## CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

## FORM COR-C/OH

	Filer ID (Ethi	ics Commission Filers)	2 Total pages filed:			OEEICE I	JSE ONLY
	00088311		24			Date Received	JJE UNL I
3	CANDIDATE /	MS / MRS / MR	I FIRST		MI	ELECTRONICA	ALLY FILED
	OFFICEHOLDER NAME	Mr.	Shelby			02/26/2024	(LLTTTLLD
	NAIVIE	NICKNAME	LAST		SUFFIX		
			Williams			Date Hand-delivered o	r Data Daatmarkad
	ORIGINAL	January 15	Runoff	Other (s	pecify)	Date Hand-delivered d	i Date Postmarkeu
	REPORT TYPE	July 15	Exceeded modified	reporting limit		Receipt #	Amount
		30th day before election	15th day after camp			_	
		X 8th day before election	appointment (office	• •		Date Processed	
5	ORIGINAL PERIOD	Month Day Yea	ar	Month Day	Year	Date Imaged	
	COVERED	01/26/2024	THROUGH	02/24/2024		Date illiageu	
6	EXPLANATION OF C	CORRECTION					
7	AFFIDAVIT		and	ear, or affirm, under pocorrect.			d report is true
7	AFFIDAVIT		and	correct.	and all applicas: I swear, or	ble statements: affirm that the orig	inal report
7	AFFIDAVIT		and	correct.  ck the box next to any  Semiannual reports  was made in good fa	and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in	able statements:  affirm that the origing an intent to misleate to misleate the distribution of the report.  that I am filling this less day after the data accurate or incompared.	inal report d or to corrected te I learned plete. I
7	AFFIDAVIT		and Che	correct.  ck the box next to any  Semiannual reports was made in good fa misrepresent the info  Other reports: I s report not later than that the report as ori swear, or affirm, that	and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in	affirm that the original ran intent to misleated in the report.  That I am filing this less day after the dataccurate or incompassion in the report	inal report d or to corrected te I learned plete. I
7	AFFIDAVIT		and Che	correct.  ck the box next to any  Semiannual reports was made in good fa misrepresent the info  Other reports: I s report not later than that the report as ori swear, or affirm, that filed was made in go	and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in any error or or ood faith.	affirm that the original ran intent to misleated in the report.  That I am filing this less day after the dataccurate or incompassion in the report	inal report d or to corrected te I learned plete. I
7		AMP / SEAL ABOVE	and Che	correct.  ck the box next to any  Semiannual reports was made in good fa misrepresent the info  Other reports: I s report not later than that the report as ori swear, or affirm, that filed was made in go	and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in any error or or ood faith.	able statements:  affirm that the origing an intent to misleate to misleate the distribution of the report.  A that I am filling this less day after the day after the day accurate or incompassion in the reportion.  Williams	inal report d or to corrected te I learned plete. I
7	AFFIX NOTARY ST		and Che	correct.  ck the box next to any  Semiannual reports was made in good fa misrepresent the info  Other reports: I s report not later than that the report as ori swear, or affirm, that filed was made in go  Signatu	and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in any error or or od faith.  Mr. Shelby V	affirm that the original ran intent to misleated in the report.  That I am filing this less day after the data accurate or incomplission in the report.  Williams  For Officeholder	inal report d or to corrected te I learned olete. I t as originally
7	AFFIX NOTARY ST Sworn to and subsc	ribed before me, by the sai	and Che	correct.  ck the box next to any  Semiannual reports was made in good fa misrepresent the info  Other reports: I s report not later than that the report as ori swear, or affirm, that filed was made in go  Signatu	and all applica  is: I swear, or aith and without ormation contains the 14th busine ginally filed is in any error or or od faith.  Mr. Shelby Vare of Candidate this to this tendent in the second faith.	affirm that the original ran intent to misleated in the report.  That I am filing this less day after the data accurate or incomplission in the report.  Williams  For Officeholder	inal report d or to corrected te I learned olete. I t as originally
7	AFFIX NOTARY ST Sworn to and subsc		and Che	correct.  ck the box next to any  Semiannual reports was made in good fa misrepresent the info  Other reports: I s report not later than that the report as ori swear, or affirm, that filed was made in go  Signatu	and all applica  is: I swear, or aith and without ormation contains the 14th busine ginally filed is in any error or or od faith.  Mr. Shelby Vare of Candidate this to this tendent in the second faith.	affirm that the original ran intent to misleated in the report.  That I am filing this less day after the data accurate or incomplission in the report.  Williams  For Officeholder	inal report d or to corrected te I learned olete. I t as originally

