

# MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC  
COVER SHEET PG 1

<b>The MPAC Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00088032	<b>2</b> Total pages filed: 124
<b>3</b> COMMITTEE NAME AFC Victory Fund		<b>OFFICE USE ONLY</b>	
		Date Received <b>ELECTRONICALLY FILED</b> 03/05/2024	
<b>4</b> COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 228 S. Washington St. Ste. 115 Alexandria, VA 22314		Date Hand-delivered or Date Postmarked
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
		Lisa	
	NICKNAME	LAST	SUFFIX
		Lisker	
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 228 S. Washington St. Ste. 115 Alexandria, VA 22314		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 228 S. Washington St. Ste. 115 Alexandria, VA 22314		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
		(703) 281-7540	
<b>9</b> REPORT TYPE	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)		
<b>10</b> MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input checked="" type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5		
<b>11</b> PERIOD COVERED	Month    Day    Year 01/26/2024		THROUGH    Month    Day    Year 02/25/2024

**GO TO PAGE 2**

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> AFC Victory Fund	<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
--	---

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Ellen Troxclair State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,483,136.12
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 3,700,862.39
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 5,810,986.84
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 48,242.59

**16 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.

Lisa Lisker  
\_\_\_\_\_  
Signature of Campaign Treasurer

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

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

Page 3 of 124

<b>12 COMMITTEE NAME</b> AFC Victory Fund	<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
--	---

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Jacey Jetton State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Candy Noble State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Lynn Stucky State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

Page 4 of 124

<b>12 COMMITTEE NAME</b> AFC Victory Fund	<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
--	---

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Stephanie Klick State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Alex Kamkar State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Kronda Thimesch State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

Page 5 of 124

<b>12 COMMITTEE NAME</b> AFC Victory Fund	<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
--	---

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Alan Schoolcraft State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Chris Spencer State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Helen Kerwin State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

Page 6 of 124

<b>12 COMMITTEE NAME</b> AFC Victory Fund		<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Hillary Hickland State Representative  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Janis Holt State Representative  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Joanne Shofner State Representative  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

Page 7 of 124

<b>12 COMMITTEE NAME</b> AFC Victory Fund	<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
--	---

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Katrina Pierson State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
		B. Opposed

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Liz Case Pickens State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
		B. Opposed

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Marc LaHood State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
		B. Opposed

# MONTHLY FILING GPAC REPORT: PURPOSE

<b>12 COMMITTEE NAME</b> AFC Victory Fund	<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
--	---

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Mike Olcott State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Shelley Luther State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Stormy Bradley State Representative
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	



# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

Page 9 of 124

<b>12 COMMITTEE NAME</b> AFC Victory Fund	<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
--	---

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed Gary VanDeaver State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed Travis Clardy State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed Ernest Bailes State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

Page 10 of 124

<b>12 COMMITTEE NAME</b> AFC Victory Fund	<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
--	---

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed    Justin Holland    State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed    John Kuempel    State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed    Hugh Shine    State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

Page 11 of 124

<b>12 COMMITTEE NAME</b> AFC Victory Fund		<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed DeWayne Burns State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
	<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)
B. Opposed Glenn Rogers State Representative		
<b>2. Measures</b> (Describe by date and location of election and nature of issue.)		A. Supported
		B. Opposed
<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)		
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)		<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)
	B. Opposed Reggie Smith State Representative	
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

Page 12 of 124

<b>12 COMMITTEE NAME</b> AFC Victory Fund		<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported  B. Opposed Stan Lambert State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported  B. Opposed Drew Darby State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported  B. Opposed Steve Allison State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

Page 13 of 124

<b>12 COMMITTEE NAME</b> AFC Victory Fund		<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed Charlie Geren State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# SUBTOTALS - MPAC

<b>17 COMMITTEE NAME</b> AFC Victory Fund		<b>18 Filer ID</b> (Ethics Commission Filers) 00088032
<b>19 SCHEDULE SUBTOTALS</b>		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,293,000.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 150,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 40,136.12
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 3,652,619.80
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 48,242.59
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/3 Rpt: 15/124
<b>2</b> FILER NAME AFC Victory Fund		<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Angelo Jr., Ernest <hr/> <b>6</b> Contributor address; City; State; Zip Code  Midland, TX 79701	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Petroleum Engineer		<b>9</b> Employer (See Instructions) Self
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brigham, Ben <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746	Amount of Contribution (\$)  \$25,000.00
Principal occupation / Job title (See Instructions) Anthem Ventures		Employer (See Instructions) Chairman
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Dale <hr/> Contributor address; City; State; Zip Code  Midland, TX 79704	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Business Manager		Employer (See Instructions) Moriah Group
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cranberg, Alex <hr/> Contributor address; City; State; Zip Code  Ponte Vedra, FL 32082	Amount of Contribution (\$)  \$125,000.00
Principal occupation / Job title (See Instructions) Businessman		Employer (See Instructions) Aspect Mgt Corp
Date 02/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davis, Ross <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024	Amount of Contribution (\$)  \$3,000.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/3 Rpt: 16/124
<b>2</b> FILER NAME AFC Victory Fund		<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Head, Vim <hr/> <b>6</b> Contributor address; City; State; Zip Code  Katy, TX 77493	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hendrickson, Brett <hr/> Contributor address; City; State; Zip Code  Southlake, TX 76092	Amount of Contribution (\$)  \$250,000.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hock, Stacy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746	Amount of Contribution (\$)  \$200,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lamy, Jay <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Aquila Commercial
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ricketts, J. Peter <hr/> Contributor address; City; State; Zip Code  Omaha, NE 68132	Amount of Contribution (\$)  \$100,000.00
Principal occupation / Job title (See Instructions) US Senator		Employer (See Instructions) US Government



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/3 Rpt: 17/124
<b>2</b> FILER NAME AFC Victory Fund		<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rydin, Michael <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77081	<b>7</b> Amount of Contribution (\$)  \$10,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Winn, Stephen <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75219	Amount of Contribution (\$)  \$50,000.00
Principal occupation / Job title (See Instructions) Mirasol Capital LLC		Employer (See Instructions) Chairman
Date 02/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yass, Jeff <hr/> Contributor address; City; State; Zip Code  Bala Cynwyd, PA 19004	Amount of Contribution (\$)  \$3,000,000.00
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instructions) SIG
Date 02/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yass, Jeff <hr/> Contributor address; City; State; Zip Code  Bala Cynwyd, PA 19004	Amount of Contribution (\$)  \$500,000.00
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instructions) SIG

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule C1: Sch: 1/1 Rpt: 18/124
<b>2</b> FILER NAME AFC Victory Fund		<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/09/2024	<b>5</b> Corporation / Labor Organization name Ardleigh Impact Corp	<b>7</b> Amount of contribution (\$) \$150,000.00
	<b>6</b> Corporation / Labor Organization address; City; State; Zip Code  Springfield, VA 22153	

# NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule C2: Sch: 1/1 Rpt: 19/124	
<b>2</b> FILER NAME AFC Victory Fund		<b>3</b> Filer ID (Ethics Commission Filers) 00088032	
<b>4</b> Date 02/25/2024	<b>5</b> Corporation / Labor Organization name American Federation for Children Inc.	<b>7</b> Amount of contribution(\$) \$40,136.12	<b>8</b> In-kind contribution description In Kind-Staff Time
	<b>6</b> Corporation / Labor Organization address; City; State; Zip Code  Columbia, MD 21044		

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/31/2024	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$600.94  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras St Ste. 1770 New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</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 Processing
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2024	Payee name CP Strategies LLC	
Amount (\$) \$3,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1327 H ST Ste 303 Lincoln, NE 68508	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Strategic Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/01/2024	Payee name Camelback Strategy Group	
Amount (\$) \$8,076.58  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought Office held State Representative District 01

# 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.

<b>1</b> Total pages Schedule F1: Sch: 2/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/01/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$10,219.49  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Travis Clardy HD11
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11
Date 02/01/2024	Payee name Camelback Strategy Group	
Amount (\$) \$8,650.10  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Ernest Bailes HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 18
Date 02/01/2024	Payee name Camelback Strategy Group	
Amount (\$) \$6,877.21  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Justin Holland HD33
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought State Representative District 33

# 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.

<b>1</b> Total pages Schedule F1: Sch: 3/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/01/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$5,666.90  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose John Kuempel HD44
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought State Representative District 44
Date 02/01/2024	Payee name Camelback Strategy Group	
Amount (\$) \$4,906.20  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55
Date 02/01/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,347.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose DeWayne Burns HD58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought State Representative District 58

# 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.

<b>1</b> Total pages Schedule F1: Sch: 4/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/01/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$11,431.67  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Glenn Rogers HD60
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought State Representative District 60
Date 02/01/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,943.52  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Reggie Smith HD62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62
Date 02/01/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,699.27  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Stan Lambert HD71
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought State Representative District 71

# 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.

<b>1</b> Total pages Schedule F1: Sch: 5/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/01/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$7,750.31  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Drew Darby HD72
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought Office held State Representative District 72
Date 02/01/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,287.90  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121
Date 02/01/2024	Payee name Camelback Strategy Group	
Amount (\$) \$4,468.98  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Charlie Geren HD99
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Geren, Charlie	Office sought Office held State Representative District 99



# 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.

<b>1</b> Total pages Schedule F1: Sch: 6/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/06/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$6,836.50  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Gary VanDeaver HD01
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought State Representative District 01
Date 02/06/2024	Payee name Camelback Strategy Group	
Amount (\$) \$8,910.15  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11
Date 02/06/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,771.53  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Ernest Bailes HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailey, Ernest	Office sought State Representative District 18

# 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.

<b>1</b> Total pages Schedule F1: Sch: 7/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/06/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$6,098.89  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Justin Holland HD33
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought State Representative District 33
Date 02/06/2024	Payee name Camelback Strategy Group	
Amount (\$) \$6,964.09  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
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 IE Mail Oppose John Kuempel HD44
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought State Representative District 44
Date 02/06/2024	Payee name Camelback Strategy Group	
Amount (\$) \$4,508.84  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
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 IE Mail Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55

# 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.

<b>1</b> Total pages Schedule F1: Sch: 8/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/06/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$9,097.32  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose DeWayne Burns HD58
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought State Representative District 58
Date 02/06/2024	Payee name Camelback Strategy Group	
Amount (\$) \$14,255.72  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
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 IE Mail Oppose Glenn Rogers HD60
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought State Representative District 60
Date 02/06/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,943.52  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
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 IE Mail Oppose Reggie Smith HD62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62

# 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.

<b>1</b> Total pages Schedule F1: Sch: 9/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/06/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$7,398.52  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Stan Lambert HD71
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought Office held State Representative District 71
Date 02/06/2024	Payee name Camelback Strategy Group	
Amount (\$) \$6,909.41  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought Office held State Representative District 72
Date 02/06/2024	Payee name Camelback Strategy Group	
Amount (\$) \$5,918.44  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121

# 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.

<b>1</b> Total pages Schedule F1: Sch: 10/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/06/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$4,468.98  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Charlie Geren HD99
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Geren, Charlie	Office sought State Representative District 99
Date 02/09/2024	Payee name Camelback Strategy Group	
Amount (\$) \$3,999.24  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
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 IE Mail Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought State Representative District 01
Date 02/09/2024	Payee name Camelback Strategy Group	
Amount (\$) \$6,780.44  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
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 IE Mail Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11

# 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.

<b>1</b> Total pages Schedule F1: Sch: 11/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/09/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$5,844.30  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Ernest Bailes HD18
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 18
Date 02/09/2024	Payee name Camelback Strategy Group	
Amount (\$) \$4,880.19  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
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 IE Mail Oppose Justin Holland HD33
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought State Representative District 33
Date 02/09/2024	Payee name Camelback Strategy Group	
Amount (\$) \$5,591.54  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
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 IE Mail Oppose John Kuempel HD44
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought State Representative District 44

# 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.

<b>1</b> Total pages Schedule F1: Sch: 12/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/09/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$3,572.89  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Hugh Shine HD55
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought Office held State Representative District 55
Date 02/09/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,345.42  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose DeWayne Burns HD58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought Office held State Representative District 58
Date 02/09/2024	Payee name Camelback Strategy Group	
Amount (\$) \$11,586.52  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Glenn Rogers HD60
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought Office held State Representative District 60

# 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.

<b>1</b> Total pages Schedule F1: Sch: 13/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/09/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$6,396.79  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Reggie Smith HD62
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62
Date 02/09/2024	Payee name Camelback Strategy Group	
Amount (\$) \$5,948.71  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
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 IE Mail Oppose Stan Lambert HD71
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought State Representative District 71
Date 02/09/2024	Payee name Camelback Strategy Group	
Amount (\$) \$5,546.58  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
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 IE Mail Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought State Representative District 72



# 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.

<b>1</b> Total pages Schedule F1: Sch: 14/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/09/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$4,731.83  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Steve Allison HD121
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121
Date 02/09/2024	Payee name Camelback Strategy Group	
Amount (\$) \$3,718.26  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Charlie Geren HD99
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Geren, Charlie	Office sought Office held State Representative District 99
Date 02/13/2024	Payee name Camelback Strategy Group	
Amount (\$) \$5,486.63  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought Office held State Representative District 01

# 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.

<b>1</b> Total pages Schedule F1: Sch: 15/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/13/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$6,780.44  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Travis Clady HD11
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11
Date 02/13/2024	Payee name Camelback Strategy Group	
Amount (\$) \$5,844.30  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Ernest Bailes HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 18
Date 02/13/2024	Payee name Camelback Strategy Group	
Amount (\$) \$4,880.19  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Justin Holland HD33
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought State Representative District 33

