

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM **JC/OH**
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00085659	2 Total pages filed: 16	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST William A.	MI MI	OFFICE USE ONLY
	NICKNAME	LAST Knight	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE P.O. Box 1066 Fort Worth, TX 76101			Date Hand-delivered or Date Postmarked
				Receipt # Amount
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Annette P.	MI MI	
	NICKNAME	LAST Tofan	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 1066 Fort Worth, TX 76101			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(682)	422-7184		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 01/26/2024	THROUGH	Month Day Year 02/24/2024	
10 ELECTION	ELECTION DATE Month Day Year 03/05/2024		ELECTION TYPE	
			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Criminal District Court Judge, Tarrant Co. Place 2	

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 16

13 C / OH NAME Knight, William A. (Mr.)	14 Filer ID (Ethics Commission Filers) 00085659
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15 NOTICE FROM POLITICAL COMMITTEE(S)	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.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC		
	COMMITTEE CAMPAIGN TREASURER NAME		
COMMITTEE CAMPAIGN TREASURER ADDRESS			

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	8,200.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	29,740.17
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1,244.65
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	29,700.00

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. William A. Knight

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

SUBTOTALS - JC/OH

18 FILER NAME Knight, William A. (Mr.)		19 Filer ID 00085659	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	8,200.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	28,740.17
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	1,000.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/10 Rpt: 4/16
2 FILER NAME Knight, William A. (Mr.)		3 Filer ID (Ethics Commission Filers) 00085659
4 Date 01/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banglesdorf, Jake	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76116	
8 Contributor's Principal Occupation Finance		9 Contributor's Job Title CEO
10 Contributor's employer/law firm AAA Capital		11 Law firm of contributor's spouse (if any) N/A
12 If contributor is a child, law firm of parent(s) (if any) N/A		
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Ramona	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76102	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 01/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkovsky, Wes	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Aledo, TX 76008	
Contributor's Principal Occupation Bookstore		Contributor's Job Title Owner
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) Law Offices of John David Hart
If contributor is a child, law firm of parent(s) (if any) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/10 Rpt: 5/16
2 FILER NAME Knight, William A. (Mr.)		3 Filer ID (Ethics Commission Filers) 00085659
4 Date 02/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brotherton, Charla	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76107	
8 Contributor's Principal Occupation Insurance		9 Contributor's Job Title Broker
10 Contributor's employer/law firm Charla Brotherton Insurance Agency		11 Law firm of contributor's spouse (if any) N/A
12 If contributor is a child, law firm of parent(s) (if any) N/A		
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkett, Gene	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75251	
Contributor's Principal Occupation Law		Contributor's Job Title Lawyer
Contributor's employer/law firm Frankel & Frankel		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cofer, Cody	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76102	
Contributor's Principal Occupation Law		Contributor's Job Title Lawyer
Contributor's employer/law firm Cofer Luster Law Firm		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/10 Rpt: 6/16
2 FILER NAME Knight, William A. (Mr.)		3 Filer ID (Ethics Commission Filers) 00085659
4 Date 01/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, David	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Mansfield, TX 76063	
8 Contributor's Principal Occupation Law		9 Contributor's Job Title Lawyer
10 Contributor's employer/law firm Harris, Cook LLP		11 Law firm of contributor's spouse (if any) Unknown
12 If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenhill, Ann	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76107	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any) Haynes & Boone
If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hahnfeld, Michel	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76107	
Contributor's Principal Occupation Insurance		Contributor's Job Title Partner
Contributor's employer/law firm Wortham Insurance		Law firm of contributor's spouse (if any) Unknown
If contributor is a child, law firm of parent(s) (if any) N/A N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/10 Rpt: 7/16
2 FILER NAME Knight, William A. (Mr.)		3 Filer ID (Ethics Commission Filers) 00085659
4 Date 02/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hallum, Raleigh	7 Amount of Contribution (\$) \$300.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76116	
8 Contributor's Principal Occupation Real Estate		9 Contributor's Job Title Landman
10 Contributor's employer/law firm Self-Employed		11 Law firm of contributor's spouse (if any) N/A
12 If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammerstad, Arlin (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Grapevine, TX 76051	
Contributor's Principal Occupation Unknown		Contributor's Job Title Unknown
Contributor's employer/law firm Unknown		Law firm of contributor's spouse (if any) Unknown
If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Brenda	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm N/a		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/10 Rpt: 8/16
2 FILER NAME Knight, William A. (Mr.)		3 Filer ID (Ethics Commission Filers) 00085659
4 Date 02/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Debi	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76132	
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm N/A		11 Law firm of contributor's spouse (if any) N/A
12 If contributor is a child, law firm of parent(s) (if any) N/A		
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Barry	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76133	
Contributor's Principal Occupation Law		Contributor's Job Title Lawyer
Contributor's employer/law firm Law Offices of Barry Johnson		Law firm of contributor's spouse (if any) Unknown
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Labovitz, Eric	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76102	
Contributor's Principal Occupation Law		Contributor's Job Title Lawyer
Contributor's employer/law firm Labovitz Law Firm		Law firm of contributor's spouse (if any) Unknown
If contributor is a child, law firm of parent(s) (if any) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/10 Rpt: 9/16
2 FILER NAME Knight, William A. (Mr.)		3 Filer ID (Ethics Commission Filers) 00085659
4 Date 02/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Melissa	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75251	
8 Contributor's Principal Occupation IT Management		9 Contributor's Job Title Director
10 Contributor's employer/law firm Anglepoint		11 Law firm of contributor's spouse (if any) N/A
12 If contributor is a child, law firm of parent(s) (if any) Unknown Unknown		
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCluer, Carol	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76107	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Mary	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76197	
Contributor's Principal Occupation Real Estate		Contributor's Job Title Realtor
Contributor's employer/law firm Briggs Freeman		Law firm of contributor's spouse (if any) Unknown
If contributor is a child, law firm of parent(s) (if any) N/A N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/10 Rpt: 10/16
2 FILER NAME Knight, William A. (Mr.)		3 Filer ID (Ethics Commission Filers) 00085659
4 Date 02/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Regmund, Julie (Ms.)	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Benbrook, TX 76126		
8 Contributor's Principal Occupation Nursing		9 Contributor's Job Title Nurse
10 Contributor's employer/law firm Unknown		11 Law firm of contributor's spouse (if any) N/A
12 If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renforth, Jim	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Fort Worth, TX 76116		
Contributor's Principal Occupation Law		Contributor's Job Title Lawyer
Contributor's employer/law firm Law Offices of Jim Renforth		Law firm of contributor's spouse (if any) Unknown
If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Mark	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Fort Worth, TX 76112		
Contributor's Principal Occupation Law		Contributor's Job Title Lawyer
Contributor's employer/law firm Scott, McNeill & Burney PC		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/10 Rpt: 11/16
2 FILER NAME Knight, William A. (Mr.)		3 Filer ID (Ethics Commission Filers) 00085659
4 Date 02/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slattery, Robert	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Keller, TX 76248	
8 Contributor's Principal Occupation Unknown		9 Contributor's Job Title Unknown
10 Contributor's employer/law firm Unknown		11 Law firm of contributor's spouse (if any) Unknown
12 If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Roxann	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Southlake, TX 76092	
Contributor's Principal Occupation Real Estate		Contributor's Job Title Realtor
Contributor's employer/law firm Roxann Taylor and Associates		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 01/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teitlebaum, Melinda	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76114	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/10 Rpt: 12/16
2 FILER NAME Knight, William A. (Mr.)		3 Filer ID (Ethics Commission Filers) 00085659
4 Date 01/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler, Janice	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Arlington, TX 76017	
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm N/A		11 Law firm of contributor's spouse (if any) Unknown
12 If contributor is a child, law firm of parent(s) (if any) N/A		
Date 02/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Mike	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76102	
Contributor's Principal Occupation Law		Contributor's Job Title LEO
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Sr., Thomas	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76196	
Contributor's Principal Occupation District Clerk		Contributor's Job Title District Clerk
Contributor's employer/law firm Tarrant County, Texas		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/10 Rpt: 13/16
2 FILER NAME Knight, William A. (Mr.)		3 Filer ID (Ethics Commission Filers) 00085659
4 Date 02/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) de Bullet Jr, Gene	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76179	
8 Contributor's Principal Occupation Law		9 Contributor's Job Title Lawyer
10 Contributor's employer/law firm Gene de Bullet JR Law Firm PC		11 Law firm of contributor's spouse (if any) Unknown
12 If contributor is a child, law firm of parent(s) (if any) N/A		N/A