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

# STATE / COUNTY CHAIR CAMPAIGN FINANCE REPORT

# FORM SC C/OH COVER SHEET PG 1

The SC C/OII Instruction (	Suide avaleine hou te complete t	hio form	1 Filer ID		2 Total pages filed:
	Guide explains how to complete t	nis torm.	(Ethics Commission Filers) 00088311	s) 	24
3 CANDIDATE NAME	MS / MRS / MR Mr.	FIRST Shelby		MI	OFFICE USE ONLY
	IVII.	Sileiby			Date Received
					ELECTRONICALLY FILED
	NICKNAME	LAST Williams		SUFFIX	02/26/2024
		VVIIIIdiiiS			D. A. Hand delivered as Date Destmarked
4 CANDIDATE	ADDRESS / PO BOX; APT	/ SUITE #; C	CITY; STATE; ZIP CC	DDE	Date Hand-delivered or Date Postmarked
ADDRESS	6040 Garden Gate Dr.				Receipt # Amount
Change of Address	Plano, TX 75024				Date Processed
					Date Imaged
5 CAMPAIGN	MS / MRS / MR	FIRST			MI
TREASURER NAME		Pat			
	NICKNAME	LAST			SUFFIX
	MICRIVAIVIE	Greer			SUPPIA
		0.00.			
		= 2 \ = 1 = 4 0 = \			
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO 3012 Jomar Dr.	BOX PLEASE)	); APT/SUITE#;	CITY;	STATE; ZIP CODE
ADDRESS	3012 Juliai Di.				
(Residence or Business)	Plano, TX 75075				
	1 10.10, 17. 100.0				
7 CAMPAIGN	AREA CODE	PHONE 1	NUMBER		EXTENSION
TREASURER PHONE	(972) 768-5544	• -			<b>-</b> /-/
PHONE					
8 REPORT TYPE					
	January 15	30th day	y before convention / elec	ction	Runoff
	July 15	X 8th day	before convention / election	ion	Final report (Attach SC C/OH-FR)
		-			
9 PERIOD	1	ear			Month Day Year
COVERED	01/26/2024		THROUGH		02/24/2024
10 CONVENTION /	Month Day Ye	ear	11 OFFICE		
ELECTION DATE	William Day 13	đai	SOUGH'		STATE CHAIR
					X COUNTY CHAIR
12 POLITICAL	Republican		COL	UNTY (If Applic	cable)
PARTY			Coll	lin	
		00			
		GO	TO PAGE 2		

### STATE / COUNTY CHAIR CAMPAIGN FINANCE REPORT: SUPPORT & TOTALS

# FORM SC C/OH COVER SHEET PG 2

3 of 24

13 CANDIDATE NAME	Williams, Shelby (Mr	.)	<b>14</b> Filer ID 00088311	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)		andidate's knowledge or consent. C	mmittees to support the candidate. <i>The</i> Candidates are required to report this in		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREAS	URER NAME		
		COMMITTEE CAMPAIGN TREAS	URER ADDRESS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTION ES OF LOANS, OR CONTRIBUTIO	S (OTHER THAN PLEDGES, LOANS, NS MADE ELECTRONICALLY)	\$	0.00
		<b>AL CONTRIBUTIONS</b> PLEDGES, LOANS, OR GUARANT	EES OF LOANS)	\$	9,865.81
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS					0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$	9,480.31
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINE RIOD	D AS OF THE LAST DAY OF THE	\$	4,414.47
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR		NG LOANS AS OF THE LAST DAY	\$	0.00
<b>17</b> AFFADAVIT			m, under penalty of perjury, that the act t and includes all information required t Election Code.		
			Mr. Shelby Williams		
			Signature of Candidate		
AFFIX NO	TARY STAMP / SEAL ABO	OVE			
Sworn to and subso	cribed before me, by the s	aid	, this the		day
		rtify which, witness my hand and s			
Signature of office	eer administering oath	Printed name of officer admin	istering oath Title of office	r administeri	ng oath