# 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.

<b>1</b> Total pages Schedule F1: Sch: 16/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/13/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$5,591.54  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose John Kuempel HD44
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought State Representative District 44
Date 02/13/2024	Payee name Camelback Strategy Group	
Amount (\$) \$3,572.89  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55
Date 02/13/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,345.42  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose DeWayne Burns HD58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought State Representative District 58

# 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.

<b>1</b> Total pages Schedule F1: Sch: 17/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/13/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$11,586.52  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Glenn Rogers HD60
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought State Representative District 60
Date 02/13/2024	Payee name Camelback Strategy Group	
Amount (\$) \$6,396.79  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Reggie Smith HD62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62
Date 02/13/2024	Payee name Camelback Strategy Group	
Amount (\$) \$5,948.71  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Stan Lambert HD71
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought State Representative District 71

# 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.

<b>1</b> Total pages Schedule F1: Sch: 18/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/13/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$5,546.58  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Drew Darby HD72
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought Office held State Representative District 72
Date 02/13/2024	Payee name Camelback Strategy Group	
Amount (\$) \$4,731.83  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121
Date 02/13/2024	Payee name Camelback Strategy Group	
Amount (\$) \$3,718.26  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Charlie Geren HD99
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Geren, Charlie	Office sought Office held State Representative District 99

# 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.

<b>1</b> Total pages Schedule F1: Sch: 19/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/14/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$6,613.43  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Gary VanDeaver HD01
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought State Representative District 01
Date 02/14/2024	Payee name Camelback Strategy Group	
Amount (\$) \$8,187.08  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
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 IE Mail Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11
Date 02/14/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,048.46  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
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 IE Mail Oppose Ernest Bailes HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 18

# 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.

<b>1</b> Total pages Schedule F1: Sch: 20/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/14/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$5,875.82  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Justin Holland HD33
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought State Representative District 33
Date 02/14/2024	Payee name Camelback Strategy Group	
Amount (\$) \$6,741.02  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose John Kuempel HD44
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought State Representative District 44
Date 02/14/2024	Payee name Camelback Strategy Group	
Amount (\$) \$4,285.77  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55

# 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.

<b>1</b> Total pages Schedule F1: Sch: 21/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/14/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$8,874.25  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose DeWayne Burns HD58
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought Office held State Representative District 58
Date 02/14/2024	Payee name Camelback Strategy Group	
Amount (\$) \$14,032.65  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Glenn Rogers HD60
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought Office held State Representative District 60
Date 02/14/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,720.45  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Reggie Smith HD62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought Office held State Representative District 62



# 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.

<b>1</b> Total pages Schedule F1: Sch: 22/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/14/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$7,175.45  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Stan Lambert HD71
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought Office held State Representative District 71
Date 02/14/2024	Payee name Camelback Strategy Group	
Amount (\$) \$6,686.34  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought Office held State Representative District 72
Date 02/14/2024	Payee name Camelback Strategy Group	
Amount (\$) \$5,695.37  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District

# 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.

<b>1</b> Total pages Schedule F1: Sch: 23/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/14/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$4,462.58  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Charlie Geren HD99
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Geren, Charlie	Office sought State Representative District 99
Date 02/22/2024	Payee name Camelback Strategy Group	
Amount (\$) \$5,552.56  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought State Representative District 01
Date 02/22/2024	Payee name Camelback Strategy Group	
Amount (\$) \$6,846.37  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11

# 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.

<b>1</b> Total pages Schedule F1: Sch: 24/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/22/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$5,910.23  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Ernest Bailes HD18
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 18
Date 02/22/2024	Payee name Camelback Strategy Group	
Amount (\$) \$3,638.82  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55
Date 02/22/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,411.35  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose DeWayne Burns HD58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought State Representative District 58

# 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.

<b>1</b> Total pages Schedule F1: Sch: 25/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/22/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$5,612.51  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Drew Darby HD72
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought Office held State Representative District 72
Date 02/22/2024	Payee name Camelback Strategy Group	
Amount (\$) \$4,797.76  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121
Date 02/15/2024	Payee name CampaignHQ	
Amount (\$) \$1,440.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Voter Calls Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought Office held State Representative District 01

# 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.

<b>1</b> Total pages Schedule F1: Sch: 26/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/15/2024	<b>5</b> Payee name CampaignHQ	
<b>6</b> Amount (\$) \$1,807.29  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Voter Calls Oppose Travis Clardy HD11
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11
Date 02/15/2024	Payee name CampaignHQ	
Amount (\$) \$1,998.64  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
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 IE Voter Calls Oppose Ernest Bailes HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 18
Date 02/15/2024	Payee name CampaignHQ	
Amount (\$) \$812.70  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
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 IE Voter Calls Oppose Justin Holland HD33
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought State Representative District 33

# 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.

<b>1</b> Total pages Schedule F1: Sch: 27/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/15/2024	<b>5</b> Payee name CampaignHQ	
<b>6</b> Amount (\$) \$1,081.88  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Voter Calls Oppose John Kuempel HD44
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought State Representative District 44
Date 02/15/2024	Payee name CampaignHQ	
Amount (\$) \$516.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
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 IE Voter Calls Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55
Date 02/15/2024	Payee name CampaignHQ	
Amount (\$) \$1,874.80  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
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 IE Voter Calls Oppose DeWayne Burns HD58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought State Representative District 58

# 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.

<b>1</b> Total pages Schedule F1: Sch: 28/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/15/2024	<b>5</b> Payee name CampaignHQ	
<b>6</b> Amount (\$) \$1,883.83  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Voter Calls Oppose Glenn Rogers HD60
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought State Representative District 60
Date 02/15/2024	Payee name CampaignHQ	
Amount (\$) \$1,265.06  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Voter Calls Oppose Reggie Smith HD62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62
Date 02/15/2024	Payee name CampaignHQ	
Amount (\$) \$1,216.90  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Voter Calls Oppose Stan Lambert HD71
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought State Representative District 71

# 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.

<b>1</b> Total pages Schedule F1: Sch: 29/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/15/2024	<b>5</b> Payee name CampaignHQ	
<b>6</b> Amount (\$) \$1,198.84  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Voter Calls Oppose Drew Darby HD72
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought State Representative District 72
Date 02/15/2024	Payee name CampaignHQ	
Amount (\$) \$818.72  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
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 IE Voter Calls Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought State Representative District 121
Date 02/15/2024	Payee name CampaignHQ	
Amount (\$) \$671.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
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 IE Voter Calls Oppose Charlie Geren HD99
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Geren, Charlie	Office sought State Representative District 99



