

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Phelan, Matthew M. (The Honorable) **14 Filer ID** (Ethics Commission Filers)
00062288

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	Texans for Dade
<input checked="" type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
	PO Box 5990
	Austin, TX 78763
	COMMITTEE CAMPAIGN TREASURER NAME
	Scott, William
	COMMITTEE CAMPAIGN TREASURER ADDRESS
	1735 W Cardinal Dr
	Beaumont, TX 77705

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)	\$ 2,064,756.98
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 5,117.35
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,820,595.07
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,746,924.63
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.

The Honorable Matthew M. Phelan

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH
ADDENDUM

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C / OH NAME	Phelan, Matthew M. (The Honorable)	Filer ID	(Ethics Commission Filers)
		00062288	

17 NOTICE FROM POLITICAL COMMITTEE(S)	.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures ..	
	COMMITTEE TYPE	COMMITTEE NAME
	<input checked="" type="checkbox"/> GENERAL	Charter Schools Now PAC
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		3005 S Lamar Blvd Ste. D109 #250 Austin, TX 78704
	COMMITTEE CAMPAIGN TREASURER NAME	Gore, Rex
	COMMITTEE CAMPAIGN TREASURER ADDRESS	1301 W. Oltorf St. Austin, TX 78704

SUBTOTALS - C/OH

18 FILER NAME Phelan, Matthew M. (The Honorable)		19 Filer ID 00062288	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	1,994,696.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	70,060.98
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	3,808,622.55
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	11,972.52
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/55 Rpt: 5/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 512 Strategies LLC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AT&T Texas PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$50,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Kent <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Wilson Elser
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alabama Coushatta Tribe <hr/> Contributor address; City; State; Zip Code Livingston, TX 77351	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alford II, Nathaniel <hr/> Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Herbert Trial Law

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/55 Rpt: 6/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almond, Doug	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Beaumont, TX 77720	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Claire	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Fort Davis, TX 79734	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Patrick	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Beaumont, TX 77706	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00279224</u>) Apache Corp. PAC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Houston, TX 77056	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aransas-Corpus Christi Pilots PAC	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Corpus Christi, TX 78403	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/55 Rpt: 7/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Archer, Stuart <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75033	7 Amount of Contribution (\$) \$3,500.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Oceans Healthcare
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold & Itkin <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$50,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Assoc. of Fire and Casualty Companies of Texas PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00444885</u>) Astellas US LLC Political Action Committee <hr/> Contributor address; City; State; Zip Code Northbrook, IL 60062	Amount of Contribution (\$) \$8,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avera Government Affairs LLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/55 Rpt: 8/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Azadpour, Aram <hr/> 6 Contributor address; City; State; Zip Code Grapevine, TX 76099	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00340075) BASF Corporatlon Employees PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20005	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00035675) BRISTOL-MYERS SQUIBB COMPANY POLITICAL ACTION <hr/> Contributor address; City; State; Zip Code Lawrenceville, NJ 08648	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baytown Fire Fighters Political Action Committee <hr/> Contributor address; City; State; Zip Code Baytown, TX 77522	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beef PAC <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79106	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/55 Rpt: 9/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bentley Public Affairs <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boatright, Micajah <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77339	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Arnold & Itkin
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brasher, Clint <hr/> Contributor address; City; State; Zip Code Vidor, TX 77662	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Brasher Law Firm
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bresnen, Amy <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bristek, Stacey <hr/> Contributor address; City; State; Zip Code Orange, TX 77632	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/55 Rpt: 10/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broussard, Martin E. <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77702	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) LeaseAll/RentAll
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Bradley D. <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Trust Manager		Employer (See Instructions) First Financial Trust
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Lisa <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) None
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Mary Rose <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78257	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Nustar GP, LLC		Employer (See Instructions) Chief Administrative Officer
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Browning, Mark <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Senior Vice President		Employer (See Instructions) Extraco Banks

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/55 Rpt: 11/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, John Rae 6 Contributor address; City; State; Zip Code Tyler, TX 75701	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) Mewbourne Oil Company
Date 02/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bundy, Benning Contributor address; City; State; Zip Code Hemphill, TX 75948	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Michael Contributor address; City; State; Zip Code Aubrey, TX 76227	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) Retired Physician		Employer (See Instructions) Self
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkett, Sheree Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Andrew Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Burns Properties, Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/55 Rpt: 12/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Mitzi <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77706	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Designer		9 Employer (See Instructions) Burns Properties, Inc
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush, Walter <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77708	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/23/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00084871) CELANESE CORPORATION POLITICAL ACTION COMMITTEE <hr/> Contributor address; City; State; Zip Code Irving, TX 75039	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00486050) COTERRA ENERGY INC. POLITICAL ACTION COMMITTEE <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00384818) CVS Health PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20004	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/55 Rpt: 13/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cant, Steve	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Houston, TX 77077-5333		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cant, Steven	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Houston, TX 77077-5333		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capital Leadership Fund	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00829713</u>) Caresource Mission PAC	Amount of Contribution (\$) \$5,500.00
Contributor address; City; State; Zip Code Columbus, OH 43215		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carona, Donnie	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Beaumont, TX 77706		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/55 Rpt: 14/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Dina <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77705	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Scott <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Carr Development, Inc.
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Coby <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chelette, Randy <hr/> Contributor address; City; State; Zip Code Bridge City, TX 77611	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) TX On-Site Wastewater Assc. Inc.
Date 02/07/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00430157) Cheniere Energy, Inc. PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/55 Rpt: 15/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/31/2024	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00035006) Chevron Employees Political Action Committee - Chevron Corporation <hr/> 6 Contributor address; City; State; Zip Code San Ramon, CA 94583	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chisos, Ltd <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choctaw Nation of Oklahoma <hr/> Contributor address; City; State; Zip Code Durant, OK 74702	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christensen, Roland <hr/> Contributor address; City; State; Zip Code Humble, TX 77396	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Arnold & Itkin
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christensen-Woodward, Lori <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) ConocoPhillips

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/55 Rpt: 16/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clayton, Brenda <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Kelly Hart Hallman
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cognizant Management Solutions LLC <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$25,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Masha <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Saltgrass
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Constellation Energy Corporation PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Justin <hr/> Contributor address; City; State; Zip Code Groves, TX 77619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Business Manager		Employer (See Instructions) I.B.E.W. Local Union 479

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/55 Rpt: 17/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crestline Solutions, LLC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cross Oak Group <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crutchfield, Ashley <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) State of Texas
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curbow, Kelly <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVile, Renwick <hr/> Contributor address; City; State; Zip Code Houston, TX 77003	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Public & Gov't Affairs		Employer (See Instructions) Harris, DeVile & Assoc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/55 Rpt: 18/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dishman and Sons Farms LP <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77713	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doornbos, Billy W. <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) C. Doornbos Inc.
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Jeremy <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Reynolds Frizzell LLP
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duggins Wren Mann & Romero LLP <hr/> Contributor address; City; State; Zip Code Austin, TX 78767	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00452755) EDP Renewables North America LLC PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77010	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/55 Rpt: 19/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edson, John <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78752	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Randi <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Randi S Ellis
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erben & Yarbrough <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Escobedo, Mindy <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77642	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farris, Bert <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Archer Systems