## **SUBTOTALS - SC C/OH**

# FORM SC C/OH COVER SHEET PG 3

4 of 24

					4 01 24	
<b>18</b> CA	NDIDAT	E NAME	19 Filer ID	(Ethics	s Commission Filers)	
Wi	lliams,	Shelby (Mr.)	00088311			
		E SUBTOTALS		SUBTOTAL AMOUNT		
NA	ME OF	SCHEDULE			OBTOTAL AMOUNT	
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	8,020.00	
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	1,845.81		
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.		SCHEDULE E: LOANS		\$		
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	601.07	
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		\$	5,100.40	
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	3,778.84	
10.	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$		
11.	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$		
12.	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$		

	MONET	ARY POLITICAL C	IS	SCHEDULE A1			
	The Instru	ction Guide explains how t	to complete this for	n.	1	Total pages Schedule A1: Sch: 1/8 Rpt: 5/24	
2	FILER NAME Williams, Sh	elby (Mr.)			3	Filer ID (Ethics Commission 00088311	n Filers)
4	Date 02/06/2024	Full name of contributor     Acklin, Ed and Myrna     Contributor address; City; State	out-of-state PAC (ID#:te; Zip Code	)	7	Amount of Contribution (\$)	\$250.00
8	Principal occu	Plano, TX 75023	lo.	Employer (See Instructions			
0	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions Retired	)		
	Date 01/26/2024	Full name of contributor  Adcock, Justin  Contributor address; City; Stat				Amount of Contribution (\$)	\$250.00
	Deinsinal assu	Plano, TX 75093		Franks var (Caa Instructions	<u></u>		
	Principal occupation / Job title (See Instructions) Insurance			Employer (See Instructions Alacrity	·)		
	Date 02/12/2024	Full name of contributor [ Alexander, Cathie  Contributor address; City; Stat	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$50.00
		Plano, TX 74074					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 02/02/2024	Full name of contributor Anderson, Eugenie Contributor address; City; Stat	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 02/15/2024	Full name of contributor  Bartel, Thomas  Contributor address; City; State  Rockwall, TX 75087	out-of-state PAC (ID#:te; Zip Code	)		Amount of Contribution (\$)	\$250.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
			<u>,                                     </u>				

	MONET	ARY POLITICAL CON	S	SCHEDULE A1			
	The Instru	ction Guide explains how to c	omplete this form	n.	1	Total pages Schedule A1: Sch: 2/8 Rpt: 6/24	
2	FILER NAME Williams, Sh	elby (Mr.)			3	Filer ID (Ethics Commission 00088311	on Filers)
4	Date 02/15/2024	<ul> <li>Full name of contributor  on Bartel, Thomas</li> <li>Contributor address; City; State; Z</li> </ul>		)	7	Amount of Contribution (\$)	\$80.00
_	Deinainal accu	Rockwall, TX 75087	lo-	Faralous (Coo lastausticas			
8	Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	)		
	Date 02/08/2024	Bollner, Dan  Contributor address; City; State; Z	ut-of-state PAC (ID#: ip Code	)		Amount of Contribution (\$)	\$250.00
	Principal occupation / Job title (See Instructions) Retired			Employer (See Instructions Retired	)		
	Date 02/15/2024	Bronsky, Mike  Contributor address; City; State; Z	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu	Plano, TX 75023 pation / Job title (See Instructions)		Employer (See Instructions	)		
	Executive Di	rector		Bridge Builder Academics			
	Date 02/19/2024	Brown, Jean	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	)		
	Date 01/31/2024	Brown, Stephen	ut-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	)		
			•				

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how t	o complete this forr	n.	1	Total pages Schedule A1: Sch: 3/8 Rpt: 7/24	
2	FILER NAME Williams, Sh	elby (Mr.)			3	Filer ID (Ethics Commission 00088311	n Filers)
4	Date 02/03/2024	<ul><li>5 Full name of contributor Crawford, Jaci</li><li>6 Contributor address; City; State</li></ul>	out-of-state PAC (ID#:e; Zip Code	)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Plano, TX 75093 pation / Job title (See Instructions)	اه	Employer (See Instructions	.)		
0	Retired	pation / 300 title (See Instructions)	3	Retired	')		
	Date 02/12/2024	Full name of contributor France, Bill Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code	)		Amount of Contribution (\$)	\$50.00
	Princinal occu	Plano, TX 75093 pation / Job title (See Instructions)		Employer (See Instructions	) 		
	Retired			Retired	')		
	Date 02/08/2024	Full name of contributor Golubchik, Yuri Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code	)		Amount of Contribution (\$)	\$100.00
		Plano, TX 75093					
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions One Focus Realty	5)		
	Date 02/15/2024	Full name of contributor Howard, Corbett  Contributor address; City; State  Celina, TX 75009	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$200.00
	Principal occu Market Presi	pation / Job title (See Instructions) dent		Employer (See Instructions Lamar National Bank	)		
	Date 02/14/2024	Full name of contributor Johnston, Shelby Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code	)		Amount of Contribution (\$)	\$50.00
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions Johnston Ricci Realty G		ıp	
			·				

