

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM JCOR-C/OH

1 Filer ID (Ethics Commission Filers) 00088227		2 Total pages filed: 27		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Lee	MI MI	ELECTRONICALLY FILED 02/27/2024	
	NICKNAME	LAST Finley	SUFFIX		
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)		
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded modified reporting limit _____			
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report (Attach C/OH-FR)			
5 ORIGINAL PERIOD COVERED		Month Day Year 01/26/2024	THROUGH	Month Day Year 02/24/2024	

6 EXPLANATION OF CORRECTION

Amended report to Correct Contribution and Expense information that was incomplete, including street addresses, etc. for Adobe, Amazon, and Uber, occupations for donors, Zip Codes, incurred unpaid but expenses, Anedot information, Bank information & fees, Uber, etc. I would like to request a waiver or reduction of a late-filing penalty, if any, in connection with this correction. The correction was filed less than 3 hours after the original report, in order to ensure full compliance with the reporting requirements. Information related to Anedot & from the Campaign Bank Account was offline or inaccessible for a period of time when the report was being prepared, possibly due to an AT&T services outage.

7 AFFIDAVIT

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

Check the box next to any and all applicable statements:

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

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

Mr. Lee Finley

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

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

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00088227	2 Total pages filed: 27	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Lee	MI MI	OFFICE USE ONLY
	NICKNAME	LAST Finley	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE			Date Hand-delivered or Date Postmarked
	REDACTED PER 254.0313, GOV'T CODE			Receipt # _____ Amount _____
				Date Processed _____
				Date Imaged _____
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Lee	MI MI	
	NICKNAME	LAST Finley	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE			
	REDACTED PER 254.0313, GOV'T CODE			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(972)	836-9277		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year	
	01/26/2024		02/24/2024	
10 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month Day Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other
	03/05/2024	<input type="checkbox"/> General	<input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)	
			Court Of Criminal Appeals, Judge	

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

3 of 27

13 C / OH NAME Finley, Lee (Mr.) **14** Filer ID (Ethics Commission Filers)
00088227

15 NOTICE FROM POLITICAL COMMITTEE(S)
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *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.

Additional Pages

COMMITTEE TYPE	COMMITTEE NAME
<input checked="" type="checkbox"/> GENERAL	Texans for Responsible Judges
<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
	14425 Falcon Head Blvd., Bldg E-100
	Austin, TX 78738
	COMMITTEE CAMPAIGN TREASURER NAME
	Hobbs, Cabell
	COMMITTEE CAMPAIGN TREASURER ADDRESS
	PO Box 341027
	Austin, TX 78734

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)	\$	15,286.92
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	110,031.99
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	22,500.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	90,000.00

17 AFFIDAVIT

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

Mr. Lee Finley

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - JC/OH

18 FILER NAME Finley, Lee (Mr.)		19 Filer ID 00088227	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	15,097.96
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	188.96
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	105,811.26
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	2,878.30
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	1,342.43
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/6 Rpt: 5/27
2 FILER NAME Finley, Lee (Mr.)		3 Filer ID (Ethics Commission Filers) 00088227
4 Date 01/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albers, John <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75069	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Unknown		9 Contributor's Job Title Unknown
10 Contributor's employer/law firm Unknown		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ali, Mirza <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Unknown		Contributor's Job Title Unknown
Contributor's employer/law firm Unknown		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouma, Melissa <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Dental Hygienist		Contributor's Job Title Dental Hygienist
Contributor's employer/law firm Unknown		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/6 Rpt: 6/27
2 FILER NAME Finley, Lee (Mr.)		3 Filer ID (Ethics Commission Filers) 00088227
4 Date 02/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandon, Collins	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Houston, TX 77024	
8 Contributor's Principal Occupation Unknown		9 Contributor's Job Title Unknown
10 Contributor's employer/law firm Unknown		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brenner, Jeff	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78727	
Contributor's Principal Occupation Unknown		Contributor's Job Title Unknown
Contributor's employer/law firm Unknown		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denton County Conservative Coalition	Amount of Contribution (\$) \$186.96
	Contributor address; City; State; Zip Code Flower Mound, TX 75028	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/6 Rpt: 7/27
2 FILER NAME Finley, Lee (Mr.)		3 Filer ID (Ethics Commission Filers) 00088227
4 Date 02/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, Alfred <hr/> 6 Contributor address; City; State; Zip Code Ft. Worth, TX 76107	7 Amount of Contribution (\$) \$2,500.00
8 Contributor's Principal Occupation Businessman		9 Contributor's Job Title Businessman
10 Contributor's employer/law firm Unknown		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Robert <hr/> Contributor address; City; State; Zip Code Ft. Worth, TX 76107	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Unknown		Contributor's Job Title Unknown
Contributor's employer/law firm Unknown		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Bryan <hr/> Contributor address; City; State; Zip Code Vadnais Heights, MT 55127	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Unknown		Contributor's Job Title Unknown
Contributor's employer/law firm Unknown		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/6 Rpt: 8/27
2 FILER NAME Finley, Lee (Mr.)		3 Filer ID (Ethics Commission Filers) 00088227
4 Date 02/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccutchin, Ben <hr/> 6 Contributor address; City; State; Zip Code Addison, TX 75001	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Unknown		9 Contributor's Job Title Unknown
10 Contributor's employer/law firm Unknown		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mora, Sebastian <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78257	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Unknown		Contributor's Job Title Unknown
Contributor's employer/law firm Unknown		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peck, Vera <hr/> Contributor address; City; State; Zip Code Dallas, TX 75255	Amount of Contribution (\$) \$5,000.00
Contributor's Principal Occupation unknown		Contributor's Job Title unknown
Contributor's employer/law firm unknwon		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/6 Rpt: 9/27
2 FILER NAME Finley, Lee (Mr.)		3 Filer ID (Ethics Commission Filers) 00088227
4 Date 02/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peck Jr., John <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75225	7 Amount of Contribution (\$) \$5,000.00
8 Contributor's Principal Occupation Unknown		9 Contributor's Job Title Unknown
10 Contributor's employer/law firm Unknown		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ragon, Keith <hr/> Contributor address; City; State; Zip Code Perry, MO 63462	Amount of Contribution (\$) \$11.00
Contributor's Principal Occupation Unknown		Contributor's Job Title Unknown
Contributor's employer/law firm Unknown		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddill, David <hr/> Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation County Employee		Contributor's Job Title County Employee
Contributor's employer/law firm Collin County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/6 Rpt: 10/27
2 FILER NAME Finley, Lee (Mr.)		3 Filer ID (Ethics Commission Filers) 00088227
4 Date 02/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jerry <hr/> 6 Contributor address; City; State; Zip Code Ellsworth, IL 61737	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Unknown		9 Contributor's Job Title Unknown
10 Contributor's employer/law firm Unknown		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 11/27	
2 FILER NAME Finley, Lee (Mr.)		3 Filer ID (Ethics Commission Filers) 00088227	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/10/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denton County Conservative Coalition <hr/> 7 Contributor address; City; State; Zip Code Flower Mound, TX 75028	8 Amount of contribution (\$) \$188.96	9 In-kind contribution description Voter Pushcards
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)			

Check if travel outside of Texas. Complete Schedule T.

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: 1/4 Rpt: 12/27	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
4 Date 02/09/2024	5 Payee name 1-Vision	
6 Amount (\$) \$2,287.87	7 Payee address; City; State; Zip Code 9346 Telge Road Houston, TX 77095	
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 Push cards
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/21/2024	Payee name A4 MEDIA	
Amount (\$) \$50,000.00	Payee address; City; State; Zip Code 201 Quality Circle College Station, TX 77845	
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 OTT video programming
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/01/2024	Payee name Bank of America	
Amount (\$) \$16.00	Payee address; City; State; Zip Code 100 North Tryon Street Charlotte, NC 28255	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly 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: 2/4 Rpt: 13/27	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
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4 Date 02/20/2024	5 Payee name Brixius Media
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6 Amount (\$) \$25,000.00	7 Payee address; City; State; Zip Code 2340 E. Trinity Mills Rd. Suite 300 Carrollton, TX 75006
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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 YouTube Commercial Run
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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 02/06/2024	Payee name Collin County Republican Party
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Amount (\$) \$300.00	Payee address; City; State; Zip Code 2963 W 15th St Suite 2981 Plano, TX 75075
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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 Lincoln Dinner Slide
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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 02/06/2024	Payee name Collin County Republican Party
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Amount (\$) \$300.00	Payee address; City; State; Zip Code 2963 W 15th St Suite 2981 Plano, TX 75075
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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 Lincoln Dinner Table
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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: 3/4 Rpt: 14/27	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
4 Date 02/06/2024	5 Payee name Collin County Republican Party	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 2963 W 15th St Suite 2981 Plano, TX 75075	
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 Lincoln Dinner VIP Ticket
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/17/2024	Payee name Denton County Republican Party	
Amount (\$) \$900.00	Payee address; City; State; Zip Code 2921 Country Club Rd #102 Denton, TX 76210	
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 Lincoln Dinner Table/Slide
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/21/2024	Payee name Texas Conservative Review	
Amount (\$) \$6,666.67	Payee address; City; State; Zip Code 1533 W. Alabama Houston, TX 77006	
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 1/3 Page Ad-Galveston & Montgomery County editions
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: 4/4 Rpt: 15/27	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
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4 Date 02/12/2024	5 Payee name The Whatâs UP Radio Program
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6 Amount (\$) \$20,000.00	7 Payee address; City; State; Zip Code 18715 Tamer View Court Tomball, TX 77377
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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 Print Advertising
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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 02/09/2024	Payee name Twitter
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Amount (\$) \$90.72	Payee address; City; State; Zip Code 1355 Market Street San Francisco, CA 94103
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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 Online voter outreach
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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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UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

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 F2: Sch: 1/2 Rpt: 16/27	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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5 Date 02/05/2024	6 Payee name 1-Vision
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7 Amount (\$) \$355.00	8 Payee address; City; State; Zip Code 9346 Telge Road Houston, TX 77095
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 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 Printed Campaign Material
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/06/2024	Payee name Dukate, Jean
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Amount (\$) \$60.00	Payee address; City; State; Zip Code 8414 Maine Austin, TX 78758
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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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 Website media creation
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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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UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

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 F2: Sch: 2/2 Rpt: 17/27	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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5 Date 02/18/2024	6 Payee name Loan Star Directions
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7 Amount (\$) \$2,463.30	8 Payee address; City; State; Zip Code 403 Dawson San Antonio, TX 78213
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 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 Video Creation
----------------------------------	--	--

11 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 PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/9 Rpt: 18/27	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
4 Date 02/05/2024	5 Payee name 7 Eleven	
6 Amount (\$) \$60.27 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 225 W 1st St Claude, TX 79019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In 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 Gas
	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 Academy Sports	
Amount (\$) \$162.35 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3305 Dallas Pkwy Plano, TX 75093	
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Polling Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poll Greeting Supplies
	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 Adobe Software	
Amount (\$) \$14.06 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 345 Park Avenue San Jose, TX 95110	
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software for campaign
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/9 Rpt: 19/27	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
4 Date 01/26/2024	5 Payee name Adobe	
6 Amount (\$) \$21.64 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 345 Park Avenue San Jose , CA 95110	
8 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 Software
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/01/2024	Payee name Alsup's	
Amount (\$) \$57.95 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 225 W 1st St CLAUDE, TX 79019	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas
	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 Amazon	
Amount (\$) \$55.17 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 440 Terry Ave N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Table cloths
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 3/9 Rpt: 20/27	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
4 Date 02/16/2024	5 Payee name Amazon	
6 Amount (\$) \$38.23 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 440 Terry Ave N Seattle, TX 98109	
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 Candy for Lincoln Dinner
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/16/2024	Payee name Amazon	
Amount (\$) \$46.54 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 440 Terry Ave N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flags for Lincoln Dinner
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/16/2024	Payee name Amazon	
Amount (\$) \$19.47 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 440 Terry Ave N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flag for Lincoln Dinner
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 4/9 Rpt: 21/27	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
4 Date 02/14/2024	5 Payee name Amazon	
6 Amount (\$) \$37.86 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 440 Terry Ave N Seattle, WA 98109	
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 Items for Campaign and Lincoln Dinner Table
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/02/2024	Payee name GPI EXPRESSWAY SERVICE	
Amount (\$) \$42.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 602 US-287 Electra, TX 76360	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/01/2024	Payee name SUNSET GAS & G	
Amount (\$) \$64.45 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 101 S Council Dr. Sunset, TX 76270	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 5/9 Rpt: 22/27	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
4 Date 02/23/2024	5 Payee name Southwest Airlines	
6 Amount (\$) \$267.97 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 2702 Love Field Dr Dallas, TX 75235	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In 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 Airfare for Campaign event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2024	Payee name UNCLE JULIO'S	
Amount (\$) \$74.73 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 190 East Stacy Road Bldg 3400 Allen, TX 75002	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/13/2024	Payee name Uber	
Amount (\$) \$44.96 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1725 3rd Street San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 6/9 Rpt: 23/27	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
4 Date 02/12/2024	5 Payee name Uber	
6 Amount (\$) \$32.95 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1725 3rd Street San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In 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 event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2024	Payee name Uber	
Amount (\$) \$30.98 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1725 3rd Street San Francisco, TX 94158	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2024	Payee name Uber	
Amount (\$) \$25.99 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1725 3rd Street San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Travel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 7/9 Rpt: 24/27	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
4 Date 02/13/2024	5 Payee name Uber	
6 Amount (\$) \$48.95 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1725 3rd Street San Francisco, WA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In 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 Event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/23/2024	Payee name Uber	
Amount (\$) \$45.82 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1725 3rd Street Sand Francisco, CA 94158	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Uber Campaign Event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2024	Payee name Uber	
Amount (\$) \$32.84 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1725 3rd Street San Francisco, TX 94158	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 8/9 Rpt: 25/27	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
4 Date 02/05/2024	5 Payee name Uber	
6 Amount (\$) \$24.96 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1725 3rd Street San Francisco, TX 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In 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 event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/05/2024	Payee name Uber	
Amount (\$) \$29.97 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1725 3rd Street San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/05/2024	Payee name Uber	
Amount (\$) \$25.92 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1725 3rd Street San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 9/9 Rpt: 26/27	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
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4 Date 02/05/2024	5 Payee name Uber
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6 Amount (\$) \$21.46 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1725 3rd Street San Francisco, CA 94158
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In 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 event
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/08/2024	Payee name Uber
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Amount (\$) \$14.89 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1725 3rd Street San Francisco, CA 94158
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	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
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L:
Sch: 1/1 Rpt: 27/27

2 FILER NAME
Finley, Lee (Mr.)

3 Filer ID (Ethics Commission Filers)
00088227

LENDER
INFORMATION

4 Name of lender
Finley, Lee (Mr.)

5 Lender address; City; State; Zip Code

Richardson, TX 75082-3102

GUARANTOR
INFORMATION

6 Name of guarantor

not applicable

7 Guarantor address; City; State; Zip Code

LENDER
INFORMATION

Name of lender
Finley, Lee (Mr.)

Lender address; City; State; Zip Code

Richardson, TX 75082-3102

GUARANTOR
INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code