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/55 Rpt: 20/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fasken Management LLC <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79707	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Findley, Kyle <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Arnold & Itkin
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foley & Lardner LLP Texas Campaign Fund <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201	Amount of Contribution (\$) \$7,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Perry <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Texas Water Infrastructure Network PAC Treasurer		Employer (See Instructions) TXWIN PAC
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Scott <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) ARCHER Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/55 Rpt: 21/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fregia, David <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77705	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) David Fregia Enterprises
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friends of TSTC (Texas State Technical College) <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friends of UT Southwestern Medical Center - FOMCPAC <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Kelley <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) frostedhomestyle.com
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garland Fire Fighters Community Interest Committee <hr/> Contributor address; City; State; Zip Code Garland, TX 75040	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/55 Rpt: 22/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giblin, Keith <hr/> 6 Contributor address; City; State; Zip Code Port Arthur, TX 77640	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) District Attorney		9 Employer (See Instructions) Jefferson County
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilmore, Peter <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Chris <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77642	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodson, Guy <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) GERMER PLLC
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenberg Traurig, P.A. PAC <hr/> Contributor address; City; State; Zip Code Albany, NY 12207	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/55 Rpt: 23/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gripon, Edward B.	7 Amount of Contribution (\$) \$300.00
	6 Contributor address; City; State; Zip Code Beaumont, TX 77706	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Robert S.	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Beaumont, TX 77706	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00035691) Halliburton Company PAC	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Houston, TX 77032	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hildebrand, Jeffery D.	Amount of Contribution (\$) \$20,000.00
	Contributor address; City; State; Zip Code Houston, TX 77251	
Principal occupation / Job title (See Instructions) Energy and Utilities		Employer (See Instructions) Hilcorp Energy
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffer, Marsha	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/55 Rpt: 24/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Pilots PAC Fund <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20003	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, A. Ryland <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Head of the River Ranch
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Robert M Howard, Inc.
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huntsman LLC PAC <hr/> Contributor address; City; State; Zip Code Spring, TX 77380	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00027342) Intl Brotherhood of Electrical Works PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$4,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/55 Rpt: 25/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Itkin, Cory <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77056	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Arnold & Itkin
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson Walker L.L.P. Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James B. Frank Campaign <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jared Patterson Campaign <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Curt <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/55 Rpt: 26/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jowers, Donald <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77706-6233	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Forge Consulting
Date 02/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kern, Maurie <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimmey, Anthony <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Robert J. <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Good Company Associates
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Wendy <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Vice President, Gulf Coast and Rockies		Employer (See Instructions) ConocoPhillips

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/55 Rpt: 27/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaBove, Tony <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78734	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Partner		9 Employer (See Instructions) Ernst & Young LLP
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee A. Woods PAC (LAW PAC) <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehr, Sally <hr/> Contributor address; City; State; Zip Code Houston, TX 77023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair & Sampson, LLP <hr/> Contributor address; City; State; Zip Code Austin, TX 78760	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd Gosselink Rochelle & Townsend, P.C. <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/55 Rpt: 28/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Locke Lord LLP <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75201	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loewy, Adam <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Law		Employer (See Instructions) Loewy Law Firm
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Roberto <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lubel, Lance <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Lubel Voyles llp
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lumbermen's Association of Texas Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/55 Rpt: 29/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/23/2024	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00306175) Lyondell Chemical Company PAC <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77010	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOAK CASEY PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mace, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Researcher/professor		Employer (See Instructions) Texas State University
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maggio, Marie <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallet, Molly <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77642	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) EVP		Employer (See Instructions) Texas Regional Title

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/55 Rpt: 30/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Don <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77706	7 Amount of Contribution (\$) \$3,000.00
8 Principal occupation / Job title (See Instructions) chairman		9 Employer (See Instructions) Coburn Supply
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Patrick <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Coburn Supply
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Mark <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00040568) Marathon Oil Company Employees Political Action Committee <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Amanda <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Williams Public Affairs

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/55 Rpt: 31/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maynard, Don <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78732	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions) Dell Technologies
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazoch, Chuck <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77713	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Coastal Welding Supply
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCabe, Roger <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) MehaffyWeber
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCabe, Sharon <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDougal & Associates, LLC <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/55 Rpt: 32/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDougal, Brannyn <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77706	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Urban planning consultant		9 Employer (See Instructions) Gray Planning
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGary, Derrick <hr/> Contributor address; City; State; Zip Code Texarkana, TX 75503	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Self Employed
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKeag, Chris <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Military		Employer (See Instructions) US Army
Date 02/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McSpadden, Floyd <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Toomey & Associates <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/55 Rpt: 33/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, John R.	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Houston, TX 77055	
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Houston Radiology Associated
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moorhouse, Mark	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Orono, MN 55356	
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) Dominium
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreland, W. Benjamin	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code Houston, TX 77024	
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Moreland Interests
Date 02/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, William	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77005	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/06/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00366559) NRG Energy Inc. Political Action Committee	Amount of Contribution (\$) \$15,000.00
	Contributor address; City; State; Zip Code Princeton, NJ 08540	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/55 Rpt: 34/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nabers, Mary Scott <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78735	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) President/CEO		9 Employer (See Instructions) Strategic Partnerships, Inc.
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ney, Randolph <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Travel		Employer (See Instructions) Universal Travel
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ng, Sunny <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Qi Austin
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Daniel <hr/> Contributor address; City; State; Zip Code Houston, TX 77041	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) D&N Hangers, Inc.
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Brenda <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/55 Rpt: 35/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Judy <hr/> 6 Contributor address; City; State; Zip Code Nederland, TX 77627	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norton, Jo Betsy <hr/> Contributor address; City; State; Zip Code West Lake Hills, TX 78746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Mutual
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONEOK Inc. Employee Political Action Committee <hr/> Contributor address; City; State; Zip Code Tulsa, OK 74102	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00083857</u>) Occidental Petroleum Corporation PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20006	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ohmstede, Will <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/55 Rpt: 36/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oncor Texas State PAC of Oncor Electric Delivery Administration Corp. <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75202	7 Amount of Contribution (\$) \$25,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrander, Ben <hr/> Contributor address; City; State; Zip Code Austin, TX 78709	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/15/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00025395) PNM Responsible Citizens Group <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87102	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parish, Dale <hr/> Contributor address; City; State; Zip Code Orange, TX 77632	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrish, Colin T. <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Government Affairs Consultant		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/55 Rpt: 37/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paxson, Kurt	7 Amount of Contribution (\$) \$101.00
6 Contributor address; City; State; Zip Code El Paso, TX 79912		
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) Mounce, Green, Myers
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Matthew	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code BOERNE, TX 78015		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Pearson Legal PC
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Penn Entertainment Inc Texas PAC	Amount of Contribution (\$) \$20,000.00
Contributor address; City; State; Zip Code Wyomissing, PA 19610		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Leo	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petersen, Linda	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77019		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/55 Rpt: 38/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petkovsek, Heather <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) Development		9 Employer (See Instructions) Mamma Mijo
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Philp Jr., Roy M. <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Connor <hr/> Contributor address; City; State; Zip Code Addison, TX 75001	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pioneer Natural Resources USA, Inc. Texas PAC <hr/> Contributor address; City; State; Zip Code Irving, TX 75039	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plains All American GP LLC PAC - Texas <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$4,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/55 Rpt: 39/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poinsett PLLC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pope, Robert <hr/> Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RS&H PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Rene <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Self
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rees-Jones, Trevor D. <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Founder & CEO		Employer (See Instructions) Chief Oil & Gas LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/55 Rpt: 40/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Republican State Leadership Committee Grassroots Account <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20004	7 Amount of Contribution (\$) \$750,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riceland Consulting LLC <hr/> Contributor address; City; State; Zip Code Eagle Lake, TX 77434	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritter, Allan <hr/> Contributor address; City; State; Zip Code Nederland, TX 77627	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Ritter Lumber
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson Jr., Corbin <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Quintana Minerals
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robichau, Glenn <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/55 Rpt: 41/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Don <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76137	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Ruthie <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Regina <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Deedie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Cardinal Investment Company, Inc.
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rozell, Scott <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) 240 Tutoring

