FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00087823 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Clint NAME Date Received **ELECTRONICALLY FILED** 02/26/2024 NICKNAME LAST **SUFFIX** Powell CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE CITY; **OFFICEHOLDER** 1005 Congress Ave. MAILING Receipt # Amount **ADDRESS** Suite 580 Austin, TX 78701 Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ami NAME NICKNAME LAST **SUFFIX** Powell **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER** 1005 Congress Ave **ADDRESS** Suite 580 (Residence or Business) Austin, TX 78701 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (830) 570-9791 **PHONE** REPORT **TYPE** January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) July 15 8th day before election Exceeded modified reporting limit Year **PERIOD** Month Day Month Day Year **COVERED** 01/26/2024 **THROUGH** 02/24/2024

Month

ELECTION DATE

Year

Day

03/05/2024

OFFICE HELD (if any)

Mayor of Pleasanton

10 ELECTION

11 OFFICE

χ Primary

General

ELECTION TYPE

12 OFFICE SOUGHT (if known)

State Representative District 80

Other

Runoff

Special

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 8

13 C / OH NAME	Powell, Clint			14 Filer ID 00087823	(Ethics Com	ımission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	FROM candidate / officeholder. These expenditures may have been made without the candidate POLITICAL consent. Candidates and officeholders are required to report this information only if they report the consent of the properties								
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	ΛΕ						
_	GENERAL								
	COMMITTEE ADDRESS SPECIFIC								
		COMMITTEE CAN	IPAIGN TREASURER ADDF	ESS					
16 CONTRIBUTION TOTALS			ONTRIBUTIONS (OTHER TI CONTRIBUTIONS MADE E		\$	0.00			
		AL CONTRIBUTION PLEDGES, LOANS,	NS OR GUARANTEES OF LOA	NS)	\$	2,400.00			
EXPENDITURE TOTALS									
	4. TOTAL POLITICAL EXPENDITURES								
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD							
OUTSTANDING LOAN TOTALS	AS OF THE LAST DAY	\$	0.00						
17 AFFIDAVIT			I swear, or affirm, under pen true and correct and include under Title 15, Election Code	all information required					
				Clint Powell					
			Signature	of Candidate or Officeho	older	_			
AFFIX NO	TARY STAMP / SEAL AB	OVE							
Sworn to and subso	cribed before me, by the s	aid		, this the		day			
of	, 20, to co	ertify which, witness	my hand and seal of office.						
Signature of office	er administering	Printed name	of officer administering	Title of office	er administer	ing oath			

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				J V LI (C	3 of 8
l	ER NAN	(Ethics Commission Filers)			
I	ME OF	SUB	TOTAL AMOUNT		
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	2,400.00	
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$		
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS	\$		
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	90.56
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	288.15	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$		
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	\$		
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	\$		
12	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	\$		

	MONET	ARY POLITICAL C		SCHEDUI	ULE A1		
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/8	
2	FILER NAME Powell, Clint				3	Filer ID (Ethics Commission 00087823	on Filers)
4	Date 02/12/2024	5 Full name of contributor [Cox, Travis6 Contributor address; City; Sta	7	Amount of Contribution (\$)	\$500.00		
		San Antonio, TX 78230	1				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Date 02/01/2024	Full name of contributor Hartmann, Bubba Contributor address; City; Sta		Amount of Contribution (\$)	\$100.00		
	Principal occupation / Job title (See Instructions) Employer (See Instructions)						
	Retired			Retired			
	Date 02/09/2024	Full name of contributor [Maldonado, Roberto Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
		San Antonio, TX 78204					
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Maldonado Law Group,	-	LC	
Date Full name of contributor Contributor Mitchell, Christina Contributor address; City; State Uvalde, TX 78801		out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$100.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:					Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1				
	The Instru	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/8			
2	FILER NAME Powell, Clint		3	Filer ID (Ethics Commission 00087823	n Filers)		
4	Date 02/18/2024	 Full name of contributor	7	Amount of Contribution (\$)	\$100.00		
8	Principal occu	Pleasanton, TX 78064 upation / Job title (See Instructions)	9 Employer (See Instructions	 S)			
	Date 02/22/2024	Full name of contributor out-of-state PAC (ID#: Torn, Justin Contributor address; City; State; Zip Code Campbellton, TX 78008		Amount of Contribution (\$)	\$500.00		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions Torn Cattle Company	<u> </u> 			