	MONET	ARY POLITICAL CO	ONTRIBUTION	NS		SCHEDUL	E <b>A1</b>	
	The Instruc	ction Guide explains how t	o complete this for	m.	1	Total pages Schedule A1: Sch: 4/8 Rpt: 8/24		
2	FILER NAME Williams, Sho	elby (Mr.)			3	Filer ID (Ethics Commission 00088311	n Filers)	
4	Date 02/15/2024	<ul><li>5 Full name of contributor Kali, Naga</li><li>6 Contributor address; City; Stat</li></ul>		)	7	Amount of Contribution (\$)	\$750.00	
_		Plano, TX 75025	1-		Ĺ			
8	Manager	pation / Job title (See Instructions)	9	Employer (See Instructions Lone Star Food Plano T		LC		
	Date 02/15/2024	Full name of contributor  Kancharla, Kishore  Contributor address; City; Stat  Allen, TX 75013			•	Amount of Contribution (\$)	\$750.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)			
	Hospitality			Bawarchi				
	Date 02/15/2024	Full name of contributor  Kemp, David  Contributor address; City; Stat	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$200.00	
		Plano, TX 75024						
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)			
Date 02/09/2024		Full name of contributor  Kerr, Jim and Chris  Contributor address; City; Stat  Plano, TX 75023	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$500.00	
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions) Retired				
	Date 02/15/2024	Full name of contributor  LaGesse, Andrew  Contributor address; City; Stat  Plano, TX 75075	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$50.00	
	Principal occu Unknown	pation / Job title (See Instructions)		Employer (See Instructions Unknown	s)			

	MONET	ARY POLITICAL CONTRIE	BUTION	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how to complet	te this for	n.	1	Total pages Schedule A1: Sch: 5/8 Rpt: 9/24	
2	FILER NAME Williams, Sh	elby (Mr.)			3	Filer ID (Ethics Commission 00088311	on Filers)
4	Date 02/08/2024	<ul> <li>Full name of contributor  out-of-state Lethe, David</li> <li>Contributor address; City; State; Zip Code</li> </ul>	PAC (ID#:	)	7	Amount of Contribution (\$)	\$50.00
8	Dringing! goog	Plano, TX 75025	lo.	Employer (See Instructions	<u>,,</u>		
0	QA Engineer	pation / Job title (See Instructions)	9	Racktop Systems	·)		
	Date 02/10/2024	Leyrer, Ellen	PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Dringing! goog	Plano, TX 75023	1	Employer (See Instructions	<u>''</u>		
	Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	·)		
	Date 02/15/2024	Full name of contributor out-of-state Lisle, Bill Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
		Plano, TX 75074					
	Principal occu Landscaping	pation / Job title (See Instructions)		Employer (See Instructions Lisle, Inc	5)		
	Date 02/09/2024	Magee, Keith	PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Director of C	pation / Job title (See Instructions) all Center		Employer (See Instructions Wireless CCTV	5)		
	Date 02/14/2024	Full name of contributor out-of-state McAloon, Ethelind  Contributor address; City; State; Zip Code  McKinney, TX 75072	PAC (ID#:			Amount of Contribution (\$)	\$20.00
	Principal occu Product Owr	pation / Job title (See Instructions) er		Employer (See Instructions N/A	5)		
			I				