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/55 Rpt: 42/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan Clay Associates, PLLC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabine Pilots PAC <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77640	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saccardo, Bettie <hr/> Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Educational Diagnostician		Employer (See Instructions) Hill County SSA
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saldana, Amanda <hr/> Contributor address; City; State; Zip Code Pharr, TX 78577	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Saldana Law Firm
Date 02/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saleme, LeRoy <hr/> Contributor address; City; State; Zip Code BEAUMONT TEXAS, TX 77706	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/55 Rpt: 43/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sam Harless Campaign <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77379	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sampson Public Affairs LLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Doris <hr/> Contributor address; City; State; Zip Code Clear lake shores, TX 77565	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schraer, Ronald <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78261	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/15/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00008748) Sempra Energy Employees Political Action Committee - Federal <hr/> Contributor address; City; State; Zip Code San Diego, CA 92101	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/55 Rpt: 44/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Greg <hr/> 6 Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Nathan <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Reynolds Frizzell LLP
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Swift <hr/> Contributor address; City; State; Zip Code Wills Point, TX 75169	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Booking Agent		Employer (See Instructions) Texas Golden Dragon, nc. dba The Sparks Agency
Date 02/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Srinanthakumar, S. (Nat) <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stagner Jr., Hershel <hr/> Contributor address; City; State; Zip Code Orange, TX 77632	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/55 Rpt: 45/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stretcher, Gary <hr/> 6 Contributor address; City; State; Zip Code port neches, TX 77651	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Charles <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Christopher <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UT Austin
Date 02/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sylvester, Pattie <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sylvester, Pattie <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/55 Rpt: 46/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/07/2024	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00361758) T-Mobile US Inc Political Action Committee <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20004	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanner, Louis <hr/> Contributor address; City; State; Zip Code Austin, TX 78744	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/23/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00510016) Targa Resources Corp Federal PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tenaska Employees Texas PAC <hr/> Contributor address; City; State; Zip Code Omaha, NE 68154	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Mark <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/55 Rpt: 47/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans For Responsible Government PAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$25,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Agricultural Cooperative Council PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78664	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Association of Business PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Association of Health Plans PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Association of Nurse Anesthetists Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/55 Rpt: 48/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Association of Property Tax Professionals PAC <hr/> 6 Contributor address; City; State; Zip Code Helotes, TX 78023	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Automobile Dealers Assn. PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$30,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Consumer Finance Association Political Action Committee <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78028	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Dairymen PAC <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Dental Association Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/55 Rpt: 49/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Economic Development PAC	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code Austin, TX 78701		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Farm Bureau AGFUND	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Waco, TX 76702		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas GIN PAC	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code Round Rock, TX 78664		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas House Republican Caucus PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Austin, TX 78711		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas House Republican Caucus PAC	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code Austin, TX 78711		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/55 Rpt: 50/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Leads PAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78767	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Manufactured Housing Assn. Committee For Responsible <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Medical Association PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$30,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Motor Transportation Association TRUCKPAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Oil and Gas Association Good Government Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$15,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/55 Rpt: 51/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Optometric PAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78705	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Oral and Maxillofacial Surgeons PAC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Pharmacy Association PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Pipeline Association PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas REALTORS PAC (TREPAC) <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$25,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/55 Rpt: 52/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Sands PAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$200,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Society Of Anesthesiologists PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$7,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Sport PAC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78217	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas State Teachers Association PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Telephone Association PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$3,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/55 Rpt: 53/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Wildlife Assn. PAC <hr/> 6 Contributor address; City; State; Zip Code Kerrville, TX 78028	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Wine and Grape Growers PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78627	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The American Electric Power - Texas - Committee for Responsible <hr/> Contributor address; City; State; Zip Code Columbus, OH 43215	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Beer Alliance of Texas PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$15,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Posey Law Firm PC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/55 Rpt: 54/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Real Estate Council of Austin, Inc. Good Government PAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Jr., Clifton L. <hr/> Contributor address; City; State; Zip Code Victoria, TX 77902	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) C.L. Thomas, Inc.
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tillman, Lee M. <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) executive		Employer (See Instructions) Marathon Oil Corporation
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Titus, Jean Ann <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom Oliverson Campaign <hr/> Contributor address; City; State; Zip Code Houston, TX 77046	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/55 Rpt: 55/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toomey, Michael	7 Amount of Contribution (\$) \$5,000.00
6 Contributor address; City; State; Zip Code Austin, TX 78731		
8 Principal occupation / Job title (See Instructions) Partner		9 Employer (See Instructions) Mike Toomey & Associates
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Treadwell, O. Pierce	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Houston, TX 77339		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UA Plumbers & Pipefitters Local 286 PAC Fund	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code Austin, TX 78702		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Unified Fire Fighters of The Woodlands	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code The Woodlands, TX 77393		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C0006476) United Parcel Service Inc PAC	Amount of Contribution (\$) \$7,500.00
Contributor address; City; State; Zip Code Atlanta, GA 30328		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/55 Rpt: 56/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) United Supermarkets PAC <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79493	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Jerry <hr/> Contributor address; City; State; Zip Code Austin, TX 78711	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 01/31/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00109546) Valero Energy Corporation PAC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78269	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verizon Communications Inc. Good Government Club - Texas <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00226548) Vistra Employee PAC of Vistra Corp <hr/> Contributor address; City; State; Zip Code Irving, TX 75039	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/55 Rpt: 57/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vitanza, Carl	7 Amount of Contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code Beaumont, TX 77706		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Double E Engineering