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/2 Rpt: 14/16	2 FILER NAME Knight, William A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00085659
4 Date 02/19/2024	5 Payee name Bird's Copies LLC	
6 Amount (\$) \$280.12	7 Payee address; City; State; Zip Code 208 South East Street Arlington, TX 70610	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Card printing cost.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/19/2024	Payee name Bird's Copies LLC	
Amount (\$) \$303.23	Payee address; City; State; Zip Code 208 South East Street Arlington, TX 70610	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Card printing cost.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/19/2024	Payee name FedEx	
Amount (\$) \$12.32	Payee address; City; State; Zip Code 4485 Bryant Irving Road Fort Worth, TX 76132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Mail expense.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mail expense.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/2 Rpt: 15/16	2 FILER NAME Knight, William A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00085659
4 Date 02/17/2024	5 Payee name Install Connect, INC.	
6 Amount (\$) \$5,500.00	7 Payee address; City; State; Zip Code 505 W. State Street Garland, TX 75040	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign expense.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/22/2024	Payee name Majority Strategies	
Amount (\$) \$18,300.00	Payee address; City; State; Zip Code 1200 E. Campbell Road Suite 108 Richardson, TX 75081	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailer expense.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/22/2024	Payee name Texas Trade Graphics	
Amount (\$) \$4,344.50	Payee address; City; State; Zip Code 2935 Irving Suite 201 Dallas, TX 75247	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign expense.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 16/16	2 FILER NAME Knight, William A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00085659	
4 Date 02/12/2024	5 Payee name Tarrant Republican Club PAC		
6 Amount (\$) \$1,000.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 1454 Colleyville, TX 76034		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailer expense.	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held