	MONEI	ARY POLITICAL C	ONTRIBUTION	S		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this form	n.	1	Total pages Schedule A1: Sch: 6/8 Rpt: 10/24	
2	FILER NAME Williams, Sh	elby (Mr.)			3	Filer ID (Ethics Commission 00088311	n Filers)
4	Date 02/21/2024	<ul><li>5 Full name of contributor McCoy, Lynn</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$50.00
		Plano, TX 75023					
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions Retired	5)		
	Date 02/11/2024	Full name of contributor Mihalik, Jim Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$80.00
	D: : 1	Dallas, TX 75254					
	Principal occupation / Job title (See Instructions)  Mortgage Lender		)	Employer (See Instructions Supreme Lending	5)		
	Date 02/09/2024	Full name of contributor Padgett, Hayden Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$100.00
		Plano, TX 75025					
	Principal occu Product Dire	pation / Job title (See Instructions) ector		Employer (See Instructions) Taxwell			
	Date 02/15/2024	Full name of contributor Pikl, Jim and Joanie Contributor address; City; Sta McKinney, TX 75071	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Scheef & Stone	<u> </u>		
	Date 02/15/2024	Full name of contributor Pitlik, Julia Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$80.00
	Principal occu	Plano, TX 75025  pation / Job title (See Instructions)	)	Employer (See Instructions	<u> </u>		
	•						

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 7/8 Rpt: 11/24	
2	FILER NAME Williams, Sh	elby (Mr.)			3	Filer ID (Ethics Commission 00088311	n Filers)
4	Date 02/02/2024	<ul><li>5 Full name of contributor [Raghavan, Srini</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: te; Zip Code	)	7	Amount of Contribution (\$)	\$100.00
8	Principal occu Supply Chair	Allen, TX 75013 pation / Job title (See Instructions)	9	Employer (See Instructions Omnionpower	5)		
	Date 02/14/2024	Full name of contributor [Ricciardelli, Anthony Contributor address; City; Sta Plano, TX 75093	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions Law Offices of Anthony		ciardelli	
	Date 02/20/2024	Full name of contributor [ Rose-Boelsterli, Julie Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Plano, TX 75025 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Retired			Retired			
	Date 02/15/2024	Full name of contributor Samara, Allan Contributor address; City; Sta Plano, TX 75075	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u> </u> 5)		
	Date 02/08/2024	Full name of contributor Weinstein, Seth Contributor address; City; Sta Plano, TX 75093	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$50.00
	Principal occu Lawyer	pation / Job title (See Instructions)		Employer (See Instructions Law Offices of Seth Wei		ein PC	

MON	ETARY POLITICAL CONTRIBUTION	ONS	SCHEDUL	E <b>A1</b>
The Ins	truction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 8/8 Rpt: 12/24	
2 FILER NA	AME , Shelby (Mr.)		3 Filer ID (Ethics Commission 00088311	n Filers)
4 Date 02/01/20	5 Full name of contributor out-of-state PAC (ID#: Wilbur, Kirby  6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$)	\$50.00
8 Principal	McKinney, TX 75071 occupation / Job title (See Instructions)	9 Employer (See Instructions	s)	
RE Ager	nt	Self		
Date 02/12/20	Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$160.00
Principal Retired	Plano, TX 75024 occupation / Job title (See Instructions)	Employer (See Instructions Retired	s)	

#### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 13/24 3 Filer ID (Ethics Commission Filers) FILER NAME Williams, Shelby (Mr.) 00088311 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 02/16/2024 Cary, Gary \$158.03 | Print Materials 7 Contributor address; City; State; Zip Code Plano, TX 75093 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) Retired Retired 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Date Full name of contributor Amount of out-of-state PAC (ID#: contribution (\$) description 02/15/2024 Henry, Byron \$1,687.78 | Event Expense Contributor address; City; State; Zip Code Prosper, TX 75078 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Scheef & Stone Attorney Contributor's job title (FOR JUDICIAL) Contributor's principal occupation (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)

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/1 Rpt: 14/24	Williams, Shelby (Mr.) 00088311
4	Date	5 Payee name
	02/24/2024	Anedot
6	Amount (\$) \$173.90	7 Payee address; City; State; Zip Code 1920 McKinney Ave 7th floor
	DUDDOGE	Dallas, TX 75201
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Anedot Fees for Period 1/26/2024 - 2/24/2024
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/05/2024	Collin County Republican Party
	Amount (\$) \$300.00	Payee address; City; State; Zip Code 2963 West 15th Street Suite 2981  Plano, TX 75075
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Candidate Table
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/15/2024	Eventbrite
	Amount (\$) \$127.17	Payee address; City; State; Zip Code 95 Third Street, 2nd Floor
		San Francisco, CA 94103
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Eventbrite fees
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