Date 02/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waggoner, Ross	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Vidor, TX 77662		
Principal occupation / Job title (See Instructions) pastor		Employer (See Instructions) Diocese of Beaumont
Date 02/07/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00119008) Waste Management Employees Better Government Fund	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Washington, DC 20004		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, James C.	Amount of Contribution (\$) \$15,000.00
Contributor address; City; State; Zip Code San Antonio, TX 78212		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) CW Interests
Date 02/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wessler, Betsy	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Bellingham, WA 98229		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/55 Rpt: 58/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westmoreland, Bradley	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code Austin, TX 78720		
8 Principal occupation / Job title (See Instructions) Sr Manager Gov Affairs		9 Employer (See Instructions) Genentech
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wexler, Noah	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Houston, TX 77005		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Arnold & Itkin
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winegar, Regina	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Beaumont, TX 77706		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womack, Geoffrey	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Porter, TX 77339		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Womack & Associates
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Bruce	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Frisco, TX 75036		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/55 Rpt: 59/139
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Rick <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77024	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/3 Rpt: 60/139	
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/23/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Republicans of Texas Campaign Fund	8 Amount of contribution (\$) \$1,985.51	9 In-kind contribution description Grassroots canvassing
	7 Contributor address; City; State; Zip Code Austin, TX 78701		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charter Schools Now PAC	Amount of contribution (\$) \$6,059.72	In-kind contribution description Digital media buy
	Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charter Schools Now PAC	Amount of contribution (\$) \$4,199.00	In-kind contribution description Campaign mailer expense
	Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/3 Rpt: 61/139	
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/05/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manufacturers PAC of Texas (MPACT)	8 Amount of contribution (\$) \$270.00	9 In-kind contribution description Catering expenses for campaign fundraiser
	7 Contributor address; City; State; Zip Code Austin, TX 78711	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Protect and Serve PAC	Amount of contribution (\$) \$27,246.33	In-kind contribution description Campaign mailer expenses
	Contributor address; City; State; Zip Code Austin, TX 78767	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Protect and Serve PAC	Amount of contribution (\$) \$27,246.33	In-kind contribution description Campaign mailer expenses
	Contributor address; City; State; Zip Code Austin, TX 78767	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 3/3 Rpt: 62/139	
2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/13/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Farm Bureau AGFUND	8 Amount of contribution (\$) \$5.75	9 In-kind contribution description Website endorsement
	7 Contributor address; City; State; Zip Code Waco, TX 76702		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Oil and Gas Association Good Government Committee	Amount of contribution (\$) \$3,023.34	In-kind contribution description Catering expense for campaign fundraiser
	Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas REALTORS PAC (TREPAC)	Amount of contribution (\$) \$25.00	In-kind contribution description Grassroots event promotion
	Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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: 1/67 Rpt: 63/139	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/31/2024	5 Payee name ABC Bank	
6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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: 2/67 Rpt: 64/139	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/31/2024	5 Payee name ABC Bank	
6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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: 3/67 Rpt: 65/139	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/31/2024	5 Payee name ABC Bank	
6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
Complete <u>ONLY</u> 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: 4/67 Rpt: 66/139	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 01/31/2024	5 Payee name ABC Bank
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6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/31/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/31/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 5/67 Rpt: 67/139	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/31/2024	5 Payee name ABC Bank	
6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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: 6/67 Rpt: 68/139	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 01/31/2024	5 Payee name ABC Bank
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6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/31/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/31/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 7/67 Rpt: 69/139	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 01/31/2024	5 Payee name ABC Bank
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6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/02/2024	Payee name ABC Bank
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Amount (\$) \$5.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/02/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 8/67 Rpt: 70/139	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/05/2024	5 Payee name ABC Bank	
6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/05/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/05/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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: 9/67 Rpt: 71/139	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 02/05/2024	5 Payee name ABC Bank
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6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/05/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/05/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 10/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/05/2024	5 Payee name ABC Bank	
6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/05/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/05/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/05/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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: 11/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 02/12/2024	5 Payee name ABC Bank
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6 Amount (\$) \$5.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/12/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/14/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 12/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/16/2024	5 Payee name ABC Bank	
6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/16/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/16/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/16/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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: 13/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 02/16/2024	5 Payee name ABC Bank
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6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/16/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/16/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 14/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 02/16/2024	5 Payee name ABC Bank
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6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/16/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 15/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 02/20/2024	5 Payee name ABC Bank
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6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 16/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 02/20/2024	5 Payee name ABC Bank
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6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 17/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 02/20/2024	5 Payee name ABC Bank
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6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 18/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/20/2024	5 Payee name ABC Bank	
6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/20/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/20/2024	Payee name ABC Bank	
Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
	Complete <u>ONLY</u> 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: 19/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 02/20/2024	5 Payee name ABC Bank
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6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 20/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 02/20/2024	5 Payee name ABC Bank
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6 Amount (\$) \$18.00	7 Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2024	Payee name ABC Bank
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Amount (\$) \$18.00	Payee address; City; State; Zip Code 610 W 5th St Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire Transfer Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/11/2024	Payee name American Bank of Commerce
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Amount (\$) \$16,531.34	Payee address; City; State; Zip Code PO Box 650789 Dallas, TX 75265-0789
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign credit card payment for expenditures reported on F4
