code Austin, TX 78767	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Abbott Campaign	Amount of contribution (\$) \$29,036.00	In-kind contribution description advertising
	Contributor address; City; State; Zip Code Austin, TX 78767	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor'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 Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 4/4 Rpt: 19/23	
2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/20/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Abbott Campaign <hr/> 7 Contributor address; City; State; Zip Code Austin, TX 78767	8 Amount of contribution (\$) \$10,638.00	9 In-kind contribution description canvassing <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Abbott Campaign <hr/> Contributor address; City; State; Zip Code Austin, TX 78767	Amount of contribution (\$) \$34,910.40	In-kind contribution description digital <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 20/23	
2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008	
4 TOTAL OF UNITEMIZED LOANS			\$
5 Date of loan 02/09/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) WHARTON III, ARTHUR	9 Loan Amount (\$) \$10,000.00	
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code HUNTSVILLE, TX 77342	10 Interest Rate	
		11 Maturity Date 02/09/2026	
12 Principal occupation / Job title (See Instructions) OWNER/PRINCIPAL AGENT		13 Employer (See Instructions) WHARTON INSURANCE NETWORK	
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code		
20 Principal occupation		21 Employer (See Instructions)	
Date of loan 02/24/2024	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) WHARTON III, ARTHUR	Loan Amount (\$) \$10,000.00	
Is lender a financial institution? No	Lender address; City; State; Zip Code HUNTSVILLE, TX 77342	Interest Rate	
		Maturity Date 02/24/2026	
Principal occupation / Job title (See Instructions) Owner - Insurance Agency		Employer (See Instructions) WHARTON INSURANCE NETWORK	
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>	
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code		
Principal occupation		Employer (See Instructions)	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/3 Rpt: 21/23	2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008
4 CREDIT CARD ISSUER	Name of financial institution Chase		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$100.00	(b) Date of Charge 02/19/2024	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Madisonville Meteor	(b) Payee address; City, State, Zip Code PO BOX 999 Madisonville, TX 77864	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description newspaper ad
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wharton, Trey	Office sought State Representative Place	Office held
PAYMENT	(a) Amount Charged \$315.00	(b) Date of Charge 02/21/2024	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Madisonville Meteor	(b) Payee address; City, State, Zip Code PO BOX 999 Madisonville, TX 77864	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Newspaper ad
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wharton, Trey	Office sought State Representative Place	Office held
PAYMENT	(a) Amount Charged \$400.00	(b) Date of Charge 02/02/2024	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name The Navasota Examiner	(b) Payee address; City, State, Zip Code 115 Railroad St Navasota, TX 77868	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description newspaper ad
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wharton, Trey	Office sought State Representative Place	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 2/3 Rpt: 22/23	2	FILER NAME Wharton, Arthur D. (Mr.)	3	Filer ID (Ethics Commission Filers) 00088008
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$1,994.00	(b) Date of Charge 02/01/2024	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name KTTX KWHI		(b) Payee address; City, State, Zip Code PO Box 1280 Brenham, TX 77834	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description radio ad	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wharton, Trey	Office sought State Representative Place	Office held	
6	PAYMENT	(a) Amount Charged \$1,894.38	(b) Date of Charge 02/02/2024	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Uptime Films LLC		(b) Payee address; City, State, Zip Code 3909 Spring Forest Dr Pearland, TX 77584	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Video from event	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wharton, Trey	Office sought State Representative Place	Office held	
6	PAYMENT	(a) Amount Charged \$518.00	(b) Date of Charge 02/23/2024	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name KTTX KWHI		(b) Payee address; City, State, Zip Code PO Box 1280 Brenham, TX 77834	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Radio ad	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wharton, Trey	Office sought State Representative Place	Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 3/3 Rpt: 23/23	2 FILER NAME Wharton, Arthur D. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088008
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$522.00	(b) Date of Charge 02/23/2024	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Huntsville Item	(b) Payee address; City, State, Zip Code 1409 10th Street Huntsville, TX 77310	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Newspaper ads
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name WHARTON, TREY	Office sought State Representative Place	Office held