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

Printing Expense

Caldidate/Officerfolder/Foliace		ruction Guide explains how	•	THEN (enter a category not in	sieu above)		
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Cor	nmission Filers)		
Sch: 1/6 Rpt: 15/24	Williams, Shelby (M	1r.)		00088311			
4 CREDIT CARD ISSUER		ncial institution al One	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$2.95	01/29/2024					
7 PAYEE	(a) Payee name  Namebright		(b) Payee address; 2635 Walnut Street	City, Sta	ate, Zip Code		
			Denver, CO 80205				
[ ] [ ]			(b) Description				
<u> </u>	Advertising Expense	or this schedule)	Web Services				
X Political	- '						
Non-Political	\ \( \frac{1}{2} \)	of Texas. Complete Schedule T.		, officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH	( ) 4 ( ) 4	[ (1) D ( (1)	1() 5 : () 6 : 11	B : I			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$11.54 	01/31/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, Sta	ate, Zip Code		
	Google		1600 Amphitheatre Parkway				
			Mountain View, CA 94043	3			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Email Services				
X Political	Fees						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$11.54	02/01/2024	(*)				
PAYEE	(a) Payee name	I	(b) Payee address;	City, Sta	ate, Zip Code		
			1600 Amphitheatre Parkv	vay			
	Google						
			Mountain View, CA 94043	3			
PURPOSE OF	(a) Category	of this cahadula)	(b) Description		<u> </u>		
EXPENDITURE 	(See Categories listed at the top	of this schedule)	Email Services				
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
	•						

## 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

	The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F4:	: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 2/6 Rpt: 16/24	Williams, Shelby (M	1r.)		00088311			
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	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$287.76	02/01/2024					
7 PAYEE	(a) Payee name  Google	1600 Amphitheatre Parkw			Zip Code		
			Mountain View, CA 94043	3			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	(b) Description					
<u></u>	Advertising Expense	of this schedule)	Ads				
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH			_				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$2.95	01/29/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code		
	Namebright		2635 Walnut Street				
			Denver, CO 80205				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Web Services				
X Political	Advertising Expense						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$11.54	01/31/2024					
PAYEE	(a) Payee name	<u>I</u>	(b) Payee address;	City, State,	Zip Code		
			1600 Amphitheatre Parkway				
	Google						
			Mountain View, CA 94043	3			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Email Services				
X Political	1.003						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
<b>———</b>	ı						

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

Printing Expense

	Candidate/Officerolder/Folitica	· ·	ruction Guide explains how	to complete		TILK (enter a catego	ry not iisted a	bove)
1	Total pages Schedule F4:		· · · · · · · · · · · · · · · · · · ·	•		3 Filer ID (Ethi	cs Commis	sion Filers)
l	Sch: 3/6 Rpt: 17/24	   Williams, Shelby (M	1r.)			00088311		,
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	) Credit Card Issuer	Paid		
		\$11.54	02/01/2024					
7	PAYEE	(a) Payee name  Google			phitheatre Parkw	•	State,	Zip Code
Ļ	DUDDOSE OF	(a) Catagony			i View, CA 94043	•		
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descrip Email Se				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	pense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	) Credit Card Issuer	<sup>-</sup> Paid		
		\$287.76	02/01/2024					
Г	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		Google		1600 Am	phitheatre Parkw	ay		
L					n View, CA 94043	}		
l	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	ption			
		Advertising Expense	of this schedule)	Ads				
	x Political	- '						
	Non-Political	(7)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder		e sought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	) Credit Card Issuer	Paid		
		\$97.41	02/15/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		FedEx Office		5000 W I	Park Blvd			
1				Plano, T	X 75093			
H	PURPOSE OF	(a) Category		(b) Descrip				
l	EXPENDITURE	(See Categories listed at the top  Advertising Expense	of this schedule)	Print Ser	vices			
	X Political	Auvertising Expense						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	pense	
  -	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	<u> </u>	e sought	<u> </u>	Office held		
H	,							