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 21/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/30/2024	5 Payee name Anedot	
6 Amount (\$) \$2,889.97	7 Payee address; City; State; Zip Code 1340 Poydras St Ste 1770 New Orleans, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees for processing multiple credit card contributions 1/30/24-2/22/24
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/05/2024	Payee name Angie Chen Button Campaign	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 6914 Clear Springs Cir Garland, TX 75044	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2024	Payee name Barrel Placements	
Amount (\$) \$71,588.00	Payee address; City; State; Zip Code PO Box 811 Alexandria, VA 22313	
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 Political advertising media buy
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: 22/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 01/31/2024	5 Payee name Bergman, Maricruz M
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6 Amount (\$) \$4,280.68	7 Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/15/2024	Payee name Bergman, Maricruz M
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Amount (\$) \$4,280.69	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/31/2024	Payee name Briscoe Cain Campaign
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Amount (\$) \$5,000.00	Payee address; City; State; Zip Code PO Box 7 Deer Park, TX 77536
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 23/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/31/2024	5 Payee name Brown, Autumn	
6 Amount (\$) \$1,690.00	7 Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/15/2024	Payee name Brown, Autumn	
Amount (\$) \$1,690.00	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/15/2024	Payee name Burnham, Brenda	
Amount (\$) \$300.00	Payee address; City; State; Zip Code PO Box 848 Nederland, TX 77627	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Music performer for campaign fundraiser
Complete <u>ONLY</u> 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: 24/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/31/2024	5 Payee name Candy Noble Campaign	
6 Amount (\$) \$20,000.00	7 Payee address; City; State; Zip Code 1105 E Main St #223 Allen, TX 75002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2024	Payee name Candy Noble Campaign	
Amount (\$) \$40,000.00	Payee address; City; State; Zip Code 1105 E. Main St, #233 Allen, TX 75002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Cardwell, Margaret A	
Amount (\$) \$2,710.78	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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: Sch: 25/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Payee name Cardwell, Margaret A	
6 Amount (\$) \$2,710.76	7 Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/15/2024	Payee name Charmichael, Kimberly M	
Amount (\$) \$643.62	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2024	Payee name Cole Hefner Campaign	
Amount (\$) \$30,000.00	Payee address; City; State; Zip Code PO Box 167 Mount Pleasant, TX 75456	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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: 26/67 Rpt:	2	FILER NAME Phelan, Matthew M. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00062288
4	Date 02/05/2024	5	Payee name David Spiller Campaign		
6	Amount (\$) \$5,000.00	7	Payee address; City; State; Zip Code PO Box 447 Jacksboro, TX 76458		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 02/20/2024		Payee name David Spiller Campaign		
	Amount (\$) \$15,000.00		Payee address; City; State; Zip Code PO Box 447 Jacksboro, TX 76458		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 01/31/2024		Payee name DeWayne Burns Campaign		
	Amount (\$) \$40,000.00		Payee address; City; State; Zip Code 703 Stonelake Dr Cleburne, TX 76033		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution		
	Complete <u>ONLY</u> 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: 27/67 Rpt:	2	FILER NAME Phelan, Matthew M. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00062288	
4	Date 02/20/2024	5	Payee name DeWayne Burns Campaign			
6	Amount (\$) \$50,000.00	7	Payee address; City; State; Zip Code 703 Stonelake Dr Cleburne, TX 76033			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
	Date 02/20/2024	Payee name Defend Rural Texas PAC				
	Amount (\$) \$25,000.00	Payee address; City; State; Zip Code 1108 Lavaca St, Ste 110-PMB 310 Austin, TX 78701				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
	Date 02/21/2024	Payee name Deluxe				
	Amount (\$) \$344.74	Payee address; City; State; Zip Code 801 S. Marquette Ave. Minneapolis, MN 55402				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campiagn office supplies			
	Complete <u>ONLY</u> 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: 28/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/05/2024	5 Payee name Drew Darby Campaign	
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code PO Box 3284 San Angelo, TX 76902	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/15/2024	Payee name Dupuis, Andrew	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 2505 15th St Port Neches, TX 77651	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Campaign event security
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Dyer, James P.	
Amount (\$) \$1,154.38	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete <u>ONLY</u> 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: 29/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Payee name Dyer, James P.	
6 Amount (\$) \$1,154.37	7 Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Ernest Bailes Campaign	
Amount (\$) \$25,000.00	Payee address; City; State; Zip Code PO Box 1116 Shepherd, TX 77371	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2024	Payee name Ernest Bailes Campaign	
Amount (\$) \$30,000.00	Payee address; City; State; Zip Code PO Box 1232 Shepherd, TX 77371	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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: 30/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/31/2024	5 Payee name Frederick Frazier Campaign	
6 Amount (\$) \$25,000.00	7 Payee address; City; State; Zip Code 4100 Eldorado Pkwy, Ste 100 PMB 241 McKinney, TX 75070	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/16/2024	Payee name Frederick Frazier Campaign	
Amount (\$) \$60,000.00	Payee address; City; State; Zip Code 321 Bachman Creek Dr McKinney, TX 75072	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Gary VanDeaver Campaign	
Amount (\$) \$40,000.00	Payee address; City; State; Zip Code PO Box 866 New Boston, TX 75570	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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: 31/67 Rpt:	2	FILER NAME Phelan, Matthew M. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00062288
4	Date 02/20/2024	5	Payee name Gary VanDeaver Campaign		
6	Amount (\$) \$10,000.00	7	Payee address; City; State; Zip Code PO Box 886 New Boston, TX 75570		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 01/31/2024		Payee name Glenn Rogers Campaign		
	Amount (\$) \$25,000.00		Payee address; City; State; Zip Code 1832 Grassy Ridge Rd Graford, TX 76449		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 02/20/2024		Payee name Glenn Rogers Campaign		
	Amount (\$) \$50,000.00		Payee address; City; State; Zip Code 1832 Grassy Ridge Graford, TX 76449		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution		
		Complete <u>ONLY</u> 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: 32/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Payee name Golmon, Marlin	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 1839 Llano Port Neches, TX 77651	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Campaign event security
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/07/2024	Payee name Grant Public Strategies	
Amount (\$) \$7,500.00	Payee address; City; State; Zip Code PO Box 152 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Political consulting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Hand, Braden A.	
Amount (\$) \$850.03	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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: 33/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Payee name Hand, Braden A.	
6 Amount (\$) \$850.01	7 Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Jacey Jetton Campaign	
Amount (\$) \$20,000.00	Payee address; City; State; Zip Code 22333 Grand Corner Dr Ste 151 Katy, TX 77494	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/16/2024	Payee name Jacey Jetton Campaign	
Amount (\$) \$35,000.00	Payee address; City; State; Zip Code 2732 Hearthside Ct Richmond, TX 77406	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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: 34/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/05/2024	5 Payee name Jay Dean Campaign	
6 Amount (\$) \$20,000.00	7 Payee address; City; State; Zip Code 3822 Holly Ridge Longview, TX 75605	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Jeff Leach Campaign	
Amount (\$) \$40,000.00	Payee address; City; State; Zip Code PO Box 866186 Plano, TX 75086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2024	Payee name Jeff Leach Campaign	
Amount (\$) \$40,000.00	Payee address; City; State; Zip Code 800 Glen Rose Dr. Allen, TX 75013	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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: 35/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/20/2024	5 Payee name Jill Dutton Campaign	
6 Amount (\$) \$25,000.00	7 Payee address; City; State; Zip Code 411 VZCR 4503 Ben Wheeler, TX 75754	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Justin Holland Campaign	
Amount (\$) \$35,000.00	Payee address; City; State; Zip Code 101 E Rusk St Ste 201 Rockwall, TX 75087	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2024	Payee name Justin Holland Campaign	
Amount (\$) \$67,000.00	Payee address; City; State; Zip Code 3021 Ridge Rd., Ste. A, Box 79 Rockwall, TX 75032	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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: 36/67 Rpt:	2	FILER NAME Phelan, Matthew M. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00062288
4	Date 02/15/2024	5	Payee name KUSA Aviation LLC		
6	Amount (\$) \$7,711.92	7	Payee address; City; State; Zip Code 4700 Hangar Drive, Hangar 5 Beaumont, TX 77705		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pilot services for political fundraising travel		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 02/05/2024		Payee name Ken King Campaign		
	Amount (\$) \$10,000.00		Payee address; City; State; Zip Code PO Box 517 Canadian, TX 79014		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 01/31/2024		Payee name Krona Thimesch Campaign		
	Amount (\$) \$40,000.00		Payee address; City; State; Zip Code 1301 Justin Road, Suite 201-310 Lewisville, TX 75077		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution		
		Complete <u>ONLY</u> 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: 37/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/16/2024	5 Payee name Krona Thimesch Campaign	
6 Amount (\$) \$20,000.00	7 Payee address; City; State; Zip Code 1301 Justin Road, Ste 201-310 Lewisville, TX 75077	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Lacey Hull Campaign	
Amount (\$) \$25,000.00	Payee address; City; State; Zip Code PO Box 19231 Houston, TX 77224	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/16/2024	Payee name Lacey Hull Campaign	
Amount (\$) \$100,000.00	Payee address; City; State; Zip Code PO Box 19231 Houston, TX 77224	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete <u>ONLY</u> 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: 38/67 Rpt:	2	FILER NAME Phelan, Matthew M. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00062288
4	Date 01/31/2024	5	Payee name Lynn Stucky Campaign		
6	Amount (\$) \$25,000.00	7	Payee address; City; State; Zip Code P.O. Box 464 Denton, TX 76202		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 02/16/2024		Payee name Lynn Stucky Campaign		
	Amount (\$) \$70,000.00		Payee address; City; State; Zip Code PO Box 464 Denton, TX 76202		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 02/20/2024		Payee name Mammoth Marketing Group		
	Amount (\$) \$78,575.53		Payee address; City; State; Zip Code 4500 Bissonnet, Suite 370 Bellaire, TX 77401		
	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 Campaign mailer expenses		
		Complete <u>ONLY</u> 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: 39/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/31/2024	5 Payee name Mano DeAyala Campaign	
6 Amount (\$) \$20,000.00	7 Payee address; City; State; Zip Code 9525 Katy Frwy Ste 215B Houston, TX 77024	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2024	Payee name Mano Deayala Campaign	
Amount (\$) \$25,000.00	Payee address; City; State; Zip Code 12335 Kingsride Ln, #416 Houston, TX 77024	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Mano Deayala Campaign	
Amount (\$) \$40,000.00	Payee address; City; State; Zip Code 12335 Kingsride Ln, #416 Houston, TX 77024	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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: 40/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 01/31/2024	5 Payee name Marquez, III, Enrique
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6 Amount (\$) \$837.38	7 Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/15/2024	Payee name Marquez, III, Enrique
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Amount (\$) \$837.37	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/31/2024	Payee name Matt Shaheen Campaign
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Amount (\$) \$30,000.00	Payee address; City; State; Zip Code 3917 Malton Dr Plano, TX 75025
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 41/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/16/2024	5 Payee name Matt Shaheen Campaign	
6 Amount (\$) \$100,000.00	7 Payee address; City; State; Zip Code 3917 Malton Dr Plano, TX 75025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Meisenheimer, Caitlin E	
Amount (\$) \$918.97	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/15/2024	Payee name Meisenheimer, Caitlin E	
Amount (\$) \$918.99	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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: 42/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/26/2024	5 Payee name Michalk, Cole A	
6 Amount (\$) \$270.68	7 Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 01/31/2024	Payee name Michalk, Cole A	
Amount (\$) \$411.75	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/15/2024	Payee name Michalk, Cole A	
Amount (\$) \$411.75	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
	9 Complete <u>ONLY</u> 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: 43/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/31/2024	5 Payee name Mitchell, Kelly M.	
6 Amount (\$) \$257.95	7 Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Mitchell, Kelly M.	
Amount (\$) \$3,445.96	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/15/2024	Payee name Mitchell, Kelly M.	
Amount (\$) \$3,445.96	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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: 44/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/16/2024	5 Payee name Mitchell, Kelly M.	
6 Amount (\$) \$395.30	7 Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Mittnacht, Daniel L	
Amount (\$) \$4,707.88	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/15/2024	Payee name Mittnacht, Daniel L	
Amount (\$) \$166.83	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
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: 45/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 02/15/2024	5 Payee name Mittnacht, Daniel L
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6 Amount (\$) \$4,707.87	7 Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/16/2024	Payee name Mittnacht, Daniel L
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Amount (\$) \$168.17	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff mileage for political meetings
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/07/2024	Payee name Murphy Nasica
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Amount (\$) \$27,246.33	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767
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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 Campaign mailer expenses
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 46/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 02/07/2024	5 Payee name Murphy Nasica
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6 Amount (\$) \$27,246.33	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767
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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 Campaign mailer expenses
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/07/2024	Payee name Murphy Nasica
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Amount (\$) \$27,246.33	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767
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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 Campaign mailer expenses
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/07/2024	Payee name Murphy Nasica
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Amount (\$) \$27,246.33	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767
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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 Campaign mailer expenses
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 47/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/07/2024	5 Payee name Murphy Nasica	
6 Amount (\$) \$1,388.58	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Campaign push cards
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/07/2024	Payee name Murphy Nasica	
Amount (\$) \$20,500.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Grassroots canvassing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/07/2024	Payee name Murphy Nasica	
Amount (\$) \$28,000.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Grassroots canvassing
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: 48/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/07/2024	5 Payee name Murphy Nasica	
6 Amount (\$) \$15,375.00	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Grassroots consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/07/2024	Payee name Murphy Nasica	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Online political advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/07/2024	Payee name Murphy Nasica	
Amount (\$) \$9,728.64	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Political advertising expense - text messages
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: 49/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/07/2024	5 Payee name Murphy Nasica	
6 Amount (\$) \$5,380.00	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Political advertising media buy
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/07/2024	Payee name Murphy Nasica	
Amount (\$) \$20,745.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Political advertising media buy
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/07/2024	Payee name Murphy Nasica	
Amount (\$) \$157,000.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Political advertising media buy
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: 50/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/07/2024	5 Payee name Murphy Nasica	
6 Amount (\$) \$1,004.48	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Political text message advertising expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/21/2024	Payee name Murphy Nasica	
Amount (\$) \$15,565.83	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Campaign mailer expenses
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/21/2024	Payee name Murphy Nasica	
Amount (\$) \$23,101.03	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Campaign mailer expenses
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: 51/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/21/2024	5 Payee name Murphy Nasica	
6 Amount (\$) \$27,246.33	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Campaign mailer expenses
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/21/2024	Payee name Murphy Nasica	
Amount (\$) \$27,246.33	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Campaign mailer expenses
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/21/2024	Payee name Murphy Nasica	
Amount (\$) \$27,246.33	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Campaign mailer expenses
	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: 52/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/21/2024	5 Payee name Murphy Nasica	
6 Amount (\$) \$27,246.33	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Campaign mailer expenses
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/21/2024	Payee name Murphy Nasica	
Amount (\$) \$5,125.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Grassroots canvassing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/21/2024	Payee name Murphy Nasica	
Amount (\$) \$28,000.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Grassroots canvassing
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: 53/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 02/21/2024	5 Payee name Murphy Nasica
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6 Amount (\$) \$6,000.00	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767
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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 Political advertising editing services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/21/2024	Payee name Murphy Nasica
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Amount (\$) \$11,652.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767
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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 Political ad radio buy
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/21/2024	Payee name Murphy Nasica
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Amount (\$) \$17,500.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767
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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 Political advertisement editing and production services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 54/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/21/2024	5 Payee name Murphy Nasica	
6 Amount (\$) \$1,350.00	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Political advertising editing services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/21/2024	Payee name Murphy Nasica	
Amount (\$) \$46,567.03	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Political advertising expense - text messages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/21/2024	Payee name Murphy Nasica	
Amount (\$) \$305,382.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Political advertising media buy
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: 55/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/21/2024	5 Payee name Murphy Nasica	
6 Amount (\$) \$13,750.00	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
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 Political advertising production services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/15/2024	Payee name Nichols, Clint	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 644 Meadow Green Port Neches, TX 77651	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Campaign event security
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/15/2024	Payee name Old Orange Cafe and Catering	
Amount (\$) \$11,731.59	Payee address; City; State; Zip Code 914 Division Ave Orange, TX 77630	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Catering for campaign fundraising event
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: 56/67 Rpt:	2	FILER NAME Phelan, Matthew M. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00062288
4	Date 01/31/2024	5	Payee name Parker, Ridge T		
6	Amount (\$) \$2,626.37	7	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 02/15/2024		Payee name Parker, Ridge T		
	Amount (\$) \$2,626.38		Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 01/31/2024		Payee name Perkins, Lauren K		
	Amount (\$) \$461.75		Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll		
		Complete <u>ONLY</u> 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: 57/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Payee name Perkins, Lauren K	
6 Amount (\$) \$461.75	7 Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2024	Payee name Protect and Serve Texas PAC	
Amount (\$) \$100,000.00	Payee address; City; State; Zip Code 1524 Waltham Ct Arlington, TX 76012	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/23/2024	Payee name Ragnar Research Partners	
Amount (\$) \$323,766.00	Payee address; City; State; Zip Code 103 E St, SE Washington, DC 20003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Polling for house candidates
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: 58/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/15/2024	5 Payee name Red Owl Studios	
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code 271 Middle Creek Dr Buda, TX 78610	
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 Campaign video services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/15/2024	Payee name Reese, Jeremy	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 306 W Pine Shadows Dr Sour Lake, TX 77659	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Campaign event security
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/05/2024	Payee name Reginald Smith Campaign	
Amount (\$) \$20,000.00	Payee address; City; State; Zip Code 300 N Travis St Sherman, TX 75090	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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: 59/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/16/2024	5 Payee name Reginald Smith Campaign	
6 Amount (\$) \$30,000.00	7 Payee address; City; State; Zip Code 300 N Travis St Sherman, TX 75090	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Richmond, Kristine E	
Amount (\$) \$230.88	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/15/2024	Payee name Richmond, Kristine E	
Amount (\$) \$230.87	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
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: 60/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
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4 Date 02/07/2024	5 Payee name Rue's Barbecue
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6 Amount (\$) \$243.56	7 Payee address; City; State; Zip Code 12420 TX-63 W Jasper, TX 75951
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meeting to discuss campaign issues
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/10/2024	Payee name Secure Our Border Now PAC
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Amount (\$) \$477,500.00	Payee address; City; State; Zip Code PO Box 341016 Austin, TX 78734
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/05/2024	Payee name Stan D. Lambert Campaign
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Amount (\$) \$10,000.00	Payee address; City; State; Zip Code PO Box 3752 Abilene, TX 79604
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 61/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/20/2024	5 Payee name Stan D. Lambert Campaign	
6 Amount (\$) \$37,000.00	7 Payee address; City; State; Zip Code PO Box 3752 Abilene, TX 79604	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Stan Gerdes Campaign	
Amount (\$) \$20,000.00	Payee address; City; State; Zip Code PO Box 1060 Smithville, TX 78957	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/16/2024	Payee name Stan Gerdes Campaign	
Amount (\$) \$40,000.00	Payee address; City; State; Zip Code PO Box 1060 Smithville, TX 78957	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
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: 62/67 Rpt:	2	FILER NAME Phelan, Matthew M. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00062288
4	Date 02/05/2024	5	Payee name Stan Kitzman Campaign		
6	Amount (\$) \$10,000.00	7	Payee address; City; State; Zip Code PO Box 553 Pattison, TX 77466		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 02/20/2024		Payee name Stan Kitzman Campaign		
	Amount (\$) \$15,000.00		Payee address; City; State; Zip Code PO Box 553 Pattison, TX 77466		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 02/05/2024		Payee name State Representative John L Kuempel Campaign		
	Amount (\$) \$15,000.00		Payee address; City; State; Zip Code 902 E. College St Seguin, TX 78155		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution		
		Complete <u>ONLY</u> 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: 63/67 Rpt:	2	FILER NAME Phelan, Matthew M. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00062288
4	Date 02/20/2024	5	Payee name State Representative John L Kuempel Campaign		
6	Amount (\$) \$54,000.00	7	Payee address; City; State; Zip Code 902 E. College St Seguin, TX 78155		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 01/31/2024		Payee name Stephanie Klick Campaign		
	Amount (\$) \$25,000.00		Payee address; City; State; Zip Code PO Box 7592 Fort Worth, TX 76111		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 01/31/2024		Payee name Steve Allison Campaign		
	Amount (\$) \$25,000.00		Payee address; City; State; Zip Code 200 Morningside Dr San Antonio, TX 78209		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution		
	Complete <u>ONLY</u> 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: 64/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/20/2024	5 Payee name Steve Allison Campaign	
6 Amount (\$) \$50,000.00	7 Payee address; City; State; Zip Code 200 Morningside Dr San Antonio, TX 78209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2024	Payee name Strategic Media Placement Inc	
Amount (\$) \$20,880.00	Payee address; City; State; Zip Code 7669 Stagers Loop Delaware, OH 43015	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TV political advertising expenses
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/15/2024	Payee name Texas Stage	
Amount (\$) \$3,995.00	Payee address; City; State; Zip Code 615 N Milk Pkwy Beaumont, TX 77701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Stage and sound for campaign fundraiser
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: 65/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 02/07/2024	5 Payee name Texas Stage	
6 Amount (\$) \$2,270.00	7 Payee address; City; State; Zip Code 615 N Mlk Pkwy Beaumont, TX 77701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Stage and sound equipment rental
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name Tractor Supply Co	
Amount (\$) \$229.10	Payee address; City; State; Zip Code 35580 US Hwy 96 South Buna, TX 77612	
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 Campaighn sign supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2024	Payee name United Healthcare	
Amount (\$) \$3,270.85	Payee address; City; State; Zip Code 1250 S Capital of Texas Hwy #1 West Lake, TX 78746	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign healthcare insurance
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: 66/67 Rpt:	2	FILER NAME Phelan, Matthew M. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00062288
4	Date 01/26/2024	5	Payee name United States Treasury		
6	Amount (\$) \$82.89	7	Payee address; City; State; Zip Code Internal Revenue Service Ogden, UT 84201		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 01/31/2024		Payee name United States Treasury		
	Amount (\$) \$8,610.94		Payee address; City; State; Zip Code Internal Revenue Service Ogden, UT 84201		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 02/15/2024		Payee name United States Treasury		
	Amount (\$) \$8,774.80		Payee address; City; State; Zip Code Internal Revenue Service Ogden, UT 84201		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll taxes		
		Complete <u>ONLY</u> 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: 67/67 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 Date 01/31/2024	5 Payee name Watts, Sydney P.	
6 Amount (\$) \$1,151.38	7 Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/15/2024	Payee name Watts, Sydney P.	
Amount (\$) \$1,151.37	Payee address; City; State; Zip Code PO Box 5990 Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/15/2024	Payee name Wiggins, Charlie	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 5595 Hooks Avenue Beaumont, TX 77706	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Campaign event security
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/10 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 CREDIT CARD ISSUER	Name of financial institution American Bank of Commerce	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,771.14
6 PAYMENT	(a) Amount Charged \$134.12	(b) Date of Charge 02/16/2024
7 PAYEE	(a) Payee name Homewood Suites	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description Lodging for staff while traveling for political event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
PAYMENT	(a) Amount Charged \$280.46	(b) Date of Charge 02/21/2024
PAYEE	(a) Payee name HEB #425	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Payee address; City, State, Zip Code 1000 E 41 St Austin, TX 78751
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
PAYMENT	(a) Amount Charged \$342.95	(b) Date of Charge 02/18/2024
PAYEE	(a) Payee name Floyd's	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Payee address; City, State, Zip Code 2290 I-10 S Beaumont, TX 77707
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 2/10 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,771.14
6 PAYMENT	(a) Amount Charged \$134.12	(b) Date of Charge 02/16/2024	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Homewood Suites		(b) Payee address; City, State, Zip Code 3745 I-10 Access Rd Beaumont, TX 77705
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Lodging for staff while traveling for political event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$134.12	(b) Date of Charge 02/16/2024	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Homewood Suites		(b) Payee address; City, State, Zip Code 3745 I-10 Access Rd Beaumont, TX 77705
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Lodging for staff while traveling for political event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$155.12	(b) Date of Charge 02/16/2024	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Homewood Suites		(b) Payee address; City, State, Zip Code 3745 I-10 Access Rd Beaumont, TX 77705
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Lodging for staff while traveling for political event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 3/10 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 CREDIT CARD ISSUER	Name of financial institution see previous	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,771.14
6 PAYMENT	(a) Amount Charged \$140.85	(b) Date of Charge 02/16/2024
7 PAYEE	(a) Payee name Homewood Suites	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description Lodging for staff while traveling for political event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
6 PAYMENT	(a) Amount Charged \$159.51	(b) Date of Charge 02/16/2024
7 PAYEE	(a) Payee name Homewood Suites	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description Lodging for staff while traveling for political event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
6 PAYMENT	(a) Amount Charged \$134.12	(b) Date of Charge 02/15/2024
7 PAYEE	(a) Payee name Homewood Suites	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description Lodging for staff while traveling for political event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 4/10 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 CREDIT CARD ISSUER	Name of financial institution see previous	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,771.14
6 PAYMENT	(a) Amount Charged \$136.85	(b) Date of Charge 02/15/2024
7 PAYEE	(a) Payee name Homewood Suites	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description Lodging for staff while traveling for political event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
6 PAYMENT	(a) Amount Charged \$134.12	(b) Date of Charge 02/15/2024
7 PAYEE	(a) Payee name Homewood Suites	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description Lodging for staff while traveling for political event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
6 PAYMENT	(a) Amount Charged \$167.75	(b) Date of Charge 02/15/2024
7 PAYEE	(a) Payee name Homewood Suites	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description Lodging for staff while traveling for political event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 5/10 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 CREDIT CARD ISSUER	Name of financial institution see previous	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,771.14
6 PAYMENT	(a) Amount Charged \$79.78	(b) Date of Charge 02/13/2024
7 PAYEE	(a) Payee name HEB #425	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Provisions for legislative office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
PAYMENT	(a) Amount Charged \$259.79	(b) Date of Charge 02/12/2024
PAYEE	(a) Payee name Office Depot	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Payee address; City, State, Zip Code 1000 E 41 St Austin, TX 78751
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
PAYMENT	(a) Amount Charged \$463.50	(b) Date of Charge 02/12/2024
PAYEE	(a) Payee name Special Occasions Photo Booth	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Payee address; City, State, Zip Code 5650 Nicole Ln Beaumont, TX 77713
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 6/10 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 CREDIT CARD ISSUER	Name of financial institution see previous	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,771.14
6 PAYMENT	(a) Amount Charged \$39.91	(b) Date of Charge 02/11/2024
7 PAYEE	(a) Payee name HEB #425	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Provisions for legislative office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
PAYMENT	(a) Amount Charged \$302.07	(b) Date of Charge 02/11/2024
PAYEE	(a) Payee name Spectrum	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Payee address; City, State, Zip Code 1000 E 41 St Austin, TX 78751
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
PAYMENT	(a) Amount Charged \$66.86	(b) Date of Charge 02/04/2024
PAYEE	(a) Payee name AT&T Hotel and Conference	(c) Date(s) Credit Card Issuer Paid 02/11/2024
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Payee address; City, State, Zip Code 1900 University Ave Austin, TX 78705
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 7/10 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,771.14
6 PAYMENT	(a) Amount Charged \$466.98	(b) Date of Charge 02/04/2024	(c) Date(s) Credit Card Issuer Paid 02/12/2024
7 PAYEE	(a) Payee name AT&T Hotel and Conference		(b) Payee address; City, State, Zip Code 1900 University Ave Austin, TX 78705
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Lodging for legislative member attending political event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$902.46	(b) Date of Charge 02/02/2024	(c) Date(s) Credit Card Issuer Paid 02/13/2024
PAYEE	(a) Payee name Hilton Houston		(b) Payee address; City, State, Zip Code 2001 Post Oak Blvd Houston, TX 77056
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Lodging for campaign staff while traveling for political event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$675.70	(b) Date of Charge 02/02/2024	(c) Date(s) Credit Card Issuer Paid 02/14/2024
PAYEE	(a) Payee name Hilton Houston		(b) Payee address; City, State, Zip Code 2001 Post Oak Blvd Houston, TX 77056
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Lodging for campaign staff while traveling for political event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 8/10 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062288
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,771.14
6 PAYMENT	(a) Amount Charged \$374.15	(b) Date of Charge 02/02/2024	(c) Date(s) Credit Card Issuer Paid 02/15/2024
7 PAYEE	(a) Payee name Hilton Houston	(b) Payee address; City, State, Zip Code 2001 Post Oak Blvd Houston, TX 77056	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Lodging to attend political event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$26.30	(b) Date of Charge 02/01/2024	(c) Date(s) Credit Card Issuer Paid 02/16/2024
PAYEE	(a) Payee name HEB #425	(b) Payee address; City, State, Zip Code 1000 E 41 St Austin, TX 78751	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Provisions for legislative office
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT	(a) Amount Charged \$234.02	(b) Date of Charge 02/01/2024	(c) Date(s) Credit Card Issuer Paid 02/17/2024
PAYEE	(a) Payee name HEB #425	(b) Payee address; City, State, Zip Code 1000 E 41 St Austin, TX 78751	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Provisions for legislative office
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 9/10 Rpt:	2 FILER NAME Phelan, Matthew M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062288
4 CREDIT CARD ISSUER	Name of financial institution see previous	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,771.14
6 PAYMENT	(a) Amount Charged \$389.57	(b) Date of Charge 01/31/2024
7 PAYEE	(a) Payee name Adobe Inc	(c) Date(s) Credit Card Issuer Paid 02/18/2024
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Software subscription for campaign use
9 Complete ONLY if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
6 PAYMENT	(a) Amount Charged \$215.26	(b) Date of Charge 01/31/2024
7 PAYEE	(a) Payee name HEB #425	(c) Date(s) Credit Card Issuer Paid 02/19/2024
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Provisions for legislative office
9 Complete ONLY if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
6 PAYMENT	(a) Amount Charged \$281.45	(b) Date of Charge 01/28/2024
7 PAYEE	(a) Payee name Triangle Blueprint Co	(c) Date(s) Credit Card Issuer Paid 02/20/2024
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Printed decals and stickers for campaign use
9 Complete ONLY if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 10/10 Rpt:	2	FILER NAME Phelan, Matthew M. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00062288
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 2,771.14
6	PAYMENT	(a) Amount Charged \$1,206.88	(b) Date of Charge 01/28/2024	(c) Date(s) Credit Card Issuer Paid 02/21/2024	
7	PAYEE	(a) Payee name Triangle Blueprint Co		(b) Payee address; City, State, Zip Code 1123 Calder Ave Beaumont, TX 77701	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Printed decals for campaign use	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$919.05	(b) Date of Charge 01/28/2024	(c) Date(s) Credit Card Issuer Paid 02/22/2024		
PAYEE	(a) Payee name Triangle Blueprint Co		(b) Payee address; City, State, Zip Code 1123 Calder Ave Beaumont, TX 77701		
PURPOSE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Printed materials for campaign use	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
PAYMENT	(a) Amount Charged \$243.56	(b) Date of Charge 01/28/2024	(c) Date(s) Credit Card Issuer Paid 02/23/2024		
PAYEE	(a) Payee name Triangle Blueprint Co		(b) Payee address; City, State, Zip Code 1123 Calder Ave Beaumont, TX 77701		
PURPOSE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign sign holders	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	