# 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.

<b>1</b> Total pages Schedule F1: Sch: 30/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name CampaignHQ	
<b>6</b> Amount (\$) \$2,123.37  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Voter Calls Support Alan Schoolcraft HD44
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Schoolcraft, Alan	Office sought State Representative District 44
Date 02/23/2024	Payee name CampaignHQ	
Amount (\$) \$2,728.20  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
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 IE Voter Calls Support Chris Spencer HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Spencer, Chris	Office sought State Representative District 01
Date 02/23/2024	Payee name CampaignHQ	
Amount (\$) \$3,379.69  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
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 IE Voter Calls Support Helen Kerwin HD58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kerwin, Helen	Office sought State Representative District 58

# 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.

<b>1</b> Total pages Schedule F1: Sch: 31/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name CampaignHQ	
<b>6</b> Amount (\$) \$990.54  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Voter Calls Support Hillary Hickland HD55
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Hickland, Hillary	Office sought State Representative District 55
Date 02/23/2024	Payee name CampaignHQ	
Amount (\$) \$3,716.51  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Voter Calls Support Janis Holt HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holt, Janis	Office sought State Representative District 18
Date 02/23/2024	Payee name CampaignHQ	
Amount (\$) \$3,410.07  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Voter Calls Support Joanne Shofner HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shofner, Joanne	Office sought State Representative District 11

# 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.

<b>1</b> Total pages Schedule F1: Sch: 32/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name CampaignHQ	
<b>6</b> Amount (\$) \$1,539.56  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Voter Calls Support Katrina Pierson HD33
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Pierson, Katrina	Office sought Office held State Representative District 33
Date 02/23/2024	Payee name CampaignHQ	
Amount (\$) \$2,289.03  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Voter Calls Support Liz Case Pickens HD71
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Pickens, Liz Case	Office sought Office held State Representative District 71
Date 02/23/2024	Payee name CampaignHQ	
Amount (\$) \$1,601.79  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Voter Calls Support Marc LaHood HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name LaHood, Marc	Office sought Office held State Representative District 121

# 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.

<b>1</b> Total pages Schedule F1: Sch: 33/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name CampaignHQ	
<b>6</b> Amount (\$) \$3,507.75  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Voter Calls Support Mike Olcott HD60
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Olcott, Mike	Office sought Office held State Representative District 60
Date 02/23/2024	Payee name CampaignHQ	
Amount (\$) \$2,341.07  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
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 IE Voter Calls Support Shelley Luther HD62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Luther, Shelley	Office sought Office held State Representative District 62
Date 02/23/2024	Payee name CampaignHQ	
Amount (\$) \$2,246.41  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 257  Brooklyn, IA 52211	
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 IE Voter Calls Support Stormy Bradley HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bradley, Stormy	Office sought Office held State Representative District 72

# 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.

<b>1</b> Total pages Schedule F1: Sch: 34/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
---	---	--

<b>4</b> Date 02/05/2024	<b>5</b> Payee name Chase Bank
-----------------------------	-----------------------------------

<b>6</b> Amount (\$) \$200.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 8111 Preston Rd, 2nd Fl.  Dallas, TX 75225
---	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
---------------------------------	---	--

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 02/14/2024	Payee name Cygnal
--------------------	----------------------

Amount (\$) \$85,950.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 90017th St NW Ste 950 Washington, DC 20006
---	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research
-------------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 02/06/2024	Payee name Drogin Group
--------------------	----------------------------

Amount (\$) \$18,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6705 W Hwy 290 Ste 50281 Austin, TX 50281
---	---

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Strategic Consulting
-------------------------------	---	--

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.

<b>1</b> Total pages Schedule F1: Sch: 35/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/22/2024	<b>5</b> Payee name Drogin Group	
<b>6</b> Amount (\$) \$20,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 6705 W Hwy 290 Ste 50281 Austin, TX 50281	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Kronda Thimesch HD65
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Thimesch, Kronda	Office sought State Representative District 65
Date 01/31/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$55,126.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051 Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought State Representative District 01
Date 01/31/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$53,800.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051 Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11

# 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.

<b>1</b> Total pages Schedule F1: Sch: 36/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/31/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$55,190.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Ernest Bailes HD18
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 18
Date 01/31/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$51,800.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Justin Holland HD33
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought State Representative District 33
Date 01/31/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$53,800.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose John Kuempel HD44
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought State Representative District 44

# 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.

<b>1</b> Total pages Schedule F1: Sch: 37/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/31/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$48,600.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Hugh Shine HD55
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55
Date 01/31/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$52,020.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose DeWayne Burns HD58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought State Representative District 58
Date 01/31/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$53,420.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Glenn Rogers HD60
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought State Representative District 60



# 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.

<b>1</b> Total pages Schedule F1: Sch: 38/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/31/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$53,420.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Reggie Smith HD62
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62
Date 01/31/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,869.30  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought State Representative District 72
Date 02/01/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$600.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought State Representative District 01

# 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.

<b>1</b> Total pages Schedule F1: Sch: 39/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/01/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$600.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Travis Clardy HD11
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11
Date 02/01/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$600.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Ernest Bailey HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 18
Date 02/01/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$600.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Justin Holland HD33
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought State Representative District 33

# 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.

<b>1</b> Total pages Schedule F1: Sch: 40/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/01/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$600.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose John Kuempel HD44
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought State Representative District 44
Date 02/01/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$600.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose High Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55
Date 02/01/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$600.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose DeWayne Burns HD59
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought State Representative District 58

# 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.

<b>1</b> Total pages Schedule F1: Sch: 41/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/01/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$600.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Glenn Rogers HD60
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought State Representative District 60
Date 02/01/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$600.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Reggie Smith HD62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62
Date 02/01/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$600.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Stan Lambert HD71
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lamber, Stan	Office sought State Representative District 71

# 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.

<b>1</b> Total pages Schedule F1: Sch: 42/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/01/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$600.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Drew Darby HD71
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought Office held State Representative District 72
Date 02/01/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$600.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121
Date 02/01/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$600.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Charlie Geren HD99
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Geren, Charlie	Office sought Office held State Representative District 99

# 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.

<b>1</b> Total pages Schedule F1: Sch: 43/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/01/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$59,380.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Drew Darby HD72
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought Office held State Representative District 72
Date 02/01/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$51,800.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121
Date 02/01/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$48,600.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Charlie Geren HD99
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Geren, Charlie	Office sought Office held State Representative District 99

# 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.

<b>1</b> Total pages Schedule F1: Sch: 44/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/01/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$55,120.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Stan Lambert HD71
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought Office held State Representative District 71
Date 02/06/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$3,909.57  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought Office held State Representative District 01
Date 02/06/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$5,708.37  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought Office held State Representative District 11

# 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.

<b>1</b> Total pages Schedule F1: Sch: 45/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/06/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$3,896.85  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Ernest Bailes HD18
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 18
Date 02/06/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$3,647.67  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Justin Holland HD33
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought State Representative District 33
Date 02/06/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$3,593.91  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose John Kuempel HD44
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought State Representative District 44



# 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.

<b>1</b> Total pages Schedule F1: Sch: 46/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/06/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$3,190.53  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Hugh Shine HD55
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought Office held State Representative District 55
Date 02/06/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$3,786.39  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose DeWayne Burns HD58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought Office held State Representative District 58
Date 02/06/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$4,420.41  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Glenn Rogers HD60
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought Office held State Representative District 60

# 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.

<b>1</b> Total pages Schedule F1: Sch: 47/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/06/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$4,043.97  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Reggie Smith HD62
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62
Date 02/06/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$3,671.67  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Stan Lambert HD71
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought State Representative District 71
Date 02/06/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$3,679.11  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought State Representative District 72

# 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.

<b>1</b> Total pages Schedule F1: Sch: 48/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/06/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$3,605.07  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Charlie Geren HD99
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Geren, Charlie	Office sought Office held State Representative District 99
Date 02/06/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$3,610.05  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121
Date 02/08/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$5,703.76  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought Office held State Representative District 01

# 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.

<b>1</b> Total pages Schedule F1: Sch: 49/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/08/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$6,048.08  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Travis Clardy HD11
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11
Date 02/08/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$5,701.60  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Ernest Bailey HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 18
Date 02/08/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$4,314.06  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Justin Holland HD33
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought State Representative District 33

# 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.

<b>1</b> Total pages Schedule F1: Sch: 50/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/08/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$4,152.78  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose John Kuempel HD44
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought State Representative District 44
Date 02/08/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$2,942.64  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55
Date 02/08/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$5,350.22  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose DeWayne Burns HD58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought State Representative District 58

# 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.

<b>1</b> Total pages Schedule F1: Sch: 51/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/08/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$7,232.28  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Glenn Rogers HD60
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought State Representative District 60
Date 02/08/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$6,102.96  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Reggie Smith HD62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62
Date 02/08/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$4,386.06  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Stan Lambert HD71
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought State Representative District 71

# 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.

<b>1</b> Total pages Schedule F1: Sch: 52/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/08/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$4,408.38  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Drew Darby HD72
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought Office held State Representative District 72
Date 02/08/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$4,801.20  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121
Date 02/09/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$4,186.26  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Charlie Geren HD99
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Geren, Charlie	Office sought Office held State Representative District 99

# 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.

<b>1</b> Total pages Schedule F1: Sch: 53/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/14/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$30,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose Gary VanDeaver HD01
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought State Representative District 01
Date 02/14/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$33,150.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11
Date 02/14/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$32,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose Ernest Bailes HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 18



# 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.

<b>1</b> Total pages Schedule F1: Sch: 54/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/14/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$33,750.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose Hugh Shine HD55
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought Office held State Representative District 55
Date 02/14/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,662.96  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought Office held State Representative District 01
Date 02/14/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,418.10  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought Office held State Representative District 72

# 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.

<b>1</b> Total pages Schedule F1: Sch: 55/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/16/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$55,332.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ID Digital Ads Oppose Stan Lambert HD71
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought Office held State Representative District 71
Date 02/16/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$59,560.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ID Digital Ads Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought Office held State Representative District 72
Date 02/16/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$52,920.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ID Digital Ads Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121

# 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.

<b>1</b> Total pages Schedule F1: Sch: 56/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/20/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$41,760.86  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Gary VanDeaver HD01
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought Office held State Representative District 01
Date 02/20/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$56,909.18  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought Office held State Representative District 11
Date 02/20/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$57,979.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Ernest Bailes HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought Office held State Representative District 18

# 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.

<b>1</b> Total pages Schedule F1: Sch: 57/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/20/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$31,397.26  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Justin Holland HD33
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought State Representative District 33
Date 02/20/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$31,367.58  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
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 IE Digital Ads Oppose John Kuempel HD44
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought State Representative District 44
Date 02/20/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$49,675.74  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
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 IE Digital Ads Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55

# 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.

<b>1</b> Total pages Schedule F1: Sch: 58/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/20/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$54,798.70  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose DeWayne Burns HD58
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought Office held State Representative District 58
Date 02/20/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$56,156.14  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Glenn Rogers HD60
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought Office held State Representative District 60
Date 02/20/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$56,480.86  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Reggie Smith HD62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought Office held State Representative District 62

# 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.

<b>1</b> Total pages Schedule F1: Sch: 59/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/20/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$1,470.46  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Stan Lambert HD71
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought Office held State Representative District 71
Date 02/20/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,432.78  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
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 IE Digital Ads Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought Office held State Representative District 72
Date 02/20/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,379.74  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
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 IE Digital Ads Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121

# 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.

<b>1</b> Total pages Schedule F1: Sch: 60/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/21/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$258.40  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Joanne Shofner HD11
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shofner, Joanne	Office sought Office held State Representative District 11
Date 02/21/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$358.05  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Janis Holt HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holt, Janis	Office sought Office held State Representative District 18
Date 02/21/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$134.95  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Hillary Hickland HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Hickland, Hillary	Office sought Office held State Representative District 55

# 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.

<b>1</b> Total pages Schedule F1: Sch: 61/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/21/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$419.25  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Helen Kerwin HD58
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kerwin, Helen	Office sought State Representative District 58
Date 02/21/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$428.45  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Mike Olcott HD60
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Olcott, Mike	Office sought State Representative District 60
Date 02/21/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$304.05  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Shelley Luther HD62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Luther, Shelley	Office sought State Representative District 62



# 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.

<b>1</b> Total pages Schedule F1: Sch: 62/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/21/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$204.80  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Liz Case Pickens HD71
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Pickens, Liz Case	Office sought State Representative District 71
Date 02/21/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$203.75  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Stormy Bradley HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bradley, Stormy	Office sought State Representative District 72
Date 02/21/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$171.70  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Marc LaHood HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name LaHood, Marc	Office sought State Representative District 121

# 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.

<b>1</b> Total pages Schedule F1: Sch: 63/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/21/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$24,060.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose John Kuempel HD44
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought Office held State Representative District 44
Date 02/21/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$58,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose DeWayne Burns HD58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought Office held State Representative District 58
Date 02/21/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$85,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose Reggie Smith HD62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought Office held State Representative District 62

# 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.

<b>1</b> Total pages Schedule F1: Sch: 64/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/21/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$93,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose Stan Lambert HD71
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought Office held State Representative District 71
Date 02/21/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$86,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought Office held State Representative District 72
Date 02/21/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$78,375.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121

# 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.

<b>1</b> Total pages Schedule F1: Sch: 65/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/21/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$26,475.40  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Steve Allison HD121
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121
Date 02/21/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$14,620.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought Office held State Representative District 55
Date 02/21/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$24,300.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads oppose Charlie Geren HD99
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Geren, Charlie	Office sought Office held State Representative District 99

# 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.

<b>1</b> Total pages Schedule F1: Sch: 66/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/22/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$36,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose Gary VanDeaver HD01
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought State Representative District 01
Date 02/22/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$35,700.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11
Date 02/22/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$35,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose Ernest Bailes HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 18

# 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.

<b>1</b> Total pages Schedule F1: Sch: 67/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/22/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$40,500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose Hugh Shine HD55
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55
Date 02/22/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$30,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought State Representative District 01
Date 02/22/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$33,150.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11

# 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.

<b>1</b> Total pages Schedule F1: Sch: 68/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/22/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$32,500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose Ernest Bailes HD18
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought Office held State Representative District 18
Date 02/22/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$33,750.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Media Buy Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought Office held State Representative District 55
Date 02/22/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$9,118.98  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought Office held State Representative District 01

# 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.

<b>1</b> Total pages Schedule F1: Sch: 69/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/22/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$9,241.20  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Travis Clardy HD11
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought Office held State Representative District 11
Date 02/22/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$15,730.14  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
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 IE Digital Ads Oppose Ernest Bailes HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought Office held State Representative District 18
Date 02/22/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$8,377.20  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
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 IE Digital Ads Oppose Justin Holland HD33
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought Office held State Representative District 33



# 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.

<b>1</b> Total pages Schedule F1: Sch: 70/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/22/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$8,316.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose John Kuempel HD44
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought State Representative District 44
Date 02/22/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$7,218.54  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55
Date 02/22/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$8,778.96  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose DeWayne Burns HD58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought State Representative District 58

# 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.

<b>1</b> Total pages Schedule F1: Sch: 71/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/22/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$10,543.50  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Glenn Rogers HD60
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought State Representative District 60
Date 02/22/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$9,494.28  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Reggie Smith HD62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62
Date 02/22/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$8,540.64  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Stan Lambert HD71
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought State Representative District 71

# 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.

<b>1</b> Total pages Schedule F1: Sch: 72/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/22/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$8,411.22  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Drew Darby HD72
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought Office held State Representative District 72
Date 02/22/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$8,265.78  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121
Date 02/23/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$11,539.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought Office held State Representative District 01

# 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.

<b>1</b> Total pages Schedule F1: Sch: 73/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$1,580.40  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Travis Clardy HD11
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11
Date 02/23/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,543.38  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Ernest Bailes HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 18
Date 02/23/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$20,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Justin Holland HD33
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought State Representative District 33

# 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.

<b>1</b> Total pages Schedule F1: Sch: 74/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$4,855.14  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Janis Holt HD18
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holt, Janis	Office sought State Representative District 18
Date 02/23/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$906.18  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55
Date 02/23/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,426.32  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose DeWayne Burns HD58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought State Representative District 58

# 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.

<b>1</b> Total pages Schedule F1: Sch: 75/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$25,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Glenn Rogers HD60
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought State Representative District 60
Date 02/23/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$22,990.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Reggie Smith HD62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62
Date 02/23/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$20,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Stan Lambert HD71
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought State Representative District 71

# 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.

<b>1</b> Total pages Schedule F1: Sch: 76/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$21,303.74  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Drew Darby HD72
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought Office held State Representative District 72
Date 02/23/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$16,255.26  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121
Date 02/23/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$365.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Chris Spencer HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Spencer, Chris	Office sought Office held State Representative District 01

# 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.

<b>1</b> Total pages Schedule F1: Sch: 77/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$1,140.20  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Joanne Shofner HD11
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shofner, Joanne	Office sought Office held State Representative District 11
Date 02/23/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$365.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Katrina Pierson HD33
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Pierson, Katrina	Office sought Office held State Representative District 33
Date 02/23/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,620.95  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Alan Schoolcraft HD44
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Schoolcraft, Alan	Office sought Office held State Representative District 44



# 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.

<b>1</b> Total pages Schedule F1: Sch: 78/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$769.85  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Hillary Hickland HD55
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Hickland, Hillary	Office sought Office held State Representative District 55
Date 02/23/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,622.75  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Helen Kerwin HD58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kerwin, Helen	Office sought Office held State Representative District 58
Date 02/23/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,650.35  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Mike Olcott HD60
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Olcott, Mike	Office sought Office held State Representative District 60

# 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.

<b>1</b> Total pages Schedule F1: Sch: 79/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$1,277.15  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Shelley Luther HD62
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Luther, Shelley	Office sought Office held State Representative District 62
Date 02/23/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$979.40  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Liz Case Pickens HD71
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Pickens, Liz Case	Office sought Office held State Representative District 71
Date 02/23/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$976.25  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Stormy Bradley HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bradley, Stormy	Office sought Office held State Representative District 72

# 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.

<b>1</b> Total pages Schedule F1: Sch: 80/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$880.10  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Marc LaHood HD121
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name LaHood, Marc	Office sought Office held State Representative District 121
Date 02/23/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,439.15  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Janis Holt HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holt, Janis	Office sought Office held State Representative District 18
Date 01/31/2024	Payee name Fulcrum Research LLC	
Amount (\$) \$1,300.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 611 Commerce St Ste 2704 Nashville, TN 37203	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research
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.

<b>1</b> Total pages Schedule F1: Sch: 81/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/22/2024	<b>5</b> Payee name JMC Enterprises of Louisiana	
<b>6</b> Amount (\$) \$5,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1025 Chippenham Dr.  Baton Rouge, LA 70808	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holt, Janis	Office sought State Representative District 18
Date 02/01/2024	Payee name Rural AMFM LLC	
Amount (\$) \$5,778.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Support Janis Holt HD 18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holt, Janis	Office held State Representative District 18
Date 02/01/2024	Payee name Rural AMFM LLC	
Amount (\$) \$4,876.05  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Support Hillary Hickland HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Hickland, Hillary	Office held State Representative District 55

# 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.

<b>1</b> Total pages Schedule F1: Sch: 82/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/01/2024	<b>5</b> Payee name Rural AMFM LLC	
<b>6</b> Amount (\$) \$6,660.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Support Helen Kerwin HD58
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kerwin, Helen	Office sought State Representative District 58
Date 02/08/2024	Payee name Rural AMFM LLC	
Amount (\$) \$5,778.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Support Janis Holt HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holt, Janis	Office sought State Representative District 18
Date 02/08/2024	Payee name Rural AMFM LLC	
Amount (\$) \$4,876.05  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Support Hillary Hickland HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Hickland, Hillary	Office sought State Representative District 55

# 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.

<b>1</b> Total pages Schedule F1: Sch: 83/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/08/2024	<b>5</b> Payee name Rural AMFM LLC	
<b>6</b> Amount (\$) \$7,011.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Support Helen Kerwin HD58
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kerwin, Helen	Office sought Office held State Representative District 58
Date 02/12/2024	Payee name Rural AMFM LLC	
Amount (\$) \$9,255.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought Office held State Representative District 01
Date 02/12/2024	Payee name Rural AMFM LLC	
Amount (\$) \$11,052.79  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought Office held State Representative District 11

# 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.

<b>1</b> Total pages Schedule F1: Sch: 84/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/12/2024	<b>5</b> Payee name Rural AMFM LLC	
<b>6</b> Amount (\$) \$7,394.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Reggie Smith HD62
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62
Date 02/12/2024	Payee name Rural AMFM LLC	
Amount (\$) \$6,732.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Stan Lambert HD71
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought State Representative District 71
Date 02/12/2024	Payee name Rural AMFM LLC	
Amount (\$) \$6,853.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought State Representative District 72

# 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.

<b>1</b> Total pages Schedule F1: Sch: 85/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/12/2024	<b>5</b> Payee name Rural AMFM LLC	
<b>6</b> Amount (\$) \$9,933.40  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Steve Allison HD121
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121
Date 02/16/2024	Payee name Rural AMFM LLC	
Amount (\$) \$9,255.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought Office held State Representative District 01
Date 02/16/2024	Payee name Rural AMFM LLC	
Amount (\$) \$10,709.75  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought Office held State Representative District 11



# 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.

<b>1</b> Total pages Schedule F1: Sch: 86/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/16/2024	<b>5</b> Payee name Rural AMFM LLC	
<b>6</b> Amount (\$) \$6,894.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Reggie Smith HD62
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62
Date 02/16/2024	Payee name Rural AMFM LLC	
Amount (\$) \$6,574.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Stan Lambert HD71
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought State Representative District 71
Date 02/16/2024	Payee name Rural AMFM LLC	
Amount (\$) \$6,853.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought State Representative District 72

# 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 -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 87/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/16/2024	<b>5</b> Payee name Rural AMFM LLC	
<b>6</b> Amount (\$) \$9,162.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Steve Allison HD121
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121
Date 02/16/2024	Payee name Rural AMFM LLC	
Amount (\$) \$9,959.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
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 IE Radio Buy Oppose Ernest Bailes HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought Office held State Representative District 18
Date 02/16/2024	Payee name Rural AMFM LLC	
Amount (\$) \$7,539.56  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
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 IE Radio Buy Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought Office held State Representative District 55

# 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.

<b>1</b> Total pages Schedule F1: Sch: 88/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/16/2024	<b>5</b> Payee name Rural AMFM LLC	
<b>6</b> Amount (\$) \$7,011.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose DeWayne Burns HD58
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought Office held State Representative District 58
Date 02/23/2024	Payee name Rural AMFM LLC	
Amount (\$) \$11,493.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought Office held State Representative District 01
Date 02/23/2024	Payee name Rural AMFM LLC	
Amount (\$) \$13,243.16  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought Office held State Representative District 11

# 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.

<b>1</b> Total pages Schedule F1: Sch: 89/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name Rural AMFM LLC	
<b>6</b> Amount (\$) \$13,476.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Ernest Bailes HD18
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought Office held State Representative District 18
Date 02/23/2024	Payee name Rural AMFM LLC	
Amount (\$) \$9,720.62  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought Office held State Representative District 55
Date 02/23/2024	Payee name Rural AMFM LLC	
Amount (\$) \$13,311.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose DeWayne Burns HD58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought Office held State Representative District 58

# 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.

<b>1</b> Total pages Schedule F1: Sch: 90/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name Rural AMFM LLC	
<b>6</b> Amount (\$) \$10,718.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Reggie Smith HD62
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62
Date 02/23/2024	Payee name Rural AMFM LLC	
Amount (\$) \$8,197.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Stan Lambert HD71
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought State Representative District 71
Date 02/23/2024	Payee name Rural AMFM LLC	
Amount (\$) \$7,794.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought State Representative District 72

# 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.

<b>1</b> Total pages Schedule F1: Sch: 91/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name Rural AMFM LLC	
<b>6</b> Amount (\$) \$13,961.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave Ste 300  Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Steve Allison HD121
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought State Representative District 121
Date 02/06/2024	Payee name Thomas Graphics Inc.	
Amount (\$) \$11,675.64  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Ellen Troxclair HD19
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Troxclair, Ellen	Office sought State Representative District 19
Date 02/06/2024	Payee name Thomas Graphics Inc.	
Amount (\$) \$4,604.55  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Jacey Jetton HD26
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Jetton, Jacey	Office sought State Representative District 26

# 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.

<b>1</b> Total pages Schedule F1: Sch: 92/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/06/2024	<b>5</b> Payee name Thomas Graphics Inc.	
<b>6</b> Amount (\$) \$5,132.60  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Candy Noble HD89
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Noble, Candy	Office sought Office held State Representative District 89
Date 02/06/2024	Payee name Thomas Graphics Inc.	
Amount (\$) \$6,735.72  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Lynn Stucky HD64
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Stucky, Lynn	Office sought Office held State Representative District 64
Date 02/06/2024	Payee name Thomas Graphics Inc.	
Amount (\$) \$4,416.37  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Stephanie Klick HD91
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Klick, Stephanie	Office sought Office held State Representative District 91

# 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.

<b>1</b> Total pages Schedule F1: Sch: 93/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/06/2024	<b>5</b> Payee name Thomas Graphics Inc.	
<b>6</b> Amount (\$) \$4,981.59  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Alex Kamkar HD29
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kamkar, Alex	Office sought State Representative District 29
Date 02/12/2024	Payee name Thomas Graphics Inc.	
Amount (\$) \$11,675.64  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Ellen Troxclair HD19
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Troxclair, Ellen	Office sought State Representative District 19
Date 02/12/2024	Payee name Thomas Graphics Inc.	
Amount (\$) \$4,604.55  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Jacey Jetton HD26
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Jetton, Jacey	Office sought State Representative District 26



# 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.

<b>1</b> Total pages Schedule F1: Sch: 94/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/12/2024	<b>5</b> Payee name Thomas Graphics Inc.	
<b>6</b> Amount (\$) \$5,132.60  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Candy Noble HD89
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Noble, Candy	Office sought Office held State Representative District 89
Date 02/12/2024	Payee name Thomas Graphics Inc.	
Amount (\$) \$6,735.72  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Lynn Stucky HD64
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Stucky, Lynn	Office sought Office held State Representative District 64
Date 02/12/2024	Payee name Thomas Graphics Inc.	
Amount (\$) \$4,416.37  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Stephanie Klick HD91
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Klick, Stephanie	Office sought Office held State Representative District 91

# 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.

<b>1</b> Total pages Schedule F1: Sch: 95/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/12/2024	<b>5</b> Payee name Thomas Graphics Inc.	
<b>6</b> Amount (\$) \$4,981.59  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Alex Kramkar HD29
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kamkar, Alex	Office sought Office held State Representative District 29
Date 02/20/2024	Payee name Thomas Graphics Inc.	
Amount (\$) \$11,675.64  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Troxclair, Ellen HD19
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Troxclair, Ellen	Office sought Office held State Representative District 19
Date 02/20/2024	Payee name Thomas Graphics Inc.	
Amount (\$) \$4,604.55  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Jacey Jetton HD26
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Jetton, Jacey	Office sought Office held State Representative District 26

# 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.

<b>1</b> Total pages Schedule F1: Sch: 96/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/20/2024	<b>5</b> Payee name Thomas Graphics Inc.	
<b>6</b> Amount (\$) \$5,132.60  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Candy Noble HD89
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Noble, Candy	Office sought Office held State Representative District 89
Date 02/20/2024	Payee name Thomas Graphics Inc.	
Amount (\$) \$6,735.72  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Lynn Stucky HD64
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Stucky, Lynn	Office sought Office held State Representative District 64
Date 02/20/2024	Payee name Thomas Graphics Inc.	
Amount (\$) \$4,416.37  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Stephanie Klick HD91
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Klick, Stephanie	Office sought Office held State Representative District 91

# 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.

<b>1</b> Total pages Schedule F1: Sch: 97/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
---	---	--

<b>4</b> Date 02/20/2024	<b>5</b> Payee name Thomas Graphics Inc.
-----------------------------	---

<b>6</b> Amount (\$) \$4,981.59  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 14226  Austin, TX 78714
---	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Mail Support Alex Kamkar HD29
---------------------------------	--	--

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kamkar, Alex	Office sought State Representative District 29	Office held
--	---	---	-------------

Date 02/16/2024	Payee name Uptown Solutions LLC
--------------------	------------------------------------

Amount (\$) \$1,000.00  <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2414 19th St NW #34  Washington, DC 20009
---	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Strategic Consulting
---------------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 02/13/2024	Payee name Victory Text LLC
--------------------	--------------------------------

Amount (\$) \$728.07  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503
--	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Ellen Troxclair HD19
---------------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Troxclair, Ellen	Office sought State Representative District 19	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.

<b>1</b> Total pages Schedule F1: Sch: 98/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/13/2024	<b>5</b> Payee name Victory Text LLC	
<b>6</b> Amount (\$) \$330.96  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Jacey Jetton HD26
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Jetton, Jacey	Office sought State Representative District 26
Date 02/13/2024	Payee name Victory Text LLC	
Amount (\$) \$376.67  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
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 IE Digital Ads Support Candy Noble HD89
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Noble, Candy	Office sought State Representative District 89
Date 02/13/2024	Payee name Victory Text LLC	
Amount (\$) \$462.35  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
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 IE Digital Ads Support Lynn Stucky HD64
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Stucky, Lynn	Office sought State Representative District 64

# 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.

<b>1</b> Total pages Schedule F1: Sch: 99/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/13/2024	<b>5</b> Payee name Victory Text LLC	
<b>6</b> Amount (\$) \$338.59  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Stephanie Klick HD91
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Klick, Stephanie	Office sought Office held State Representative District 91
Date 02/13/2024	Payee name Victory Text LLC	
Amount (\$) \$339.64  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Alex Kamkar HD29
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kamkar, Alex	Office sought Office held State Representative District 29
Date 02/22/2024	Payee name Victory Text LLC	
Amount (\$) \$1,874.46  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Ellen Troxclair HD19
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Troxclair, Ellen	Office sought Office held State Representative District 19

# 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.

<b>1</b> Total pages Schedule F1: Sch: 100/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/22/2024	<b>5</b> Payee name Victory Text LLC	
<b>6</b> Amount (\$) \$859.74  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Jacey Jetton HD26
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Jetton, Jacey	Office sought State Representative District 26
Date 02/22/2024	Payee name Victory Text LLC	
Amount (\$) \$988.26  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
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 IE Digital Ads Support Candy Noble HD89
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Noble, Candy	Office sought State Representative District 89
Date 02/22/2024	Payee name Victory Text LLC	
Amount (\$) \$1,236.90  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
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 IE Digital Ads Support Lynn Stucky HD64
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Stucky, Lynn	Office sought State Representative District 64

# 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.

<b>1</b> Total pages Schedule F1: Sch: 101/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/22/2024	<b>5</b> Payee name Victory Text LLC	
<b>6</b> Amount (\$) \$873.39  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Stephanie Klick HD91
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Klick, Stephanie	Office sought Office held State Representative District 91
Date 02/22/2024	Payee name Victory Text LLC	
Amount (\$) \$919.80  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Alex Kamkar HD29
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kamkar, Alex	Office sought Office held State Representative District 29
Date 02/22/2024	Payee name Victory Text LLC	
Amount (\$) \$1,362.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Kronda Thimesch HD65
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Thimesch, Kronda	Office sought Office held State Representative District 65



# 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.

<b>1</b> Total pages Schedule F1: Sch: 102/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name Victory Text LLC	
<b>6</b> Amount (\$) \$666.19  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Ellen Troxclair HD19
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Troxclair, Ellen	Office sought State Representative District 19
Date 02/23/2024	Payee name Victory Text LLC	
Amount (\$) \$305.83  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Jacey Jetton HD26
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Jetton, Jacey	Office sought State Representative District 26
Date 02/23/2024	Payee name Victory Text LLC	
Amount (\$) \$349.65  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Candy Noble HD89
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Noble, Candy	Office sought State Representative District 89

# 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.

<b>1</b> Total pages Schedule F1: Sch: 103/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name Victory Text LLC	
<b>6</b> Amount (\$) \$430.43  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Lynn Stucky HD64
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Stucky, Lynn	Office sought State Representative District 64
Date 02/23/2024	Payee name Victory Text LLC	
Amount (\$) \$309.33  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
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 IE Digital Ads Support Stephanie Klick HD91
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Klick, Stephanie	Office sought State Representative District 91
Date 02/23/2024	Payee name Victory Text LLC	
Amount (\$) \$320.18  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
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 IE Digital Ads Support Alex Kamkar HD29
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kamkar, Alex	Office sought State Representative District 29

# 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.

<b>1</b> Total pages Schedule F1: Sch: 104/104 Rpt:	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 02/23/2024	<b>5</b> Payee name Victory Text LLC	
<b>6</b> Amount (\$) \$499.10  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 190 Monroe Ave NW Ste. 300 Grand Rapids, MI 49503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE Digital Ads Support Kronda Thimesch HD65
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Thimesch, Kronda	Office sought Office held State Representative District 65

# UNPAID INCURRED OBLIGATIONS

**SCHEDULE F2**

**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.

<b>1</b> Total pages Schedule F2: Sch: 1/1 Rpt: 124/124	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
--	---	--

<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	<b>\$</b> 0.00
--	----------------

<b>5</b> Date 02/25/2024	<b>6</b> Payee name American Federation for Children Inc.
-----------------------------	--

<b>7</b> Amount (\$) \$48,242.59  <input type="checkbox"/> Expenditure from corporate funds	<b>8</b> Payee address; City; State; Zip Code 10440 Little Patuxent Pkwy Ste. 300-343 Columbia, MD 21044
--	---

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Usage
----------------------------------	---	---

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------