## 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

		The Inst	ruction Guide explains how	to complete th	nis form.			
<b>1</b> To	tal pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
So	ch: 4/6 Rpt: 18/24	Williams, Shelby (M	۹r.)			00088311		
	REDIT CARD SUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6 P/	AYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
		\$500.00	02/17/2024					
7 P/	AYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
		Google			hitheatre Parkw			
L		( ) 0 :			View, CA 94043			
	JRPOSE OF KPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript	ion			
I _	X Political	Advertising Expense	,	Ads				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	omplete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
	enditure to benefit C/OH							
P/	AYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
		\$900.00	02/19/2024					
P/	AYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
		Meta		One Hack	er Way			
				Menlo Park, CA 94025				
	JRPOSE OF KPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript Ads	ion			
	X Political	Advertising Expense						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
I	omplete <u>ONLY</u> if direct enditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
P/	AYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
		\$500.00	02/22/2024					
P/	AYEE	(a) Payee name	I .	(b) Payee a	ddress;	City,	State,	Zip Code
				1600 Amphitheatre Parkway				
		Google						
				Mountain '	View, CA 94043	1		
	JRPOSE OF	(a) Category	-f. doi: lo do d - \	(b) Description				
=	KPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Ads				
	X Political	J 77 33						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
I	omplete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expe	enditure to benefit C/OH							
1								

## 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

	The Instr	ruction Guide explains how	to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
Sch: 5/6 Rpt: 19/24	Williams, Shelby (M	۱r.)			00088311		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	r Paid		
	\$239.00	01/26/2024					
7 PAYEE	(a) Payee name		(b) Payee address; City, State, Zip			Zip Code	
	QT Printing			ntral Expresswa	ay, Suite 514		
	1, , , ,			1, TX 75080			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti				
X Political	Advertising Expense	,	Print Servi	ces			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid		
	\$97.41	02/15/2024					
PAYEE (a) Payee name			(b) Payee ad	ddress;	City,	State,	Zip Code
	FedEx Office		5000 W Pa	ark Blvd			
			Plano, TX	75093			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti Print Servi				
X Political	Advertising Expense						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid		
	\$500.00	02/17/2024					
PAYEE	(a) Payee name	•	(b) Payee ad	ddress;	City,	State,	Zip Code
	0.001		1600 Amphitheatre Parkway				
	Google						
				/iew, CA 94043	3		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodule)	(b) Descripti	on			
l <u> </u>	Advertising Expense	of this scriedule)	Ads				
X Political							
Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							

## 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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 6/6 Rpt: 20/24	Williams, Shelby (Mr.)			00088311			
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$900.00	02/19/2024					
7 PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
	Meta		One Hac	kei way			
			Menlo Pa	ark, CA 94025			
8 PURPOSE OF	(a) Category		(b) Descrip	otion			
EXPENDITURE	(See Categories listed at the top Advertising Expense	or this schedule)	Ads				
X Political							
Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Data(s)	Credit Card Issue	r Daid		
PATWENT			(c) Date(s)	Credit Card Issue	i Faiu		
	\$500.00	02/22/2024					
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
			1	phitheatre Parkw	/ay		·
	Google						
				View, CA 94043	3		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	otion			
_	Advertising Expense	or time contouring	Ads				
X Political				_			
Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	name Office	e sougni		Office field		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$239.00	01/26/2024					
	Ψ233.00	01/20/2024					
PAYEE	(a) Payee name	l	(b) Payee	address;	City,	State,	Zip Code
	OT Deinting		100 N. C	entral Expresswa	ay, Suite 514		
	QT Printing						
	(a) Oatawari			on, TX 75080			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip				
X Political	(See Categories listed at the top of this schedule) Advertising Expense Print Services						
Non-Political							
Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	·	e sought	Check ii Austili, 1X,	Office held		
expenditure to benefit C/OH		2	3 -				