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	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: 1/2 Rpt: 6/8	Powell, Clint 00087823
4	Date	5 Payee name
	01/29/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.30	1340 Poydras St Ste 1770
		New Orleans, LA 70112
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 Campaign Merchant Account Fees
		Campaign Welchant / locount / ccs
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	02/06/2024	Anedot
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$4.30	1340 Poydras St Ste 1770
	φ4.30	1340 Foydras St Ste 1770
		New Orleans, LA 70112
	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
		Campaign Merchant Account Fees
		Campaign Wordhalle / 1000ant 1 000
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	02/06/2024	Anedot
L		
	Amount (\$) \$4.30	Payee address; City; State; Zip Code 1340 Poydras St Ste 1770
	\$4.30	1340 Poydras St Ste 1770
		New Orleans, LA 70112
	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
		Campaign Merchant Account Fees
		Campaign Wordhalle / 1000 ant 1 cco
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

	Candidate/Officeholder/Politica Credit Card Payment			Legal Services	s Expense	Salaries/M		se s/Contract Labor		OTHER (enter	a category not listed abov	re)
				The Instruction G	uide explains h	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commissio	n Filers)
	Sch: 2/2 Rpt: 7/8		Powell, Clin	t						00087823		
4	Date	5	Payee name									
	02/08/2024		Anedot									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$4.30		1340 Poydra	as St Ste 1770								
			New Orlean	s, LA 70112								
8	PURPOSE	(a)			the ten of this eah	adula)	(b)	Description				
	OF	(-,	Fees	e Categories listed at t	ine top of this sche	eaule)	(~)	_ `	outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		1 000					Check if Austin,	TX,	officeholder livin	g expense	
								Campaign Me	ercl	hant Accou	nt Fees	
9	Complete ONLY if direct		Candidate/Offic	ceholder name	0	Office sou	ght			Office h	eld	
	expenditure to benefit C/O	Н										
	Date		Payee name									
	02/09/2024		Anedot									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$40.30		1340 Poydra	as St Ste 1770								
			New Orlean	s, LA 70112								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Fees								nplete Schedule T.	
								ш		officeholder livin		
								Campaign Me	erci	nani Accou	ni rees	
	Complete ONL V if direct	<u> </u>	Condidate/Offi	achaldar nama		\ffice cou	abt			Office b	old	
	Complete ONLY if direct expenditure to benefit C/O		Januluale/Onic	ceholder name	U	Office sou	grit			Office h	eiu	
		<u> </u>										
	Date		Payee name									
	01/31/2024		Independen	t Bank								
	Amount (\$)		Payee address	•	State;	Zip Co	de					
	\$33.06		4120 Bellair	e Blvd								
			Houston, TX	77025								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Accounting/	Banking				ш			nplete Schedule T.	
								_		officeholder livin	g expense	
								Campaign Ba	uiK	ing rees		
	Complete ONLY if direct	Ļ	Candidata/Off	achaldar nama		Office co:	abt			Office b	old	
	Complete ONLY if direct expenditure to benefit C/O		Januiuale/Uπi	ceholder name	O	Office sou	ynı			Office h	eiu	
	· 											

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 Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4: 2 FILER NAME						
Powell, Clint			00087823			
		EXPENDITURES	\$			
(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
\$8.52	02/05/2024					
(a) Payee name Microsoft		(b) Payee address; City, State, Zip C 1 Microsoft Way				
		Redmond, WA 98052				
	of this schodulo)	'				
l ' -	· · · · · · · · · · · · · · · · · · ·	Campaign Email Hostin	g			
	•					
(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living exp	ense		
Candidate/Officeholder	name Offic	e sought	Office held			
(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
\$270.63	02/23/2024					
(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
Next Level Signs a	nd Designs	1612 W Oaklawn				
		Pleasanton, TX 78016				
(a) Category		(b) Description				
(See Categories listed at the top Advertising Expense	of this schedule)	his schedule) Campaign Yard Signs				
(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living exp	ense		
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u> </u>		Office held			
(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid			
\$9.00	02/16/2024					
(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
Conveal		11923 North East Sumner St Ste 735				
Сорусан						
1 ' ' '	of this schedule)	1 '				
		Campaign Voicemail				
	•					
(*) —	<u> </u>	<u> </u>	TX, officeholder living exp	ense		
Candidate/Officeholder	name Offic	e sought	Office held			
	2 FILER NAME Powell, Clint Name of final Americal (a) Amount Charged \$8.52 (a) Payee name Microsoft (a) Category (See Categories listed at the top Office Overhead/Rent (c) Check if travel outside Candidate/Officeholder (a) Amount Charged \$270.63 (a) Payee name Next Level Signs at (a) Category (See Categories listed at the top Advertising Expense (c) Check if travel outside Candidate/Officeholder (a) Amount Charged \$9.00 (a) Payee name Copycall (a) Category (See Categories listed at the top Office Overhead/Rent) (c) Check if travel outside	Powell, Clint Name of financial institution American Express (a) Amount Charged \$8.52 (b) Date of Charge \$8.52 (a) Payee name Microsoft (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Offic (a) Amount Charged \$270.63 (b) Date of Charge \$270.63 O2/23/2024 (a) Payee name Next Level Signs and Designs (a) Category (see Categories listed at the top of this schedule) Advertising Expense (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Offic (a) Amount Charged \$9.00 (b) Date of Charge \$9.00 O2/16/2024 (a) Payee name Copycall (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Copycall	Powell, Clint Name of financial institution American Express (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issi (a) Payee name Microsoft (a) Category (See Categories listed at the top of this schedule) (b) Date of Charge (c) Date(s) Credit Card Issi Redmond, WA 98052 (d) Category (See Categories listed at the top of this schedule) (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name (b) Payee address; 1 Microsoft Way Redmond, WA 98052 (b) Description Campaign Email Hostin Campaign Email Hostin Check if Austin, Check if Austin, Check if Laustin Schedule) (b) Date of Charge (c) Date(s) Credit Card Issi (d) Payee address; 1612 W Oaklawn Pleasanton, TX 78016 (e) Description Campaign Yard Signs (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name (b) Payee address; 1612 W Oaklawn Campaign Yard Signs (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name (b) Payee address; 1612 W Oaklawn Campaign Yard Signs (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name (b) Payee address; 1612 W Oaklawn Campaign Yard Signs (c) Check if Austin, Campaign Voicemail (d) Category (See Categories listed at the top of this schedule) (d) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	2 FILER NAME Powell, Clint Name of financial institution American Express (a) Amount Charged \$8.52 (b) Date of Charge \$8.52 (c) Date(s) Credit Card Issuer Paid (d) Payee name Microsoft (e) Payee address; City, 1 Microsoft Way Redmond, WA 98052 (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Date of Charge \$270.63 (c) Date(s) Credit Card Issuer Paid (d) Description Campaign Email Hosting (e) Description Campaign Email Hosting (f) Description Campaign Email Hosting (g) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name (h) Payee address; City, Check if Lavel outside of Texas. Complete Schedule T. (h) Payee address; City, Check if Lavel outside of Texas. Complete Schedule T. (h) Payee address; City, Check if Lavel outside of Texas. Complete Schedule T. (h) Payee address; City, Check if Lavel outside of Texas. Complete Schedule T. Campaign Yard Signs (h) Description Campaign Yard Signs (h) Payee address; City, Check if Lavel outside of Texas. Complete Schedule T. Candidate/Officeholder name (h) Payee address; City, Check if Lavel outside of Texas. Complete Schedule T. Check if Austin, TX. officeholder living exp Copycall (a) Payee name Copycall (b) Payee address; City, Campaign Voicemail (b) Payee address; City, Campaign Voicemail	2 FILER NAME Powell, Clint Name of financial institution American Express American Express American Express S TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD S	