## SCHEDULE G

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		xpense Vages/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule G:	2 FILER NAM	E			3	Filer ID (Ethics Commission Filer	rs)	
	Sch: 1/4 Rpt: 21/24	Williams, S	shelby (Mr.)				00088311		
4	Date	5 Payee name	<u>,</u>						
	02/14/2024	Capital On	е						
6	Amount (\$)	7 Payee addre	ess; City; State	e; Zip Co	ode				
	\$179.64	2000 Prest	on Rd						
	Reimbursement from political contributions intended	Plano, TX	75093						
8	PURPOSE	(a) Category (s	See Categories listed at the top of this so	chedule)	(b) Description	Che	eck if travel outside of Texas. Complete Sched	lule T.	
	OF EXPENDITURE	Credit Card	d Payment			_	eck if Austin, TX, officeholder living expense		
					Credit Card Payı	ment			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	Pholder name		Office sought		Office held		
	Date	Payee name	)						
	02/15/2024	FedEx Offi	ce						
	Amount (\$)	Payee addre	Payee address; City; State; Zip Code						
	\$97.41	5000 W Pa	ırk Blvd						
	Reimbursement from political contributions intended	Plano, TX	75093						
	PURPOSE	Category (s	See Categories listed at the top of this so	chedule)	Description	=	eck if travel outside of Texas. Complete Sched	lule T.	
	OF EXPENDITURE	Advertising	Expense		L	Che	eck if Austin, TX, officeholder living expense		
					Print Services				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought		Office held		
	Date	Payee name	?						
	01/31/2024	Google							
	Amount (\$)	Payee addre	ess; City; State	e; Zip Co	ode				
	\$11.54	1600 Ampl	nitheatre Parkway						
	Reimbursement from political contributions intended	Mountain \	/iew, CA 94043						
	PURPOSE	Category (s	See Categories listed at the top of this so	chedule)	Description	_	eck if travel outside of Texas. Complete Sched	lule T.	
	OF EXPENDITURE	Fees			L	Che	eck if Austin, TX, officeholder living expense		
					Email Services				
	Complete ONLY if direct expenditure to benefit C/OH	 Candidate/Office	eholder name		Office sought		Office held		

## SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Advertising Expense Event Expense

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Food/Beverage Expense Polling / - Gift/Awards/Memorials Expense Printing	Overhead/Rental Expense Expense   Expense s/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1	Total pages Schedule G:	2 FILER NAME	3	Filer ID (Ethics Commission Filers)
	Sch: 2/4 Rpt: 22/24	Williams, Shelby (Mr.)		00088311
4	Date	5 Payee name	I .	
	02/01/2024	Google		
6	Amount (\$)	7 Payee address; City; State; Zip (	Code	
	\$11.54	1600 Amphitheatre Parkway		
	Reimbursement from			
	X political contributions intended	Mountain View, CA 94043		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	1()	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Fees	⊔՝	Check if Austin, TX, officeholder living expense
			Email Services	
9	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held
	C/OH			
	Date	Payee name		
	02/01/2024	Google		
	Amount (\$)	Payee address; City; State; Zip (	Code	
	\$287.76	1600 Amphitheatre Parkway		
	Reimbursement from			
	X political contributions intended	Mountain View, CA 94043		
	PURPOSE OF	Category (See Categories listed at the top of this schedule)		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense		Check if Austin, TX, officeholder living expense
			Ads	
	0 1 0 0 1 1 1 1			000
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held
	C/OH			
	Date	Payee name		
	02/17/2024	Google		
	Amount (\$)	Payee address; City; State; Zip 0	Code	
	\$500.00	1600 Amphitheatre Parkway		
	Reimbursement from	·		
	X political contributions intended	Mountain View, CA 94043		
	PURPOSE	Category (See Categories listed at the top of this schedule)		Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Advertising Expense		Check if Austin, TX, officeholder living expense
			Ads	
	Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
	expenditure to benefit	Canadator Cinocholder Hame	Office Sought	Chiec ficia
	C/OH			

#### SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/4 Rpt: 23/24 Williams, Shelby (Mr.) 00088311 Date Payee name 02/22/2024 Google Amount (\$) Payee address; City; State; Zip Code \$500.00 1600 Amphitheatre Parkway Reimbursement from political contributions Х intended Mountain View, CA 94043 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Ads Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/19/2024 Meta Amount (\$) Payee address; City; State; Zip Code \$900.00 One Hacker Way Reimbursement from political contributions Χ Menlo Park, CA 94025 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Ads Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/29/2024 Namebright Payee address; City; State; Zip Code Amount (\$) \$2.95 2635 Walnut Street Reimbursement from Χ political contributions intended Denver, CO 80205 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Web Services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 4/4 Rpt: 24/24 Williams, Shelby (Mr.) 00088311 Date Payee name 02/14/2024 **QT** Printing Amount (\$) Payee address; City; State; Zip Code \$299.00 100 N. Central Expressway, Suite 514 Reimbursement from political contributions Х intended Richardson, TX 75080 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Print Services** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/21/2024 QT Printing Amount (\$) Payee address; City; State; Zip Code \$750.00 100 N. Central Expressway, Suite 514 Reimbursement from political contributions Χ Richardson, TX 75080 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Print Services** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/26/2024 QT Printing Payee address; City; State; Zip Code Amount (\$) \$239.00 100 N. Central Expressway, Suite 514 Reimbursement from Χ political contributions intended Richardson, TX 75080 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Print Services** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH