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

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
AFC Victory Fund			0008803	32
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ellen Troxclair State Represer	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	IL CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	4,483,136.12
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	3,700,862.39
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	5,810,986.84
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	48,242.59
16 AFFIDAVIT	<u> </u>		<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.	erjury, that the mation requi	e accompanying report is red to be reported by me
		Lisa	Lisker	
		Signature of Ca	mpaign Trea	surer
AFFIX NOTAR	Y STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said _	, t	his the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of o	fficer administering oath
Signature of onicer a	ammistering oath	Times hame of officer autimistering batti	THE OF U	moor administering batti

						Page 3 of 124
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
AFC Victory Fund					00088032	
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed	Jacey Jetton	State Representat	ive	
report if necessary.)						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Candy Noble	State Representat	tive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Lynn Stucky	State Representati	ive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	,	1				

					Page 4 of 124
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
AFC Victory Fund				00088032	
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	Candidates (Identify by name or, if applicable, classify by party.)		Stephanie Klick State Repr	esentative	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Alex Kamkar State Represe	entative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Kronda Thimesch State Re	presentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. SupportedB. Opposed			
	O. Office health as				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

							Page 5 of 124
12 COMMITTEE NAME						13 Filer ID	(Ethics Commission Filers)
AFC Victory Fund						0008803	2
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.))		Alan Schoolc	aft State Rep	resentative	
(Attach lists on plain paper to complete this report if necessary.)		В. Орро	osed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supp	orted				
		В. Оррс	osed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.))					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)			Chris Spence	State Repre	sentative	
(Attach lists on plain paper to complete this report if necessary.)		В. Орро					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supp					
		В. Оррс	osed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.))					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		orted	Helen Kerwin	State Repres	sentative	
(Attach lists on plain paper to complete this report if necessary.)		В. Оррс	osed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supp					
		В. Орро	osed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)						

					Page 6 of 124
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
AFC Victory Fund				00088032	
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed	Hillary Hickland State Represe	entative	
report if necessary.)					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Janis Holt State Representativ	re	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Joanne Shofner State Represe	entative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
		1			

						Page 7 of 124
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
AFC Victory Fund					00088032	
14 COMMITTEE ACTIVITY (Attach lists on plain	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed	Katrina Pierson	State Represen	ntative	
paper to complete this report if necessary.)						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Liz Case Picker	ns State Repres	entative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Marc LaHood S	State Representa	ntive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					

							Page 8 of 124
12 COMMITTEE NAME						13 Filer ID	(Ethics Commission Filers)
AFC Victory Fund						00088032	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)			Mike Olcott Sta	e Representativ	ve	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppos					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Suppor	rted				
		B. Oppos	ed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)			Shelley Luther	State Represent	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppos					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Suppor					
		B. Oppos	ed 				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		rted	Stormy Bradley	State Represen	tative	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppos	ed				
	Measures (Describe by date and location of election and nature of issue.)	A. Suppor					
		B. Oppos	ed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						

						Page 9 01 124
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
AFC Victory Fund					00088032	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	Gary VanDea	ver State Represe	ntative	
	2. Measures	A. Supported				
	(Describe by date and location of election and nature of issue.)					
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE	Candidates	A. Supported				
ACTIVITY	(Identify by name or, if applicable, classify by party.)					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	Travis Clardy	State Representa	tive	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	Ernest Bailes	State Representa	tive	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted					
	(Identify by name or, if applicable, classify by party.)	1				

AFC Victory Fund	B Filer ID (Ethics Commission Filers) 00088032
1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location paper to complete this report if necessary.) 2. Measures (Describe by date and location and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed A. Supported A. Supported B. Opposed B. Opposed John Kuempel State Representative displayment of the paper of complete this report if necessary.) A. Supported	
ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 1. Candidates (Identify by name or, if applicable, classify by party.) A. Supported COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) A. Supported Describe by date and location of election and nature of issue.) A. Supported A. Supported A. Supported A. Supported A. Supported	re
paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed John Kuempel State Representative (Describe by date and location of election and nature of issue.)	re
(Attach lists on plain paper to complete this report if necessary.) (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed John Kuempel State Representative A. Supported	
Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported B. Opposed John Kuempel State Representative A. Supported	
ACTIVITY (Attach lists on plain paper to complete this report if necessary.) B. Opposed John Kuempel State Representative Proposed In Support State Representa	
paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported	
(Describe by date and location of election and nature of issue.)	re
B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.)	
(Attach lists on plain paper to complete this report if necessary.) B. Opposed Hugh Shine State Representative	
Measures (Describe by date and location of election and nature of issue.) A. Supported D. Connected	
B. Opposed	
3. Officeholders Assisted (Identify by name or, if	
applicable, classify by party.)	

					Page 11 01 124
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
AFC Victory Fund				00088032	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	DeWayne Burns State Rep	presentative	
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	Glenn Rogers State Repre	esentative	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	Reggie Smith State Repre	sentative	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if				

						Page 12 of 124
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
AFC Victory Fund					00088032	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	Stan Lambert	State Representa	tive	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	Drew Darby S	tate Representativ	/e	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	Steve Allison	State Representat	ive	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					

FORM MPAC MONTHLY FILING GPAC REPORT: PURPOSE **ADDENDUM** Page 13 of 124 12 COMMITTEE NAME 13 Filer ID (Ethics Commission Filers) AFC Victory Fund 00088032 14 COMMITTEE 1. Candidates A. Supported **ACTIVITY** (Identify by name or, if applicable, classify by party.) (Attach lists on plain paper to complete this report if necessary.) B. Opposed Charlie Geren State Representative A. Supported 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				J V L.	14 of 124
		EE NAME	18 Filer ID 00088032	(Ethic	s Commission Filers)
	C Victo				
		E SUBTOTALS SCHEDULE		5	SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	4,293,000.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	X	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	PR	\$	150,000.00
5.	X	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	40,136.12
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	s	\$	3,652,619.80
11.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	48,242.59
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL (CONTRIBUTIO)N	IS		SCHEDULE A1
	The Instru	ction Guide explains how	to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 1/3 Rpt: 15/124
2	FILER NAME AFC Victory	Fund				3	Filer ID (Ethics Commission Filers) 00088032
4	Date 02/01/2024	5 Full name of contributor Angelo Jr., Ernest6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$) \$5,000.00
		Midland, TX 79701		-		_	
8	Principal occu Petroleum E	pation / Job title (See Instructions ngineer	5)	9	Employer (See Instructions Self	5)	
	Date 02/23/2024	Full name of contributor Brigham, Ben Contributor address; City; St Austin, TX 78746	out-of-state PAC (ID#:_)		Amount of Contribution (\$) \$25,000.00
		pation / Job title (See Instructions	s)		Employer (See Instructions	<u> </u> 	
	Anthem Ven	tures			Chairman		
	Date 02/05/2024	Full name of contributor Brown, Dale Contributor address; City; Si				•	Amount of Contribution (\$) \$10,000.00
	Principal occu	Midland, TX 79704 pation / Job title (See Instructions	.)	_	Employer (See Instructions	<u>'</u>	
	Business Ma) 		Moriah Group	>)	
	Date 02/20/2024	Full name of contributor Cranberg, Alex Contributor address; City; Si Ponte Vedra, FL 32082)		Amount of Contribution (\$) \$125,000.00
	Principal occu Businessma	pation / Job title (See Instructions	;)		Employer (See Instructions Aspect Mgt Corp	5)	
	Date 02/09/2024	Full name of contributor Davis, Ross Contributor address; City; Si Houston, TX 77024	out-of-state PAC (ID#:_				Amount of Contribution (\$) \$3,000.00
	Principal occu Executive	pation / Job title (See Instructions	s)		Employer (See Instructions Self	5)	
				1			

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDULE A1
	The Instru	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 2/3 Rpt: 16/124
2	FILER NAME AFC Victory	Fund			3	Filer ID (Ethics Commission Filers) 00088032
4	Date 5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$5,000.00		
8	Principal occu Retired	Katy, TX 77493 pation / Job title (See Instructions)	9	Employer (See Instructions Retired	<u> </u> 5)	
	Date Full name of contributor out-of-state PAC (ID#:) 02/05/2024 Hendrickson, Brett Contributor address; City; State; Zip Code Southlake, TX 76092			Amount of Contribution (\$) \$250,000.00		
	Principal occu Investor	pation / Job title (See Instructions)		Employer (See Instructions Self	5)	
	Date 01/31/2024	Full name of contributor Hock, Stacy Contributor address; City; State; Austin, TX 78746	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$) \$200,000.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u> </u> 5)	
	Date 02/19/2024	Full name of contributor Lamy, Jay Contributor address; City; State; Austin, TX 78746)		Amount of Contribution (\$) \$10,000.00
	Principal occu Real Estate	pation / Job title (See Instructions)		Employer (See Instructions Aquila Commercial	5)	
	Date 02/05/2024	Ricketts, J. Peter	out-of-state PAC (ID#:)		Amount of Contribution (\$) \$100,000.00
	Principal occu US Senator	pation / Job title (See Instructions)		Employer (See Instructions US Government	5)	

	MONET	TARY POLITICAL CONTRIBUTION	DNS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	al pages Schedule A1: h: 3/3 Rpt: 17/124
2	FILER NAME AFC Victory			1	er ID (Ethics Commission Filers) 088032
4			7 Am	sount of Contribution (\$) \$10,000.00	
		Houston, TX 77081			
8	Principal occu Retired	upation / Job title (See Instructions)	9 Employer (See Instructions Retired	s)	
	Date O2/21/2024 Full name of contributor out-of-state PAC (ID#:) Winn, Stephen Contributor address; City; State; Zip Code		Am	ount of Contribution (\$) \$50,000.00	
	Principal occu Mirasol Cap	Dallas, TX 75219 upation / Job title (See Instructions) ital LLC	Employer (See Instructions Chairman	<u> </u> s)	
	Date 02/21/2024	Full name of contributor out-of-state PAC (ID#:_Yass, Jeff Contributor address; City; State; Zip Code)	Am	sount of Contribution (\$) \$3,000,000.00
		Bala Cynwyd, PA 19004			
	Principal occu Managing D	upation / Job title (See Instructions) pirector	Employer (See Instructions SIG	S)	
	Date 02/23/2024	Full name of contributor out-of-state PAC (ID#:_Yass, Jeff Contributor address; City; State; Zip Code Bala Cynwyd, PA 19004)	Am	sount of Contribution (\$) \$500,000.00
	Principal occu Managing D	upation / Job title (See Instructions)	Employer (See Instructions SIG	s)	

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

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

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

SCHEDULE C2

匚			
	The li	nstruction Guide explains how to complete this form.	1 Total pages Schedule C2: Sch: 1/1 Rpt: 19/124
2	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	AFC Victory Fund		00088032
<u> </u>	Date	5 Corporation / Labor Organization name	7 Amount of 8 In-kind contribution
	02/25/2024	American Federation for Children Inc.	contribution(\$) description
	02/23/2024		\$40,136.12 In Kind-Staff Time
		6 Corporation / Labor Organization address; City; State; Zip Code	
		Columbia MD 21044	
┡		Columbia, NID 21044	Check if travel outside of Texas. Complete Schedule T.
		Columbia, MD 21044	Check if travel outside of Texas. Complete Schedule T.

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/104 Rpt:	AFC Victory Fund 00088032
4 Date	5 Payee name
01/31/2024	Anedot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$600.94	1340 Poydras St
	Ste. 1770
Expenditure from corporate funds	New Orleans, LA 70112
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Online Processing
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
01/31/2024	CP Strategies LLC
Amount (\$)	Payee address; City; State; Zip Code
\$3,000.00	1327 H ST
	Ste 303
Expenditure from corporate funds	Lincoln, NE 68508
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Strategic Consulting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	-
Date	Payee name
02/01/2024	Camelback Strategy Group
Amount (\$)	Payee address; City; State; Zip Code
\$8,076.58	2801 E Camelback Rd
	Ste 200
Expenditure from corporate funds	Phoenix, AZ 85016
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	IE Mail Oppose Gary VanDeaver HD01
2 1 2 2 1 1 2 1 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
'	VanDeaver, Gary State Representative District 01

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

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

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 3/104 Rpt:	AFC Victory Fund	00088032			
4 Date	5 Payee name				
02/01/2024	Camelback Strategy Group				
6 Amount (\$)	7 Payee address; City; State; Zip C	code			
\$5,666.90	2801 E Camelback Rd				
Expenditure from	Ste 200				
corporate funds	Phoenix, AZ 85016				
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		IE Mail Oppose John Kuempel HD44			
9 Complete ONLY if direct	Candidate/Officeholder name Office so	pught Office held			
expenditure to benefit C/OI	H Kuempel, John State R	epresentative District 44			
Date	Payee name				
02/01/2024	Camelback Strategy Group				
Amount (\$)	Payee address; City; State; Zip C	code			
\$4,906.20	2801 E Camelback Rd				
- Evpanditure from	Ste 200				
Expenditure from corporate funds	Phoenix, AZ 85016				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		IE Mail Oppose Hugh Shine HD55			
		3			
Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held			
expenditure to benefit C/O	H Shine, Hugh State Representative District 55				
Date	Payee name				
02/01/2024	Camelback Strategy Group				
Amount (\$)	Payee address; City; State; Zip C	code			
\$7,347.48	2801 E Camelback Rd				
Expenditure from	Ste 200				
corporate funds	Phoenix, AZ 85016				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense IE Mail Oppose DeWayne Burns HD58			
Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held			
expenditure to benefit C/OI		epresentative District 58			

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
Sch: 4/104 Rpt:	AFC Victory Fund 00088032				
4 Date	5 Payee name				
02/01/2024	Camelback Strategy Group				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$11,431.67	2801 E Camelback Rd				
Expenditure from	Ste 200				
corporate funds	Phoenix, AZ 85016				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.				
	Check if Austin, TX, officeholder living expense IE Mail Oppose Glenn Rogers HD60				
	IE Maii Oppose Gioliii Regele Hibee				
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OI	Rogers, Glenn State Representative District 60				
Date	Payee name				
02/01/2024	Camelback Strategy Group				
Amount (\$)	Payee address; City; State; Zip Code				
\$7,943.52	2801 E Camelback Rd				
— Forestitus from	Ste 200				
Expenditure from corporate funds	Phoenix, AZ 85016				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.				
	Check if Austin, TX, officeholder living expense IE Mail Oppose Reggie Smith HD62				
	IZ Maii Oppose Roggie Gillari 1852				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OI	Smith, Reggie State Representative District 62				
Date	Payee name				
02/01/2024	Camelback Strategy Group				
Amount (\$)	Payee address; City; State; Zip Code				
\$7,699.27	2801 E Camelback Rd				
Expenditure from	Ste 200				
corporate funds	Phoenix, AZ 85016				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	IE Mail Oppose Stan Lambert HD71				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OI	Lambert, Stan State Representative District 71				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

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

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage Expense
Contribution/ Population Mode By

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wage	s/Contract Labor OTHER (enter a category not listed above)			
	The Instruction Guide explains how to compl	<u> </u>			
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)			
Sch: 6/104 Rpt:	AFC Victory Fund	00088032			
4 Date	5 Payee name	·			
02/06/2024	Camelback Strategy Group				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$6,836.50	2801 E Camelback Rd				
Ψ0,030.30					
Expenditure from	Ste 200				
corporate funds	Phoenix, AZ 85016				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description			
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.			
EXPENDITORE		Check if Austin, TX, officeholder living expense			
		IE Mail Oppose Gary VanDeaver HD01			
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
expenditure to benefit C/O	¹ VanDeaver, Gary State Repre	sentative District 01			
Date	Payee name				
02/06/2024	Camelback Strategy Group				
Amount (\$)	Payee address; City; State; Zip Code				
\$8,910.15	2801 E Camelback Rd				
Evnanditura from	Ste 200				
Expenditure from corporate funds	Phoenix, AZ 85016				
PURPOSE	(a) Category (a. a. v.	Description			
OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense			
		IE Mail Oppose Travis Clardy HD11			
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
expenditure to benefit C/O	Clardy, Travis State Representative District 11				
Date	Payee name				
02/06/2024	Camelback Strategy Group				
Amount (\$)	Payee address; City; State; Zip Code				
\$7,771.53	2801 E Camelback Rd				
	Ste 200				
Expenditure from corporate funds	Phoenix, AZ 85016				
PURPOSE OF	,	Description Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense			
		IE Mail Oppose Ernest Bailes HD18			
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
expanditure to benefit C/OH					
	State Representative District 18				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
dvertising Expense Event Expense Loan Repayment/Reimbu

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)		
	The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
Sch: 7/104 Rpt:	AFC Victory Fund	00088032		
4 Date	5 Payee name	•		
02/06/2024	Camelback Strategy Group			
C Δ ma α ι ι m t (Φ)				
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$6,098.89	2801 E Camelback Rd			
Expenditure from	Ste 200			
corporate funds	Phoenix, AZ 85016			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF		vel outside of Texas. Complete Schedule T.		
EXPENDITURE	7 divertising Expense	istin, TX, officeholder living expense		
	IE Mail Op	pose Justin Holland HD33		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
expenditure to benefit C/OI				
	Holianu, Justin State Representative Di	Strict 33		
Date	Payee name			
02/06/2024	Camelback Strategy Group			
Amount (\$)	Payee address; City; State; Zip Code			
\$6,964.09	2801 E Camelback Rd			
φ0,004.00				
Expenditure from	Ste 200			
corporate funds	Phoenix, AZ 85016			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE		vel outside of Texas. Complete Schedule T.		
EXPENDITORE	l	stin, TX, officeholder living expense		
	IE Mail Op	pose John Kuempel HD44		
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
expenditure to benefit C/OI	H Kuempel, John State Representative Di	strict 44		
Data				
Date	Payee name			
02/06/2024	Camelback Strategy Group			
Amount (\$)	Payee address; City; State; Zip Code			
\$4,508.84	2801 E Camelback Rd			
	Ste 200			
Expenditure from corporate funds	Phoenix, AZ 85016			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Advertising Expense	vel outside of Texas. Complete Schedule T.		
	,	Istin, TX, officeholder living expense		
	IE Mail Op	pose Hugh Shine HD55		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held		
experialitie to belieff C/OI	H Shine, Hugh State Representative Di	strict 55		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 8/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	·
02/06/2024	Camelback Strategy Group	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$9,097.32	2801 E Camelback Rd	
Expenditure from	Ste 200	
corporate funds	Phoenix, AZ 85016	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Mail Oppose DeWayne Burns HD58
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/OI	H Burns, DeWayne State Re	epresentative District 58
Date	Payee name	
02/06/2024	Camelback Strategy Group	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$14,255.72	2801 E Camelback Rd	
Expenditure from	Ste 200	
corporate funds	Phoenix, AZ 85016	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Mail Oppose Glenn Rogers HD60
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/OI	Rogers, Glenn State Re	epresentative District 60
Date	Payee name	
02/06/2024	Camelback Strategy Group	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$7,943.52	2801 E Camelback Rd	
Expenditure from	Ste 200	
corporate funds	Phoenix, AZ 85016	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Mail Oppose Reggie Smith HD62
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/OI	¹ Smith, Reggie State Re	epresentative District 62

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 9/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	·
02/06/2024	Camelback Strategy Group	
6 Amount (\$)	7 Payee address; City; State; Zip C	Code
\$7,398.52	2801 E Camelback Rd	
Evpanditura from	Ste 200	
Expenditure from corporate funds	Phoenix, AZ 85016	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Mail Oppose Stan Lambert HD71
		IE Man Opposo Stan Zamestri I
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Dught Office held
expenditure to benefit C/OI	H Lambert, Stan State R	Representative District 71
Date	Payee name	
02/06/2024	Camelback Strategy Group	
Amount (\$)	Payee address; City; State; Zip C	Code
\$6,909.41	2801 E Camelback Rd	
Expenditure from	Ste 200	
corporate funds	Phoenix, AZ 85016	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if Austin TX officeholder living expense
		Check if Austin, TX, officeholder living expense IE Mail Oppose Drew Darby HD72
		12 Man oppose 2.011 2.112, 1.12.12
Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held
expenditure to benefit C/OI	H Darby, Drew State R	Representative District 72
Date	Payee name	
02/06/2024	Camelback Strategy Group	
Amount (\$)	Payee address; City; State; Zip C	Code
\$5,918.44	2801 E Camelback Rd	
Expenditure from	Ste 200	
corporate funds	Phoenix, AZ 85016	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Mail Oppose Steve Allison HD121
Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held
expenditure to benefit C/OI	Allison, Steve State R	Representative District 121

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 10/104 Rpt:	AFC Victory Fund 00088032
4 Date	5 Payee name
02/06/2024	Camelback Strategy Group
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4,468.98	2801 E Camelback Rd
- "	Ste 200
Expenditure from corporate funds	Phoenix, AZ 85016
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense IE Mail Oppose Charlie Geren HD99
	ie maii oppose chaine ceren ribos
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Geren, Charlie State Representative District 99
Date	Payee name
02/09/2024	Camelback Strategy Group
Amount (\$)	Payee address; City; State; Zip Code
\$3,999.24	2801 E Camelback Rd
	Ste 200
Expenditure from corporate funds	Phoenix, AZ 85016
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense IE Mail Oppose Gary VanDeaver HD01
	ie wan oppose dary vanbeaver ribut
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	VanDeaver, Gary State Representative District 01
Date	Payee name
02/09/2024	Camelback Strategy Group
Amount (\$)	Payee address; City; State; Zip Code
\$6,780.44	2801 E Camelback Rd
	Ste 200
Expenditure from corporate funds	Phoenix, AZ 85016
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	IE Mail Oppose Travis Clardy HD11
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
	· · · · · · · · · · · · · · · · · · ·

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	, ₋ I Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Over Polling Ex Printing E Salaries/V	xpense Nages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
l	Sch: 11/104 Rpt:		AFC Victory Fund				00088032
4	Date	5	Payee name				
l	02/09/2024		Camelback Strategy Group				
6	Amount (\$)	7	Payee address; City; State	; Zip Co	ode		
l	\$5,844.30		2801 E Camelback Rd	•			
l			Ste 200				
╚	Expenditure from corporate funds		Phoenix, AZ 85016				
8	PURPOSE				(b) Description		
°	OF EXPENDITURE		Category (See Categories listed at the top of this sol Advertising Expense	nedule)	Check if Austin	TX,	de of Texas. Complete Schedule T. officeholder living expense Ernest Bailes HD18
9	Complete ONLY if direct expenditure to benefit C/Oh			Office sou State Re	ı ught presentative Distr	ict :	Office held
F	Date		Payee name				
l	02/09/2024		Camelback Strategy Group				
┢	Amount (\$)		Payee address; City; State	; Zip Co	ode		
l	\$4,880.19		2801 E Camelback Rd				
l			Ste 200				
╙	Expenditure from corporate funds		Phoenix, AZ 85016				
H	PURPOSE	(a)	Category (See Categories listed at the top of this scl	nedule)	(b) Description		
l	OF		Advertising Expense	icuaic)	l — ·	outsi	de of Texas. Complete Schedule T.
l	EXPENDITURE		.		🗀		officeholder living expense
l					IE Mail Oppo	se .	Justin Holland HD33
L		_			<u> </u>		
l	Complete ONLY if direct expenditure to benefit C/OH			Office sou	ignt presentative Distr	ict '	Office held
L	<u>'</u>		Holland, Justin	State Re	presentative Distr	Ct .	
	Date		Payee name				
	02/09/2024		Camelback Strategy Group				
l	Amount (\$)		• •	; Zip Co	ode		
l	\$5,591.54		2801 E Camelback Rd				
<u> </u>	T Expenditure from		Ste 200				
┞	corporate funds		Phoenix, AZ 85016				
	PURPOSE	(a)	Category (See Categories listed at the top of this scl	nedule)	(b) Description		
l	OF EXPENDITURE		Advertising Expense		I Ш		de of Texas. Complete Schedule T.
							officeholder living expense John Kuempel HD44
					ie man Oppo		Committeemporries
\vdash	Complete ONLY if direct		Candidate/Officeholder name	Office sou	<u>l</u> ught		Office held
	expenditure to benefit C/Oh				presentative Distr	ict 4	

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee	∃iit/Awards/Memorials Expe Legal Services The Instruction Guide	Salaries/\	Nages/C	Contract Labor		OTHER (enter a	strict category not listed above)
4 Total marian Calcadida F1.				,p.oc		_	Files ID	(Ethina Commission Filora)
1 Total pages Schedule F1:							Filer ID	(Ethics Commission Filers)
Sch: 12/104 Rpt:	AFC Victory	Fund					00088032	
4 Date	5 Payee name							
02/09/2024	Camelback :	Strategy Group						
6 Amount (\$)	7 Payee addres	s; City;	State; Zip Co	ode				
\$3,572.89	2801 E Cam							
70,01	Ste 200							
Expenditure from		05040						
corporate funds	Phoenix, AZ	85016						
8 PURPOSE OF	(a) Category (Se	e Categories listed at the to	p of this schedule)	(b) [Description			
EXPENDITURE	Advertising I	Expense		ļ				plete Schedule T.
					L Check if Austin, E Mail Oppos		officeholder living	
				'	L Mail Oppos	5C I	lugii Sillile	11033
				<u> </u>				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Office	eholder name	Office sou	Ū			Office he	eld
oxportantaro to sorione or o	T Shine, Hugh		State Re	prese	entative Distri	Ct :)5 	
Date	Payee name							
02/09/2024	Camelback :	Strategy Group						
Amount (\$)	Payee addres	s; City;	State; Zip Co	ode				
\$7,345.42	2801 E Cam	elback Rd						
	Ste 200							
Expenditure from		05016						
corporate funds	Phoenix, AZ	92010						
PURPOSE OF	(a) Category (Se	e Categories listed at the to	p of this schedule)	(b) [Description			
EXPENDITURE	Advertising I	Expense		ļ			de of Texas. Com officeholder living	plete Schedule T.
				L	E Mail Oppos			
				'	L Mail Oppos	JC 1	Devvayine D	dilla libat
Complete ONLY if direct	Condidate/Offic	ahaldar nama	Office cou	ıaht			Office by	old.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Office		Office sou	Ū	entative Distri	o+ [Office he	eiu
<u> </u>	⊓ Burns, DeWa	yne 	State Re	prese	illative Distri	Ct i)O	
Date	Payee name							
02/09/2024	Camelback	Strategy Group						
Amount (\$)	Payee addres	s; City;	State; Zip Co	ode				
\$11,586.52	2801 E Cam	elback Rd						
	Ste 200							
Expenditure from	Phoenix, AZ	95016						
corporate funds				1				
PURPOSE OF		e Categories listed at the to	p of this schedule)	(b) [Description			
EXPENDITURE	Advertising I	Expense		ļ	_		de of Texas. Com officeholder living	plete Schedule T.
					E Mail Oppos			
					L Mail Oppos	,	oleilli rtoge	1311000
Complete ONLY if direct	Candidate/Offic	aholder name	Office sou	laht			Office he	ald
Complete <u>ONLY</u> if direct expenditure to benefit C/OI				-	entative Distri	ct 6		ziu .
	rtogers, Gleff	1	Sidle Re	יאי בפנ	ייונמנועב בופנווי	UL (

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1: Sch: 13/104 Rpt:	2 FILER NAME AFC Victory Fund 3 Filer ID (Ethics Commission 00088032	r Filers)
4 Date 02/09/2024	5 Payee name Camelback Strategy Group	
6 Amount (\$) \$6,396.79 Expenditure from corporate funds 8 PURPOSE OF EXPENDITURE	Ste 200 Phoenix, AZ 85016 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	IE Mail Oppose Reggie Smith HD62	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH Smith, Reggie State Representative District 62	
Date 02/09/2024	Payee name Camelback Strategy Group	
Amount (\$) \$5,948.71 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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense IE Mail Oppose Stan Lambert HD71	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held CH Lambert, Stan State Representative District 71	
Date 02/09/2024	Payee name Camelback Strategy Group	
Amount (\$) \$5,546.58 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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense IE Mail Oppose Drew Darby HD72	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held Darby, Drew State Representative District 72	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1: Sch: 14/104 Rpt:	2 FILER NAME AFC Victory Fund	Filer ID (Ethics Commission Filers) 00088032
4 Date 02/09/2024	5 Payee name Camelback Strategy Group	
6 Amount (\$) \$4,731.83 Expenditure from corporate funds 8 PURPOSE OF	Ste 200 Phoenix, AZ 85016 (a) Category (See Categories listed at the top of this schedule) (b) Description	side of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, To	x, officeholder living expense e Steve Allison HD121
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought OH Allison, Steve State Representative District	Office held
Date 02/09/2024	Payee name Camelback Strategy Group	
Amount (\$) \$3,718.26 Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	Check if Austin, To	side of Texas. Complete Schedule T. K, officeholder living expense P. Charlie Geren HD99
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Geren, Charlie State Representative District	Office held
Date 02/13/2024	Payee name Camelback Strategy Group	
Amount (\$) \$5,486.63 Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	Check if Austin, To	side of Texas. Complete Schedule T. X, officeholder living expense e Gary VanDeaver HD01
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought VanDeaver, Gary State Representative District	Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 15/104 Rpt:	2 FILER NAME3 Filer ID(Ethics Commission Filers)AFC Victory Fund00088032
4 Date 02/13/2024	5 Payee name Camelback Strategy Group
6 Amount (\$) \$6,780.44 Expenditure from corporate funds 8 PURPOSE OF EXPENDITURE	7 Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense IE Mail Oppose Travis Clady HD11
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held State Representative District 11
Date 02/13/2024	Payee name Camelback Strategy Group
Amount (\$) \$5,844.30 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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense IE Mail Oppose Ernest Bailes HD18
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held State Representative District 18
Date 02/13/2024	Payee name Camelback Strategy Group
Amount (\$) \$4,880.19 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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense IE Mail Oppose Justin Holland HD33
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held Holland, Justin State Representative District 33

SCHEDULE F1

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

Event Expense
Fees
Foot/Beverage Expense
Git/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 16/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/13/2024	Camelback Strategy Group	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$5,591.54	2801 E Camelback Rd	
Expenditure from	Ste 200	
corporate funds	Phoenix, AZ 85016	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Mail Oppose John Kuempel HD44
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI	H Kuempel, John State Ro	epresentative District 44
Date	Payee name	
02/13/2024	Camelback Strategy Group	
Amount (\$)	Payee address; City; State; Zip C	rode
\$3,572.89	2801 E Camelback Rd	
	Ste 200	
Expenditure from corporate funds	Phoenix, AZ 85016	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Mail Oppose Hugh Shine HD55
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI	H Shine, Hugh State Re	epresentative District 55
Date	Payee name	
02/13/2024	Camelback Strategy Group	
Amount (\$)	Payee address; City; State; Zip C	rode
\$7,345.42	2801 E Camelback Rd	
·	Ste 200	
Expenditure from corporate funds	Phoenix, AZ 85016	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		IE Mail Oppose DeWayne Burns HD58
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		epresentative District 58
	- State IV	Spreachtailve District 30

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 17/104 Rpt:	AFC Victory Fund 00088032
4 Date	5 Payee name
02/13/2024	Camelback Strategy Group
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$11,586.52	2801 E Camelback Rd
	Ste 200
Expenditure from corporate funds	Phoenix, AZ 85016
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense IE Mail Oppose Glenn Rogers HD60
	ie Maii Oppose Gieriii Rogers προσ
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/13/2024	Camelback Strategy Group
Amount (\$)	Payee address; City; State; Zip Code
\$6,396.79	2801 E Camelback Rd
Expenditure from	Ste 200
corporate funds	Phoenix, AZ 85016
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	IE Mail Oppose Reggie Smith HD62
Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held Smith, Reggie State Representative District 62
	State Representative District 02
Date	Payee name
02/13/2024	Camelback Strategy Group
Amount (\$)	Payee address; City; State; Zip Code
\$5,948.71	2801 E Camelback Rd
Expenditure from	Ste 200
corporate funds	Phoenix, AZ 85016
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
Z. ZADITORE	Check if Austin, TX, officeholder living expense
	IE Mail Oppose Stan Lambert HD71
Complete CALL V if direct	Candidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held Lambert, Stan State Representative District 71
•	State Nepresentative District /1

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 18/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	•
02/13/2024	Camelback Strategy Group	
6 Amount (\$)	7 Payee address; City; State; Zip	Code
\$5,546.58	2801 E Camelback Rd	
- Formarditure from	Ste 200	
Expenditure from corporate funds	Phoenix, AZ 85016	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Mail Oppose Drew Darby HD72
		IE Maii Oppose Diew Daiby 11012
9 Complete ONLY if direct	Candidate/Officeholder name Office s	Sought Office held
expenditure to benefit C/O		Representative District 72
Date	Payee name	
02/13/2024	Camelback Strategy Group	
Amount (\$)	Payee address; City; State; Zip	Code
\$4,731.83	2801 E Camelback Rd	
	Ste 200	
Expenditure from corporate funds	Phoenix, AZ 85016	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
LAFLINDITONE		Check if Austin, TX, officeholder living expense
		IE Mail Oppose Steve Allison HD121
Complete ONLY if direct	Candidate/Officeholder name Office s	sought Office held
expenditure to benefit C/O	<u> </u>	Representative District 121
Data		
Date 02/13/2024	Payee name Camelback Strategy Group	
	••••	O. d.
Amount (\$) \$3,718.26	Payee address; City; State; Zip 2801 E Camelback Rd	Code
Φυ, <i>ι</i> ±υ.∠υ		
Expenditure from	Ste 200	
corporate funds	Phoenix, AZ 85016	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Toyas, Complete Schodule T
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Mail Oppose Charlie Geren HD99
Complete ONLY if direct	Candidate/Officeholder name Office s	sought Office held
expenditure to benefit C/OH Geren, Charlie State Representative District 99		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 19/104 Rpt:	AFC Victory Fund 00088032		
4 Date	5 Payee name		
02/14/2024	Camelback Strategy Group		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$6,613.43	2801 E Camelback Rd		
- Evnanditura from	Ste 200		
Expenditure from corporate funds	Phoenix, AZ 85016		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Advertising Expense		
	Check if Austin, TX, officeholder living expense IE Mail Oppose Gary VanDeaver HD01		
	iz mail oppose daly variboaver riber		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			
Date	Payee name		
02/14/2024	Camelback Strategy Group		
Amount (\$)	Payee address; City; State; Zip Code		
\$8,187.08	2801 E Camelback Rd		
Expenditure from	Ste 200		
corporate funds	Phoenix, AZ 85016		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	IE Mail Oppose Travis Clardy HD11		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI	Clardy, Travis State Representative District 11		
Date	Payee name		
02/14/2024	Camelback Strategy Group		
Amount (\$)	Payee address; City; State; Zip Code		
\$7,048.46	2801 E Camelback Rd		
Evnonditure from	Ste 200		
Expenditure from corporate funds	Phoenix, AZ 85016		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense IE Mail Oppose Ernest Bailes HD18		
	ie maii Oppose emest dalles fidito		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			

SCHEDULE F1

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

Credit Card Payment

EXPENDITURE CATEGORIES FOR BOX 8(a) 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)

Credit Card F ayment	The Instruction Guide explains how to co	emplete this form.
1 Total pages Schedule F1: Sch: 20/104 Rpt:	2 FILER NAME AFC Victory Fund	3 Filer ID (Ethics Commission Filers) 00088032
4 Date 02/14/2024	5 Payee name Camelback Strategy Group	<u>,</u>
6 Amount (\$) \$5,875.82 Expenditure from corporate funds	7 Payee address; City; State; Zip Co 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	ode
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense IE Mail Oppose Justin Holland HD33
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H Holland, Justin State Re	ight Office held presentative District 33
Date 02/14/2024	Payee name Camelback Strategy Group	
Amount (\$) \$6,741.02 Expenditure from corporate funds	Payee address; City; State; Zip Co 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	ode
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense IE Mail Oppose John Kuempel HD44
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H Kuempel, John State Re	oght Office held presentative District 44
Date 02/14/2024	Payee name Camelback Strategy Group	
Amount (\$) \$4,285.77 Expenditure from corporate funds	Payee address; City; State; Zip Co 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	ode
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.

expenditure to benefit C/OH Shine, Hugh

EXPENDITURE

Complete ONLY if direct

Advertising Expense

Candidate/Officeholder name

Office sought

State Representative District 55

Check if Austin, TX, officeholder living expense IE Mail Oppose Hugh Shine HD55

Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 21/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/14/2024	Camelback Strategy Group	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$8,874.25	2801 E Camelback Rd	
	Ste 200	
Expenditure from corporate funds	Phoenix, AZ 85016	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Mail Oppose DeWayne Burns HD58
9 Complete ONLY if direct	Candidate/Officeholder name Office so	l ught Office held
expenditure to benefit C/OI	1	epresentative District 58
Date		·
02/14/2024	Payee name Camelback Strategy Group	
Amount (\$)	Payee address; City; State; Zip C	ode
\$14,032.65	2801 E Camelback Rd	
Expenditure from	Ste 200	
corporate funds	Phoenix, AZ 85016	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Mail Oppose Glenn Rogers HD60
		Mail Oppose Claim Negata 1.233
Complete ONLY if direct	Candidate/Officeholder name Office so	l ught Office held
expenditure to benefit C/OI	J	epresentative District 60
Date		
02/14/2024	Payee name Camelback Strategy Group	
Amount (\$)	Payee address; City; State; Zip C	ode
\$7,720.45	2801 E Camelback Rd	
Expenditure from	Ste 200	
corporate funds	Phoenix, AZ 85016	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Mail Oppose Reggie Smith HD62
		man oppose ridggio emiar riz ez
Complete ONLY if direct	Candidate/Officeholder name Office so	l ught Office held
expenditure to benefit C/OI	1	epresentative District 62
		·

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

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

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
se Event Expense Loan Repayment/Reimbu

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

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

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

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

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

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

Credit Card Payment	The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
Sch: 26/104 Rpt:	AFC Victory Fund	00088032		
4 Date	5 Payee name	·		
02/15/2024	CampaignHQ			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$1,807.29	PO Box 257			
Expenditure from				
corporate funds	Brooklyn, IA 52211			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		IE Voter Calls Oppose Travis Clardy HD11		
		ounc oppose ounce,		
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held		
expenditure to benefit C/OI	¹ Clardy, Travis State R	epresentative District 11		
Date	Payee name			
02/15/2024	CampaignHQ			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$1,998.64	PO Box 257			
Expenditure from corporate funds	Brooklyn, IA 52211			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		IE Voter Calls Oppose Ernest Bailes HD18		
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held		
expenditure to benefit C/OI	H Bailes, Ernest State R	epresentative District 18		
Date	Payee name			
02/15/2024	CampaignHQ			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$812.70	PO Box 257			
Expenditure from corporate funds	Brooklyn, IA 52211			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense IE Voter Calls Oppose Justin Holland HD33		
		ie votei Calis Oppose Justin Holianu HD33		
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held		
	expenditure to benefit C/OH Holland, Justin State Representative District 33			
		·		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 27/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	·
02/15/2024	CampaignHQ	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$1,081.88	PO Box 257	
— Funda ditura funda		
Expenditure from corporate funds	Brooklyn, IA 52211	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
E/11 E1191. C. L.		Check if Austin, TX, officeholder living expense IE Voter Calls Oppose John Kuempel HD44
		in Voter Calls Oppose 30111 Ruemper 11044
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/OI	I.	epresentative District 44
Date	Payee name	
02/15/2024	CampaignHQ	
Amount (\$)	Payee address; City; State; Zip Ci	ode
\$516.00	PO Box 257	sac
4010.00	1 G Box 201	
Expenditure from corporate funds	Brooklyn, IA 52211	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Voter Calls Oppose Hugh Shine HD55
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/OI	H Shine, Hugh State Re	epresentative District 55
Date	Payee name	
02/15/2024	CampaignHQ	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$1,874.80	PO Box 257	
Expenditure from corporate funds	Brooklyn, IA 52211	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		IE Voter Calls Oppose DeWayne Burns HD58
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/O	1	epresentative District 58

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 28/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	•
02/15/2024	CampaignHQ	
6 Amount (\$)	7 Payee address; City; State; Zip C	Code
\$1,883.83	PO Box 257	
Expenditure from		
corporate funds	Brooklyn, IA 52211	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Voter Calls Oppose Glenn Rogers HD60
		- 1000 сино съръсс стани годин
9 Complete ONLY if direct	Candidate/Officeholder name Office so	L ought Office held
expenditure to benefit C/OI	H Rogers, Glenn State R	epresentative District 60
Date	Payee name	
02/15/2024	CampaignHQ	
Amount (\$)	Payee address; City; State; Zip C	Code
\$1,265.06	PO Box 257	
Expenditure from corporate funds	Brooklyn, IA 52211	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Voter Calls Oppose Reggie Smith HD62
Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held
expenditure to benefit C/OI	H Smith, Reggie State R	epresentative District 62
Date	Payee name	
02/15/2024	CampaignHQ	
Amount (\$)	Payee address; City; State; Zip C	Code
\$1,216.90	PO Box 257	
Expenditure from		
corporate funds	Brooklyn, IA 52211	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Voter Calls Oppose Stan Lambert HD71
		12 Total Gaild Oppose Start Earlibert Fibra
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so	Lought Office held
expenditure to benefit C/OI	1	epresentative District 71

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Credit Card Payment	The Instruction Guide explains how to d	•	a category not listed above)
1 Total pages Schedule F1:		3 Filer ID	(Ethics Commission Filers)
Sch: 29/104 Rpt:	AFC Victory Fund	00088032	,
4 Date	5 Payee name		
02/15/2024	CampaignHQ		
6 Amount (\$)	7 Payee address; City; State; Zip C	ode	
\$1,198.84	PO Box 257		
Expenditure from corporate funds	Brooklyn, IA 52211		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Co Check if Austin, TX, officeholder livit	
		IE Voter Calls Oppose Drev	
			·· - ··· · · · · · · · ·
9 Complete ONLY if direct	Candidate/Officeholder name Office so	lught Office h	neld
expenditure to benefit C/OI	T. Control of the Con	epresentative District 72	iciu
Data		·	
Date	Payee name		
02/15/2024	CampaignHQ		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$818.72	PO Box 257		
Expenditure from corporate funds	Brooklyn, IA 52211		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Co	
		Check if Austin, TX, officeholder living IE Voter Calls Oppose Steven	
		IL Voter Cans Oppose Stev	76 AIIISOITTIDIZI
Complete ONLY if direct	Candidate/Officeholder name Office so	lught Office I	aold
expenditure to benefit C/OI	_	epresentative District 121	ieiu
	·	presentative District 121	
Date	Payee name		
02/15/2024	CampaignHQ		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$671.66	PO Box 257		
- Evenanditura from			
Expenditure from corporate funds	Brooklyn, IA 52211		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Co	
EXPENDITORE		Check if Austin, TX, officeholder living	
		IE Voter Calls Oppose Cha	rlie Geren HD99
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so		neld
experialiture to beliefit C/OI	Geren, Charlie State R	epresentative District 99	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1: Sch: 30/104 Rpt:	2 FILER NAME AFC Victory Fund	3 Filer ID (Ethics Commission Filers) 00088032
4 Date 02/23/2024	5 Payee name CampaignHQ	I
6 Amount (\$) \$2,123.37	7 Payee address; City; State; Zip C PO Box 257	ode
Expenditure from corporate funds	Brooklyn, IA 52211	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense IE Voter Calls Support Alan Schoolcraft HD44
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office so Schoolcraft, Alan State Re	ught Office held epresentative District 44
Date 02/23/2024	Payee name CampaignHQ	
Amount (\$) \$2,728.20	Payee address; City; State; Zip C PO Box 257	ode
Expenditure from corporate funds	Brooklyn, IA 52211	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense IE Voter Calls Support Chris Spencer HD01
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sor Spencer, Chris State Re	ught Office held epresentative District 01
Date 02/23/2024	Payee name CampaignHQ	
Amount (\$) \$3,379.69	Payee address; City; State; Zip C PO Box 257	ode
Expenditure from corporate funds	Brooklyn, IA 52211	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense IE Voter Calls Support Helen Kerwin HD58
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sold Kerwin, Helen State Re	ught Office held epresentative District 58

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
vertising Expense Event Expense Loan Repayment/Reimbu

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

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

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

	The Instruction Guide explains h	ow to complete this form.
1 Total pages Schedule F1: Sch: 31/104 Rpt:	2 FILER NAME AFC Victory Fund	3 Filer ID (Ethics Commission Filers) 00088032
4 Date 02/23/2024	5 Payee name CampaignHQ	I
6 Amount (\$) \$990.54	7 Payee address; City; State; PO Box 257	Zip Code
Expenditure from corporate funds	Brooklyn, IA 52211	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schere Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense IE Voter Calls Support Hillary Hickland HD55
Complete ONLY if direct expenditure to benefit C/OF		ffice sought Office held tate Representative District 55
Date 02/23/2024	Payee name CampaignHQ	
Amount (\$) \$3,716.51	Payee address; City; State; PO Box 257	Zip Code
Expenditure from corporate funds	Brooklyn, IA 52211	,
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schered Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense IE Voter Calls Support Janis Holt HD18
Complete ONLY if direct expenditure to benefit C/O	_1	ffice sought Office held tate Representative District 18
Date 02/23/2024	Payee name CampaignHQ	
Amount (\$) \$3,410.07	Payee address; City; State; PO Box 257	Zip Code
Expenditure from corporate funds	Brooklyn, IA 52211	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this scher Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense IE Voter Calls Support Joanne Shofner HD11
Complete ONLY if direct expenditure to benefit C/O		ffice sought Office held tate Representative District 11

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ing Expense Event Expense Loan Repayment/Reimbu

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

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 32/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	•
02/23/2024	CampaignHQ	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$1,539.56	PO Box 257	
Expenditure from		
corporate funds	Brooklyn, IA 52211	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Voter Calls Support Katrina Pierson HD33
		12 Voter Gails Support Natilità i leison (1000
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	Lught Office held
expenditure to benefit C/OI		epresentative District 33
Date	Payee name	
02/23/2024	CampaignHQ	
Amount (\$)	Payee address; City; State; Zip Ci	ode
\$2,289.03	PO Box 257	
+-,		
Expenditure from corporate funds	Brooklyn, IA 52211	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Voter Calls Support Liz Case Pickens HD71
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/O	¹ Pickens, Liz Case State Re	epresentative District 71
Date	Payee name	
02/23/2024	CampaignHQ	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$1,601.79	PO Box 257	
— Forestitus from		
Expenditure from corporate funds	Brooklyn, IA 52211	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Voter Calls Support Marc LaHood HD121
		ie votei Calis Support Marc Landou nD121
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	Lught Office held
expenditure to benefit C/O	1	epresentative District 121
	Zariood, maio Stato No	procentative Biother 121

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Frinting Expense Legal Services Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to o	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 33/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	·
02/23/2024	CampaignHQ	
6 Amount (\$)	7 Payee address; City; State; Zip C	Code
\$3,507.75	PO Box 257	
- Evenediture from		
Expenditure from corporate funds	Brooklyn, IA 52211	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Voter Calls Support Mike Olcott HD60
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held
expenditure to benefit C/OI	Olcott, Mike State R	epresentative District 60
Date	Payee name	
02/23/2024	CampaignHQ	
Amount (\$)	Payee address; City; State; Zip C	Code
\$2,341.07	PO Box 257	
- "		
Expenditure from corporate funds	Brooklyn, IA 52211	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Voter Calls Support Shelley Luther HD62
Complete ONLY if direct	Candidate/Officeholder name Office so	pught Office held
expenditure to benefit C/OI	1 Luther, Shelley State R	epresentative District 62
Date	Payee name	
02/23/2024	CampaignHQ	
Amount (\$)	Payee address; City; State; Zip C	Code
\$2,246.41	PO Box 257	
Expenditure from		
corporate funds	Brooklyn, IA 52211	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Voter Calls Support Stormy Bradley HD72
		in the case case cappent sterm, frame, in first
Complete ONLY if direct	Candidate/Officeholder name Office so	L ought Office held
expenditure to benefit C/OI	1	epresentative District 72

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 34/104 Rpt:	AFC Victory Fund 00088032
4 Date	5 Payee name
02/05/2024	Chase Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$200.00	8111 Preston Rd, 2nd Fl.
Expenditure from	
corporate funds	Dallas, TX 75225
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Bank Fee
	Saint 60
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Davos nama
02/14/2024	Payee name
	Cygnal
Amount (\$)	Payee address; City; State; Zip Code
\$85,950.00	90017th St NW
Expenditure from	Ste 950
corporate funds	Washington, DC 20006
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense
	Check if Austin, TX, officeholder living expense
	Research
Complete ONLY if direct	Condidate/Office helder name
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
02/06/2024	Drogin Group
Amount (\$)	Payee address; City; State; Zip Code
\$18,500.00	6705 W Hwy 290
	Ste 50281
Expenditure from corporate funds	Austin, TX 50281
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Consulting Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Strategic Consulting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to hanafit C/O	
expenditure to benefit C/O	
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 35/104 Rpt:	2 FILER NAME3 Filer ID(Ethics Commission Filers)AFC Victory Fund00088032
4 Date 02/22/2024	5 Payee name Drogin Group
6 Amount (\$) \$20,000.00 Expenditure from corporate funds 8 PURPOSE OF EXPENDITURE	7 Payee address; City; State; Zip Code 6705 W Hwy 290 Ste 50281 Austin, TX 50281 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	IE Digital Ads Support Kronda Thimesch HD65
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H Thimesch, Kronda State Representative District 65
Date 01/31/2024	Payee name Flexpoint Media Inc
Amount (\$) \$55,126.00	Payee address; City; State; Zip Code PO Box 1051
Expenditure from corporate funds	Albany, OH 43054
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Gary VanDeaver HD01
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held VanDeaver, Gary State Representative District 01
Date 01/31/2024	Payee name Flexpoint Media Inc
Amount (\$) \$53,800.00	Payee address; City; State; Zip Code PO Box 1051
Expenditure from corporate funds	Albany, OH 43054
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Travis Clardy HD11
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held Clardy, Travis State Representative District 11

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 36/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
01/31/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$55,190.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Ernest Bailes HD18
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	-
experiulture to beriefit C/O	Bailes, Ernest State Re	epresentative District 18
Date	Payee name	
01/31/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	ode
\$51,800.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Justin Holland HD33
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soil	
experiorare to benefit C/O	Holland, Justin State Re	epresentative District 33
Date	Payee name	
01/31/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	ode
\$53,800.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose John Kuempel HD44
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soil	
experiorare to benefit C/O	H Kuempel, John State Re	epresentative District 44

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

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 37/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	-
01/31/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$48,600.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Hugh Shine HD55
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI	1	epresentative District 55
Date	Payee name	
01/31/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	ode
\$52,020.00	PO Box 1051	ouc
Ψ32,020.00	FO BOX 1031	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose DeWayne Burns HD58
		12 2 grant tab oppose 2 straights 2 ame 1.2 st
Complete ONLY if direct	Candidate/Officeholder name Office so	Lught Office held
expenditure to benefit C/OI		epresentative District 58
Date		·
01/31/2024	Payee name Flexpoint Media Inc	
	<u> </u>	
Amount (\$)	Payee address; City; State; Zip C PO Box 1051	oue
\$53,420.00	PO B0X 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Glenn Rogers HD60
On and the ONE Wife diagram	Out did to 10th or bold on a con-	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so Rogers, Glenn State Re	ught Office held epresentative District 60
'	Rogers, Gierin State Re	epiesentative district 60

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 38/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	<u> </u>
01/31/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip C	Code
\$53,420.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Reggie Smith HD62
		12 Digital Ads Oppose Reggle Silital Fibo2
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Upught Office held
expenditure to benefit C/OI	1.1	epresentative District 62
Date	Payee name	·
01/31/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	Codo
\$1,869.30	PO Box 1051	Soute
Ψ1,009.30	1 0 000 1001	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Drew Darby HD72
		3 m or things
Complete ONLY if direct	Candidate/Officeholder name Office so	
expenditure to benefit C/OI	^H Darby, Drew State R	epresentative District 72
Date	Payee name	
02/01/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	Code
\$600.00	PO Box 1051	
4000.00	1 2 20% 2002	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Gary VanDeaver HD01
		in Digital Aus Oppose Gary Varibeaver (1001
Complete ONLY if direct	Candidate/Officeholder name Office so	Dught Office held
expenditure to benefit C/OI		epresentative District 01
	July State N	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 39/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	•
02/01/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$600.00	PO Box 1051	
— Funda ditura funda		
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
LAI LIMITORE		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Travis Clardy HD11
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/O		epresentative District 11
Data	-	P
Date 02/01/2024	Payee name Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$600.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
LAPENDITORE		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Ernest Bailey HD18
Complete ONLY if direct	Candidate/Officeholder name Office sou	uaht Office held
expenditure to benefit C/OI	1	epresentative District 18
Date	·	
Date 02/01/2024	Payee name Flexpoint Media Inc	
	•	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$600.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Justin Holland HD33
Complete ONLY if direct	Candidate/Officeholder name Office sou	Lught Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	1	epresentative District 33
	Tioliana, Justin State Ne	-presentative District 33

SCHEDULE F1

Advertising Expense Event
Accounting/Banking Fees
Consulting Expense Food//
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how t	o complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 40/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/01/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip	Code
\$600.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose John Kuempel HD44
		3
9 Complete ONLY if direct	Candidate/Officeholder name Office	Sought Office held
expenditure to benefit C/OI		Representative District 44
Date	·	•
02/01/2024	Payee name	
	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip	Code
\$600.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose High Shine HD55
		IL Digital Add Oppose Flight Shifte Fibod
Complete ONLY if direct	Candidate/Officeholder name Office	sought Office held
expenditure to benefit C/OI		Representative District 55
		Trepresentative District 65
Date	Payee name	
02/01/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip	Code
\$600.00	PO Box 1051	
Expenditure from		
corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
<u> </u>		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose DeWayne Burns HD59
Complete ONLY if direct	Condidate/Officeholder name Office	sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		sought Office held Representative District 58
Same, Serragne Ciate Representative Signification		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 41/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	•
02/01/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$600.00	PO Box 1051	
- Cypanditura from		
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Glenn Rogers HD60
		in Digital 7 tab oppose diciti 1 togets 11200
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Lught Office held
expenditure to benefit C/OI	H Rogers, Glenn State Re	epresentative District 60
Date	Payee name	
02/01/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	ode
\$600.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Reggie Smith HD62
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI	Smith, Reggie State Re	epresentative District 62
Date	Payee name	
02/01/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	ode
\$600.00	PO Box 1051	
Expenditure from		
corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Stan Lambert HD71
		La a gittat / tab oppose otal / aumost / 12 / 2
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI	1	epresentative District 71

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 42/104 Rpt:	AFC Victory Fund 00088032
4 Date	5 Payee name
02/01/2024	Flexpoint Media Inc
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$600.00	PO Box 1051
Expenditure from corporate funds	Albany, OH 43054
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Drew Darby HD71
	ie bigitai Aus Oppose biew baiby 11571
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/01/2024	Flexpoint Media Inc
Amount (\$)	Payee address; City; State; Zip Code
\$600.00	PO Box 1051
Evpanditure from	
Expenditure from corporate funds	Albany, OH 43054
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	IE Digital Ads Oppose Steve Allison HD121
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held Allison, Steve State Representative District 121
'	Allison, Steve State Representative District 121
Date	Payee name
02/01/2024	Flexpoint Media Inc
Amount (\$)	Payee address; City; State; Zip Code
\$600.00	PO Box 1051
Expenditure from corporate funds	Albany, OH 43054
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
LA LADITORL	Check if Austin, TX, officeholder living expense
	IE Digital Ads Oppose Charlie Geren HD99
Operation Children	On didn't 10 ff a balden name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held Geren Charlin State Penrosantative District 99
,	Geren, Charlie State Representative District 99

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense

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

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

Candidate/Officeholder/Politica Credit Card Payment		s/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 43/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/01/2024	Flexpoint Media Inc	
6 Amount (\$) \$59,380.00	7 Payee address; City; State; Zip Code PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Drew Darby HD72
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI		sentative District 72
Date	Payee name	
02/01/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Code	
\$51,800.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
_//		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Steve Allison HD121
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	Allison, Steve State Repre	sentative District 121
Date	Payee name	
02/01/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Code	
\$48,600.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Charlie Geren HD99
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		sentative District 99

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 44/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/01/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$55,120.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Stan Lambert HD71
		3
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	I ught Office held
expenditure to benefit C/Ol	1	epresentative District 71
Data		<u>'</u>
Date	Payee name	
02/06/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$3,909.57	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
-		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Gary VanDeaver HD01
		IE Digital Aus Oppose Galy Valideavel Fidot
Complete ONLY if direct	Candidate/Officeholder name Office sou	Junt Office held
expenditure to benefit C/Ol	1	epresentative District 01
	Varibeaver, dary State Ne	presentative District of
Date	Payee name	
02/06/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$5,708.37	PO Box 1051	
- Evnanditura from		
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Travis Clardy HD11
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	
experialitate to bettern 6/01	1 Clardy, Travis State Re	presentative District 11

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising Expense Event Expense Loan Repayment/Reimbu

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		, , , , ,
		1
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 45/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/06/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$3,896.85	PO Box 1051	
40,000.00	1 0 20X 2002	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	1
OF		avel outside of Texas. Complete Schedule T.
EXPENDITURE		austin, TX, officeholder living expense
	IE Digital	Ads Oppose Ernest Bailes HD18
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	H Bailes, Ernest State Representative D	pistrict 18
Date	Payee name	
02/06/2024	Flexpoint Media Inc	
	· ·	
Amount (\$)	Payee address; City; State; Zip Code	
\$3,647.67	PO Box 1051	
Expenditure from		
corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	1
OF	·	ravel outside of Texas. Complete Schedule T.
EXPENDITURE		austin, TX, officeholder living expense
	IE Digital .	Ads Oppose Justin Holland HD33
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	Holland, Justin State Representative D	pistrict 33
Data	Para a same	
Date	Payee name	
02/06/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Code	
\$3,593.91	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	<u> </u>	,
OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	ravel outside of Texas. Complete Schedule T.
EXPENDITURE	/ Advertising Expense	austin, TX, officeholder living expense
	U IE Digital	Ads Oppose John Kuempel HD44
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	9	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 46/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	•
02/06/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$3,190.53	PO Box 1051	
- Franciskus from		
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Hugh Shine HD55
		. — 2 - 9 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
9 Complete ONLY if direct	Candidate/Officeholder name Office so	l ught Office held
expenditure to benefit C/O		epresentative District 55
Date	Payee name	
02/06/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	ode
\$3,786.39	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose DeWayne Burns HD58
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI	H Burns, DeWayne State Re	epresentative District 58
Date	Payee name	
02/06/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City, State; Zip C	ode
\$4,420.41	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Glenn Rogers HD60
		IE Digital Aus Oppose Gleilli Nogels HD00
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI		epresentative District 60
	rogers, oteni	Spreadificative District 66

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 47/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	•
02/06/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip (Code
\$4,043.97	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Reggie Smith HD62
		12 Digital / tas Oppose Reggie Sililar (1202
9 Complete ONLY if direct	Candidate/Officeholder name Office so	L ought Office held
expenditure to benefit C/OI		Representative District 62
Date		
02/06/2024	Payee name	
	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip (Jode
\$3,671.67	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Stan Lambert HD71
		ie Bigital / tas Oppose Staff Earlibort / 15/1
Complete ONLY if direct	Candidate/Officeholder name Office so	L ought Office held
expenditure to benefit C/OI	1	Representative District 71
Date		
02/06/2024	Payee name Flexpoint Media Inc	
	•	2040
Amount (\$)	Payee address; City; State; Zip (Jode
\$3,679.11	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Drew Darby HD72
		12 Digital Ads Oppose Diew Daiby 11072
Complete ONLY if direct	Candidate/Officeholder name Office so	L ought Office held
expenditure to benefit C/OI	1	Representative District 72

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 48/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	·
02/06/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$3,605.07	PO Box 1051	
Expenditure from		
corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Charlie Geren HD99
		ie bigitai Aus Oppose Chaine Geren (1835
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	I ught Office held
expenditure to benefit C/OI	1	epresentative District 99
Date	Payee name	
02/06/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$3,610.05	PO Box 1051	
, -, -		
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Steve Allison HD121
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/OI	Allison, Steve State Re	presentative District 121
Date	Payee name	
02/08/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$5,703.76	PO Box 1051	
- Evpanditure from		
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Gary VanDeaver HD01
		ie bigitai Aus Oppose Gary Varibeaver ribor
Complete ONLY if direct	Candidate/Officeholder name Office sou	Lught Office held
expenditure to benefit C/OI	1	epresentative District 01

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 49/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	•
02/08/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$6,048.08	PO Box 1051	
Expenditure from		
corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Travis Clardy HD11
		12 Digital Add Oppose Havis Clardy HD11
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	I ught Office held
expenditure to benefit C/OI	1	epresentative District 11
Date	Payee name	
02/08/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$5,701.60	PO Box 1051	
+ - 1 		
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Ernest Bailey HD18
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/OI	Hailes, Ernest State Re	presentative District 18
Date	Payee name	
02/08/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$4,314.06	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
LAFLINDITOIL		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Justin Holland HD33
Complete ONLY if direct	Candidate/Officeholder name Office sou	lught Office held
expenditure to benefit C/OI	1	epresentative District 33
	Tronaira, ousum	presentative District 60

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	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 ho	ow to complete this form.	1
1 Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
Sch: 50/104 Rpt:	AFC Victory Fund		00088032
4 Date	5 Payee name		
02/08/2024	Flexpoint Media Inc		
6 Amount (\$) \$4,152.78	7 Payee address; City; State; PO Box 1051	Zip Code	
Expenditure from corporate funds	Albany, OH 43054		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched Advertising Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense s Oppose John Kuempel HD44
Complete ONLY if direct expenditure to benefit C/OF	ᆸ	ffice sought tate Representative Distr	Office held rict 44
Date	Payee name		
02/08/2024	Flexpoint Media Inc		
Amount (\$) \$2,942.64	Payee address; City; State; PO Box 1051	Zip Code	
Expenditure from corporate funds	Albany, OH 43054		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched Advertising Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense s Oppose Hugh Shine HD55
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Ц	ffice sought tate Representative Distr	Office held rict 55
Date	Payee name		
02/08/2024	Flexpoint Media Inc		
Amount (\$) \$5,350.22	Payee address; City; State; PO Box 1051	Zip Code	
Expenditure from corporate funds	Albany, OH 43054		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched Advertising Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense s Oppose DeWayne Burns HD58
Complete ONLY if direct expenditure to benefit C/Oh		ffice sought tate Representative Distr	Office held rict 58

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
pense Event Expense Loan Repayment/Reimbu

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

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

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

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

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 52/104 Rpt:	AFC Victory Fund 00088032	
4 Date	5 Payee name	
02/08/2024	Flexpoint Media Inc	
6 Amount (\$) \$4,408.38	7 Payee address; City; State; Zip Code PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense	
ZA ZHBITORZ	Check if Austin, TX, officeholder living expense	
	IE Digital Ads Oppose Drew Darby HD72	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Date	Payee name	
02/08/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Code	_
\$4,801.20	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	IE Digital Ads Oppose Steve Allison HD121	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	Allison, Steve State Representative District 121	
Date	Payee name	
02/09/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Code	
\$4,186.26	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	IE Digital Ads Oppose Charlie Geren HD99	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		

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

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 53/104 Rpt:	AFC Victory Fund	00088032	
4 Date	5 Payee name		
02/14/2024	Flexpoint Media Inc		
6 Amount (\$)	7 Payee address; City; State; Zip	Code	
\$30,000.00	PO Box 1051		
Expenditure from			
corporate funds	Albany, OH 43054		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)		
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		IE Media Buy Oppose Gary VanDeaver HD01	
		. <u>_</u>	
9 Complete ONLY if direct		e sought Office held	
expenditure to benefit C/OI	H VanDeaver, Gary State	Representative District 01	
Date	Payee name		
02/14/2024	Flexpoint Media Inc		
Amount (\$)	Payee address; City; State; Zip) Code	
\$33,150.00	PO Box 1051		
Expenditure from corporate funds	Albany, OH 43054		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)		
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		IE Media Buy Oppose Travis Clardy HD11	
Complete ONLY if direct		sought Office held	
expenditure to benefit C/OI	H Clardy, Travis State	Representative District 11	
Date	Payee name		
02/14/2024	Flexpoint Media Inc		
Amount (\$)	Payee address; City; State; Zip	Code	
\$32,500.00	PO Box 1051		
— Francistus from			
Expenditure from corporate funds	Albany, OH 43054		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense IE Media Buy Oppose Ernest Bailes HD18	
		in Media Buy Oppose Efficat Builds (1846)	
Complete ONLY if direct	Candidate/Officeholder name Office	sought Office held	
expenditure to benefit C/OI	1	Representative District 18	
		- '	

SCHEDULE F1

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

Fees Office Ov
Food/Beverage Expense Polling Ex
Gitt/Awards/Memorials Expense Printing Ex
Legal Services Salaries/N

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 54/104 Rpt:	AFC Victory Fund 00088032
4 Date	5 Payee name
02/14/2024	Flexpoint Media Inc
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$33,750.00	PO Box 1051
- "	
Expenditure from corporate funds	Albany, OH 43054
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	IE Media Buy Oppose Hugh Shine HD55
	ine media bay oppose magni chine mbos
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	
02/14/2024	Payee name
	Flexpoint Media Inc
Amount (\$)	Payee address; City; State; Zip Code
\$1,662.96	PO Box 1051
Expenditure from	
corporate funds	Albany, OH 43054
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Gary VanDeaver HD01
	in Digital / tas Oppose Oary Valideater Fiber
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	
02/14/2024	Payee name Flexpoint Media Inc
	·
Amount (\$)	Payee address; City; State; Zip Code
\$1,418.10	PO Box 1051
Expenditure from corporate funds	Albany, OH 43054
PURPOSE	I
OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	IE Digital Ads Oppose Drew Darby HD72
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Darby, Drew State Representative District 72

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 55/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	·
02/16/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$55,332.00	PO Box 1051	
— Funda ditura funda		
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
E/11 E/11 E/11 E/11 E/11 E/11 E/11 E/11		Check if Austin, TX, officeholder living expense ID Digital Ads Oppose Stan Lambert HD71
		D Digital Aus Oppose Stall Lambert 110/1
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	Lught Office held
expenditure to benefit C/OI		epresentative District 71
Date	Payee name	
02/16/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Ci	ode
\$59,560.00	PO Box 1051	
, , , , , , , , , , , , , , , , , , , ,		
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		ID Digital Ads Oppose Drew Darby HD72
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/OI	H Darby, Drew State Re	epresentative District 72
Date	Payee name	
02/16/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$52,920.00	PO Box 1051	
— Forestitus from		
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense ID Digital Ads Oppose Steve Allison HD121
		D Digital Aus Oppose Steve Allison HD121
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/O	1	epresentative District 121
		F

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 56/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	·
02/20/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$41,760.86	PO Box 1051	
Evpanditure from		
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
E/11 E/11 E/11 E/11 E/11 E/11 E/11 E/11		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Gary VanDeaver HD01
		ie Digital Aus Oppose Galy Valideavel 11001
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/O		epresentative District 01
Date	Payee name	<u>·</u>
02/20/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$56,909.18	PO Box 1051	suc
Ψ30,303.10	1 0 Box 1031	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Travis Clardy HD11
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/OI	¹ Clardy, Travis State Re	epresentative District 11
Date	Payee name	
02/20/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$57,979.66	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Ernest Bailes HD18
Complete ONLY if direct	Condidate/Officeholder name Office and	Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office south	ught Office held epresentative District 18
	State No.	-presentative District 10

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 57/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/20/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$31,397.26	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Justin Holland HD33
		3
9 Complete ONLY if direct	Candidate/Officeholder name Office so	lught Office held
expenditure to benefit C/OI	1	epresentative District 33
Data		1
Date	Payee name	
02/20/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	ode
\$31,367.58	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose John Kuempel HD44
		ie Digital Aus Oppose John Ruemper HD44
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	1	epresentative District 44
	Ruemper, John State Re	spresentative District 44
Date	Payee name	
02/20/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	ode
\$49,675.74	PO Box 1051	
- Cynonditure from		
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Hugh Shine HD55
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	
expenditure to benefit C/OH Shine, Hugh State Representative District 55		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 58/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	•
02/20/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$54,798.70	PO Box 1051	
Evpanditure from		
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose DeWayne Burns HD58
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	lught Office held
expenditure to benefit C/OI		epresentative District 58
Date	•	
02/20/2024	Payee name Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Ci	odo
\$56,156.14	PO Box 1051	oue -
Ψ30,130.14	FO BOX 1031	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Glenn Rogers HD60
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/OI	Rogers, Glenn State Re	presentative District 60
Date	Payee name	
02/20/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Ci	ode
\$56,480.86	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Reggie Smith HD62
0 1: 0:11:4:4:1	0.51.40%	0%
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	
Smith, Reggie State Representative District 62		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 59/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/20/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Code	9
\$1,470.46	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Stan Lambert HD71
		3 11
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/OI		esentative District 71
Date	Payee name	
02/20/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,432.78	PO Box 1051	
+ =, . 0 = 0		
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE OF	c y (con amagement at the top or the constant)	D) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Drew Darby HD72
Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/OI	¹ Darby, Drew State Repr	esentative District 72
Date	Payee name	
02/20/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Code	9
\$1,379.74	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
LXI LINDITORE		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Steve Allison HD121
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/OI	1	esentative District 121
	· ····································	

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

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

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 61/104 Rpt:	AFC Victory Fund 00088032	
4 Date	5 Payee name	
02/21/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$419.25	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense IE Digital Ads Support Helen Kerwin HD58	
	ie Bigitai / tas Support Heleii Nei Wiii 11856	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Date		
02/21/2024	Payee name Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Code	
\$428.45	PO Box 1051	
Expenditure from	All Control of the Co	
corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	IE Digital Ads Support Mike Olcott HD60	
	j II	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH Olcott, Mike State Representative District 60		
Date	Payee name	
02/21/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Code	
\$304.05	PO Box 1051	
Ψ00-1.00	1 0 BOX 1001	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense	
LA LABITORL	Check if Austin, TX, officeholder living expense	
	IE Digital Ads Support Shelley Luther HD62	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		
Edutor, Oriency State Representative District 02		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Ev Accounting/Banking Fe Consulting Expense Fo Contributions/ Donations Made By - Gil Candidate/Officeholder/Political Committee Le

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 62/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/21/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$204.80	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Support Liz Case Pickens HD71
		L Digital / las Support II.
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O	1	epresentative District 71
		pprocentative District 12
Date	Payee name	
02/21/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	ode
\$203.75	PO Box 1051	
Expenditure from		
corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Support Stormy Bradley HD72
		IE Digital Aus Support Stoffing Diadicy 11012
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O		epresentative District 72
	· · ·	Spreseritative District 12
Date	Payee name	
02/21/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	ode
\$171.70	PO Box 1051	
- Evnanditura from		
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		IE Digital Ads Support Marc LaHood HD121
Complete ONLY if direct	Candidate/Officeholder name Office so	
expenditure to benefit C/OH LaHood, Marc State Representative District 121		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

02/21/2024	2 FILER NAME AFC Victory Fund5 Payee name Flexpoint Media Inc	3 Filer ID (Ethics Commission Filers) 00088032
Sch: 63/104 Rpt: 4 Date	AFC Victory Fund 5 Payee name	
02/21/2024 6 Amount (\$)	,	
6 Amount (\$)	Flexpoint Media Inc	
` ′	<u> </u>	
\$24,060,00	7 Payee address; City; State; Zip Co	ode
42 1,000.00	PO Box 1051	· ·
- " 6		· ·
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE ((a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Media Buy Oppose John Kuempel HD44
		IE Media Buy Oppose John Naemper 11244
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/OH	1	epresentative District 44
·	- Number, John State No	:presentative District 44
Date	Payee name	
02/21/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$58,000.00	PO Box 1051	· ·
- " 6		
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE ((a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
LAFLINDITORE		Check if Austin, TX, officeholder living expense
		IE Media Buy Oppose DeWayne Burns HD58
	1	-
CAPORIGICAL C. C. C.	Burns, Dewayne State Re	spresentative district 58
Date	Payee name	
02/21/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$85,000.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE ((a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	,	Check if Austin, TX, officeholder living expense
		IE Media Buy Oppose Reggie Smith HD62
l I		
		Office held
Complete ONLY if direct	Candidate/Officeholder name Office sou	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		epresentative District 62
	1	
02/21/2024 Amount (\$) \$85,000.00	Payee name Flexpoint Media Inc Payee address; City; State; Zip Co	epresentative District 58

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 64/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/21/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip	Code
\$93,000.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Media Buy Oppose Stan Lambert HD71
		and the second s
9 Complete ONLY if direct	Candidate/Officeholder name Office s	L sought Office held
expenditure to benefit C/O	1	Representative District 71
		100.000.1100.1100.12
Date	Payee name	
02/21/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip	Code
\$86,000.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	,	Check if Austin, TX, officeholder living expense
		IE Media Buy Oppose Drew Darby HD72
Complete ONLY if direct	Candidate/Officeholder name Office s	-
expenditure to benefit C/O	¹ Darby, Drew State F	Representative District 72
Date	Payee name	
02/21/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip	Code
\$78,375.00	PO Box 1051	
* - , -	C 25% 2552	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		IE Media Buy Oppose Steve Allison HD121
Complete ONLY if direct	Candidate/Officeholder name Office s	
expenditure to benefit C/OH Allison, Steve State Representative District 121		Representative District 121

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 65/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/21/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip (Code
\$26,475.40	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Steve Allison HD121
9 Complete ONLY if direct	Candidate/Officeholder name Office so	L ought Office held
expenditure to benefit C/O		Representative District 121
Date	Γ	<u>'</u>
02/21/2024	Payee name	
	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip (Code
\$14,620.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Hugh Shine HD55
		IL Digital / tad Oppose Flag.: Climic Flags
Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held
expenditure to benefit C/OI		Representative District 55
		ioprosonitativo Biotriot oo
Date	Payee name	
02/21/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip (Code
\$24,300.00	PO Box 1051	
Expenditure from		
corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
LAI LIIDITORE		Check if Austin, TX, officeholder living expense
		IE Digital Ads oppose Charlie Geren HD99
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	
experientare to benefit ere.	Geren, Charlie State R	Representative District 99

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 66/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	·
02/22/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$36,000.00	PO Box 1051	
Evpanditure from		
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EM ENDITOR		Check if Austin, TX, officeholder living expense IE Media Buy Oppose Gary VanDeaver HD01
		ie wedia buy Oppose Gary Varibeaver fibor
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	Lught Office held
expenditure to benefit C/OI		epresentative District 01
Date	Payee name	·
02/22/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Ci	oda
\$35,700.00	PO Box 1051	Jue
ψυυ, 100.00	PO BOX 1031	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Media Buy Oppose Travis Clardy HD11
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/OI	¹ Clardy, Travis State Re	epresentative District 11
Date	Payee name	
02/22/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$35,000.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
LAF LINDII OILL		Check if Austin, TX, officeholder living expense
		IE Media Buy Oppose Ernest Bailes HD18
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	Lught Office held
expenditure to benefit C/OI	1	epresentative District 18
	Ballos, Effect State No.	presentative Bistriot 15

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 67/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	•
02/22/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$40,500.00	PO Box 1051	
Evponditure from		
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Media Buy Oppose Hugh Shine HD55
		TE Modific Buy Oppose Fragit Stime 1.555
9 Complete ONLY if direct	Candidate/Officeholder name Office so	l ught Office held
expenditure to benefit C/OI	H Shine, Hugh State Re	epresentative District 55
Date	Payee name	
02/22/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	ode
\$30,000.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Media Buy Oppose Gary VanDeaver HD01
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI	YanDeaver, Gary State Re	epresentative District 01
Date	Payee name	
02/22/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	ode
\$33,150.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
LAI LIIDITORE		Check if Austin, TX, officeholder living expense
		IE Media Buy Oppose Travis Clardy HD11
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI		epresentative District 11
	Ciardy, Travio	pprocentative Biotriot 11

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

The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 68/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	•
02/22/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$32,500.00	PO Box 1051	
= an		
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
E/11 E1191. C.1.		Check if Austin, TX, officeholder living expense IE Media Buy Oppose Ernest Bailes HD18
		ic wedia buy Oppose Effest Bailes Fib.10
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Lught Office held
expenditure to benefit C/O	1	epresentative District 18
Date	Payee name	
02/22/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	ode
\$33,750.00	PO Box 1051	
400,100100	. 6 20% 2002	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Media Buy Oppose Hugh Shine HD55
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI	H Shine, Hugh State Re	epresentative District 55
Date	Payee name	
02/22/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	ode
\$9,118.98	PO Box 1051	
. ,		
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Gary VanDeaver HD01
		ie Digital Aus Oppose Galy Valideavel 11001
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI	1	epresentative District 01
	van Boavon, Gary	procentative Biotriot 01

SCHEDULE F1

Advertising Expense Event I
Accounting/Banking Fees
Consulting Expense Food/E
Contributions/ Donations Made By - Gift/Aw

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 69/104 Rpt:	AFC Victory Fund 00088032	
4 Date	5 Payee name	
02/22/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$9,241.20	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	IE Digital Ads Oppose Travis Clardy HD11	
	in Biginal Ado Opposo Havio Gialdy (1811	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
Date	· · · · · · · · · · · · · · · · · · ·	
02/22/2024	Payee name Flexpoint Media Inc	
	·	
Amount (\$)	Payee address; City; State; Zip Code	
\$15,730.14	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	IE Digital Ads Oppose Ernest Bailes HD18	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experialitie to belieff C/O	Bailes, Ernest State Representative District 18	
Date	Payee name	
02/22/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Code	
\$8,377.20	PO Box 1051	
Forman (Co. Co.		
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense	
LAI LINDITURE	Check if Austin, TX, officeholder living expense	
	IE Digital Ads Oppose Justin Holland HD33	
Complete ONLY if direct	Candidate/Officeholder name Office accept	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held Holland, Justin State Representative District 33	
State Nepresentative District 33		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complet	, , , , , , , , , , , , , , , , , , , ,
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 70/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	·
02/22/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$8,316.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Advertising Expense	Check if Austin TV officeholder living connece
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose John Kuempel HD44
		in Digital / tab Oppose doi: 1. tabps. 1. 5
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	li	entative District 44
Data	 T	
Date	Payee name	
02/22/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Code	
\$7,218.54	PO Box 1051	
Expenditure from		
corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Hugh Shine HD55
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		entative District 55
		CHILLIAN DISTRICT CO
Date	Payee name	
02/22/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Code	
\$8,778.96	PO Box 1051	
Expenditure from		
corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
LAI LIIDII OIL		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose DeWayne Burns HD58
2 Li ONILVIS dine et	055	0" 5-14
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
State Representative District 58		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to c	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 71/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	·
02/22/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip C	code
\$10,543.50	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Glenn Rogers HD60
		ie Bigitai Ads Oppose Cienii Rogers (1800
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O	II	epresentative District 60
Data		
Date	Payee name	
02/22/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	code
\$9,494.28	PO Box 1051	
Expenditure from		
corporate funds	Albany, OH 43054	_
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Reggie Smith HD62
		33
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O	^H Smith, Reggie State Ro	epresentative District 62
Date	Payee name	
02/22/2024	Flexpoint Media Inc	
Amount (\$)	·	odo
\$8,540.64	Payee address; City; State; Zip C PO Box 1051	oue
Φ0,340.04	PO BOX 1031	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE		(b) Description
OF	(a) Category (see Categories listed at the top of this schedule) Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	, tavortioning Experies	Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Stan Lambert HD71
Complete ONLY if direct	Candidate/Officeholder name Office so	
expenditure to benefit C/OH Lambert, Stan State Representative District 71		

SCHEDULE F1

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

Fees Office Overhead/F Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/C

Candidate/Officenolder/Politica	The Instruction Guide explains how to complete this fo	, , , , , , , , , , , , , , , , , , , ,
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 72/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	·
02/22/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$8,411.22	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	
OF EXPENDITURE	/ Advertising Expense	k if travel outside of Texas. Complete Schedule T.
	I — I — I	ik if Austin, TX, officeholder living expense ital Ads Oppose Drew Darby HD72
	a.	tai / tas oppose biow balls, 1.5.2
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI		
5-1-		3 2.58.132 1 2
Date	Payee name	
02/22/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Code	
\$8,265.78	PO Box 1051	
Expenditure from		
corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	otion
OF EXPENDITURE	Advertising Expense	k if travel outside of Texas. Complete Schedule T.
	I — I — I — I	k if Austin, TX, officeholder living expense
	IE Digi	ital Ads Oppose Steve Allison HD121
Complete ONLV if direct	Candidate/Officeholder name Office sought	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		
	T State Representativ	e District 121
Date	Payee name	
02/23/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Code	
\$11,539.66	PO Box 1051	
Expenditure from		
corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	otion
OF EXPENDITURE	Advertising Expense	k if travel outside of Texas. Complete Schedule T.
LAI LIIDITORE	,	k if Austin, TX, officeholder living expense
	IE ∪IgI	ital Ads Oppose Gary VanDeaver HD01
2 Li ONII With allians at	25 11 12 12 11 11 12 12 12 12 12 12 12 12	200
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OH VanDeaver, Gary State Representative District 01		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 73/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	·
02/23/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$1,580.40	PO Box 1051	
Expenditure from		
corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Travis Clardy HD11
		3
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	I ught Office held
expenditure to benefit C/O		presentative District 11
Date	Payee name	
02/23/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$1,543.38	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Ernest Bailes HD18
Complete ONLY if direct	Candidate/Officeholder name Office sou	ight Office held
expenditure to benefit C/OI	¹ Bailes, Ernest State Re	presentative District 18
Date	Payee name	
02/23/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$20,000.00	PO Box 1051	
Expenditure from		
corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Justin Holland HD33
Complete ONLY if direct	Candidate/Officeholder name Office sou	I ught Office held
expenditure to benefit C/O	Holland, Justin State Re	presentative District 33

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 74/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	•
02/23/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$4,855.14	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	The state of the s	Check if Austin, TX, officeholder living expense
		IE Digital Ads Support Janis Holt HD18
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	-
experientare to benefit 6/61	¹ Holt, Janis State Re	epresentative District 18
Date	Payee name	
02/23/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$906.18	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Hugh Shine HD55
Complete ONLY if direct	Candidate/Officeholder name Office so	Jaht Office held
expenditure to benefit C/O		epresentative District 55
D-t-		procentative blother ee
Date	Payee name	
02/23/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$1,426.32	PO Box 1051	
Expenditure from		
corporate funds	Albany, OH 43054	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose DeWayne Burns HD58
Complete ONLY if direct	Candidate/Officeholder name Office sou	Lught Office held
expenditure to benefit C/O	1	epresentative District 58

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 75/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/23/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip C	code
\$25,000.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Glenn Rogers HD60
		12 Digital 7 tas oppose die ili 1 togets 1 1200
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O	1	epresentative District 60
Date	Payee name	
02/23/2024	Flexpoint Media Inc	
	•	codo
Amount (\$)	, ,,	ode
\$22,990.00	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Reggie Smith HD62
		IL Digital Aus Oppose Neggie Smith (1002
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O		epresentative District 62
Date	Payee name	
02/23/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	ode
\$20,000.00	PO Box 1051	ouc
φ∠υ,υυυ.υυ	1 O DOY 1001	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Stan Lambert HD71
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/Ol	1	epresentative District 71
	State IV	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 76/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	·
02/23/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip	Code
\$21,303.74	PO Box 1051	
— Francistus from		
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Oppose Drew Darby HD72
		in Digital And Oppose 2.5.1. 24.2, 1.2.2
9 Complete ONLY if direct	Candidate/Officeholder name Office s	ought Office held
expenditure to benefit C/OI	1	Representative District 72
Date	Payee name	·
02/23/2024	Flexpoint Media Inc	
Amount (\$)	•	Codo
\$16,255.26	Payee address; City; State; Zip PO Box 1051	Code
Φ10,200.20	PO 90x 1031	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Oppose Steve Allison HD121
		12 Digital / 180 Oppose C.S. S
Complete ONLY if direct	Candidate/Officeholder name Office s	ought Office held
expenditure to benefit C/OI		Representative District 121
Date	Payee name	<u> </u>
02/23/2024	Flexpoint Media Inc	
	<u> </u>	Codo
Amount (\$) \$365.00	Payee address; City; State; Zip PO Box 1051	Code
φυυυ.υυ	PO 90X 1031	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Support Chris Spencer HD01
		IL Digital / 103 Support Stills Spottes. 1.202
Complete ONLY if direct	Candidate/Officeholder name Office s	cought Office held
expenditure to benefit C/O		Representative District 01
	Openess, state	toprosontative Biodrict of

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 78/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/23/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$769.85	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		IE Digital Ads Support Hillary Hickland HD55
O Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	ц	epresentative District 55
Dete	<u> </u>	procentative District 66
Date	Payee name	
02/23/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$1,622.75	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Support Helen Kerwin HD58
		12 Digital / tab Support Holem No. Will 11200
Complete ONLY if direct	Candidate/Officeholder name Office sou	Lught Office held
expenditure to benefit C/O		presentative District 58
Date	Payee name	
02/23/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Co	nda
\$1,650.35	PO Box 1051	ouc .
Ψ1,000.00	1 0 Box 1001	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Digital Ads Support Mike Olcott HD60
Complete ONLY if direct	Candidate/Officeholder name Office sou	Lught Office held
expenditure to benefit C/O	1	epresentative District 60
·		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 79/104 Rpt:	AFC Victory Fund 00088032	
4 Date	5 Payee name	
02/23/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,277.15	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense IE Digital Ads Support Shelley Luther HD62	
	ie bigital Aus Support Shelley Euther 11002	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Date	Payee name	
02/23/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Code	
\$979.40	PO Box 1051	
— Forestitus from		
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	IE Digital Ads Support Liz Case Pickens HD71	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experientare to benefit ever	Pickens, Liz Case State Representative District 71	
Date	Payee name	
02/23/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip Code	
\$976.25	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense	
LAFLINDITURE	Check if Austin, TX, officeholder living expense	
	IE Digital Ads Support Stormy Bradley HD72	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held - Bradley Stormy	
State Representative District 72		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 80/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/23/2024	Flexpoint Media Inc	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$880.10	PO Box 1051	
Expenditure from corporate funds	Albany, OH 43054	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Support Marc LaHood HD121
9 Complete ONLY if direct	Candidate/Officeholder name Office so	l ught Office held
expenditure to benefit C/OI	1	epresentative District 121
		7,5000.100.100.100.100.100.100.100.100.100
Date	Payee name	
02/23/2024	Flexpoint Media Inc	
Amount (\$)	Payee address; City; State; Zip C	ode
\$1,439.15	PO Box 1051	
— Fire and district from		
Expenditure from corporate funds	Albany, OH 43054	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EVDENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	3 .	Check if Austin, TX, officeholder living expense
		IE Digital Ads Support Janis Holt HD18
Complete ONLY if direct	Candidate/Officeholder name Office so	-
expenditure to benefit C/OI	Holt, Janis State Re	epresentative District 18
Date	Payee name	
01/31/2024	Fulcrum Research LLC	
Amount (\$)	Payee address; City; State; Zip C	ode
\$1,300.00	611 Commerce St	
, ,	Ste 2704	
Expenditure from		
corporate funds	Nashville, TN 37203	1
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Research
		1.00003.5.1
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI		de la companya de la

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	emplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 81/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	·
02/22/2024	JMC Enterprises of Louisiana	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$5,000.00	1025 Chippenham Dr.	
Expenditure from corporate funds	Baton Rouge, LA 70808	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Research
O Company of the CNU V if alice at	Out lide to 10 ff and a li	Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
Date	Payee name	
02/01/2024	Rural AMFM LLC	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$5,778.00	190 Monroe Ave Ste 300	
Expenditure from		
corporate funds	Grand Rapids, MI 49503	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Radio Buy Support Janis Holt HD 18
		, ''
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O	¹ Holt, Janis State Re	presentative District 18
Date	Payee name	
02/01/2024	Rural AMFM LLC	
Amount (\$)	Payee address; City; State; Zip Co	nde
\$4,876.05	190 Monroe Ave Ste 300	
Expenditure from corporate funds	Grand Rapids, MI 49503	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		IE Radio Buy Support Hillary Hickland HD55
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	
expenditure to benefit C/OH Hickland, Hillary State Representative District 55		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
tising Expense Event Expense Loan Repayment/Reimbu

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

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

orean cara r dyment	The Instruction Guide explains h	ow to complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 82/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/01/2024	Rural AMFM LLC	
6 Amount (\$)		Zip Code
\$6,660.00	190 Monroe Ave Ste 300	
Expenditure from corporate funds	Grand Rapids, MI 49503	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this sched	
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Radio Buy Support Helen Kerwin HD58
Complete ONLY if direct expenditure to benefit C/OI	Ц	fice sought Office held
experioliture to beriefit C/Oi	H Kerwin, Helen St	ate Representative District 58
Date	Payee name	
02/08/2024	Rural AMFM LLC	
Amount (\$)		Zip Code
\$5,778.00	190 Monroe Ave Ste 300	
Expenditure from corporate funds	Grand Rapids, MI 49503	
PURPOSE OF	(a) Category (See Categories listed at the top of this sched	
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Radio Buy Support Janis Holt HD18
Complete ONLY if direct	i i	fice sought Office held
expenditure to benefit C/OI	□ Holt, Janis St	ate Representative District 18
Date	Payee name	
02/08/2024	Rural AMFM LLC	
Amount (\$)		Zip Code
\$4,876.05	190 Monroe Ave Ste 300	
Expenditure from corporate funds	Grand Rapids, MI 49503	
PURPOSE OF	(a) Category (See Categories listed at the top of this sched	
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Radio Buy Support Hillary Hickland HD55
Complete ONLY if direct	1.1	fice sought Office held
expenditure to benefit C/OH Hickland, Hillary State Representative District 55		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

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

SCHEDULE F1

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

Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 84/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/12/2024	Rural AMFM LLC	
6 Amount (\$)	7 Payee address; City; State; Zip (Code
\$7,394.00	190 Monroe Ave Ste 300	
Expenditure from corporate funds	Grand Rapids, MI 49503	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Reggie Smith HD62
		TE Naulo buy Oppose Neggie Situat 11002
9 Complete ONLY if direct	Candidate/Officeholder name Office s	ought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Representative District 62
	Siliti, Reggie State is	tepresentative district oz
Date	Payee name	
02/12/2024	Rural AMFM LLC	
Amount (\$)	Payee address; City; State; Zip (Code
\$6,732.00	190 Monroe Ave Ste 300	
Expenditure from corporate funds	Grand Rapids, MI 49503	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Radio Buy Oppose Stan Lambert HD71
		TE readily Oppose Start Earnest 1.2.2
Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held
expenditure to benefit C/O		Representative District 71
Data		
Date	Payee name	
02/12/2024	Rural AMFM LLC	
Amount (\$)	Payee address; City; State; Zip (Code
\$6,853.00	190 Monroe Ave Ste 300	
Expenditure from		
corporate funds	Grand Rapids, MI 49503	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORL		Check if Austin, TX, officeholder living expense
		IE Radio Buy Oppose Drew Darby HD72
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	
State Representative District 72		

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

Credit Card Layment	The Instruction Guide explains ho	ow to complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 85/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/12/2024	Rural AMFM LLC	
6 Amount (\$)	7 Payee address; City; State;	Zip Code
\$9,933.40	190 Monroe Ave Ste 300	
Expenditure from		
corporate funds	Grand Rapids, MI 49503	
8 PURPOSE	(a) Category (See Categories listed at the top of this sched	
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Steve Allison HD121
		TE reduce buy Oppose cleve / misorr ris 121
9 Complete ONLY if direct	Candidate/Officeholder name Of	I fice sought Office held
expenditure to benefit C/OI	1.1	ate Representative District 121
Date	Payee name	
02/16/2024	Rural AMFM LLC	
Amount (\$)		Zip Code
\$9,255.00	190 Monroe Ave Ste 300	
40,200.00	150 Monitoe / We eta 555	
Expenditure from corporate funds	Grand Rapids, MI 49503	
PURPOSE OF	(a) Category (See Categories listed at the top of this sched	
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Radio Buy Oppose Gary VanDeaver HD01
Complete ONLY if direct	Candidate/Officeholder name Of	fice sought Office held
expenditure to benefit C/O	11	ate Representative District 01
Date	Payee name	
02/16/2024	Rural AMFM LLC	
Amount (\$)		Zip Code
\$10,709.75	190 Monroe Ave Ste 300	Zip Code
Ψ±0,100.10	190 Monitoe / We Sta 333	
Expenditure from corporate funds	Grand Rapids, MI 49503	
PURPOSE	(a) Category (See Categories listed at the top of this sched	
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Travis Clardy HD11
		IL Madio Buy Oppose Travis Starty Fiber
Complete ONLY if direct	Candidate/Officeholder name Of	fice sought Office held
expenditure to benefit C/O	1.1	ate Representative District 11

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 86/104 Rpt:	AFC Victory Fund 00088032	
4 Date	5 Payee name	
02/16/2024	Rural AMFM LLC	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$6,894.00	190 Monroe Ave Ste 300	
Expenditure from corporate funds	Grand Rapids, MI 49503	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	IE Radio Buy Oppose Reggie Smith HD62	
	and the state of t	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Date	Payee name	
02/16/2024	Rural AMFM LLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$6,574.00	190 Monroe Ave Ste 300	
Expenditure from		
corporate funds	Grand Rapids, MI 49503	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	IE Radio Buy Oppose Stan Lambert HD71	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	Lambert, Stan State Representative District 71	
Date	Payee name	
02/16/2024	Rural AMFM LLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$6,853.00	190 Monroe Ave Ste 300	
Expenditure from corporate funds	Grand Rapids, MI 49503	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Drew Darby HD72	
	iz radio bay oppose blow barby ribiz	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
· · · · · · · · · · · · · · · · · · ·		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 87/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/16/2024	Rural AMFM LLC	
6 Amount (\$)	7 Payee address; City; State; Zip C 190 Monroe Ave Ste 300	code
\$9,162.00	190 Mollide Ave Ste 300	
Expenditure from corporate funds	Grand Rapids, MI 49503	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
		IE Radio Buy Oppose Steve Allison HD121
O Commission ONLY if the et	Out lide to 10 ff and a lide in a superior	Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so Allison, Steve State Re	ught Office held epresentative District 121
Date		
02/16/2024	Payee name Rural AMFM LLC	
Amount (\$)	Payee address; City; State; Zip C	code
\$9,959.00	190 Monroe Ave Ste 300	
Evponditure from		
Expenditure from corporate funds	Grand Rapids, MI 49503	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Radio Buy Oppose Ernest Bailes HD18
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so Bailes, Ernest State Re	ught Office held epresentative District 18
	Bailes, Linest State N	epresentative district 10
Date 02/16/2024	Payee name Rural AMFM LLC	
Amount (\$)	Payee address; City; State; Zip C	code
\$7,539.56	190 Monroe Ave Ste 300	
Expenditure from corporate funds	Grand Rapids, MI 49503	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Radio Buy Oppose Hugh Shine HD55
_		
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	-
experientale to beliefft G/O	Shine, Hugh State Ro	epresentative District 55

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 88/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/16/2024	Rural AMFM LLC	
6 Amount (\$) \$7,011.00	7 Payee address; City; State; Zip Co 190 Monroe Ave Ste 300	ode
\$7,011.00	190 MOTITOE AVE SIE 300	
Expenditure from corporate funds	Grand Rapids, MI 49503	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
		IE Radio Buy Oppose DeWayne Burns HD58
O Computate ONLY if divers	Outside to 10 ff and address and a second se	Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office south	ught Office held epresentative District 58
Date	Payee name	
02/23/2024	Rural AMFM LLC	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$11,493.00	190 Monroe Ave Ste 300	
Expenditure from		
corporate funds	Grand Rapids, MI 49503	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Radio Buy Oppose Gary VanDeaver HD01
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou VanDeaver, Gary State Re	ught Office held epresentative District 01
	Varibeaver, Gary State Ne	presentative District 01
Date 02/23/2024	Payee name Rural AMFM LLC	
Amount (\$)	Payee address; City; State; Zip Co	nde
\$13,243.16	190 Monroe Ave Ste 300	
Expenditure from corporate funds	Grand Rapids, MI 49503	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Radio Buy Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	
experiulture to beliefit C/OI	Clardy, Travis State Re	presentative District 11

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Credit Card Payment	The Instruction Guide explains how to d	complete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 89/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/23/2024	Rural AMFM LLC	
6 Amount (\$)	7 Payee address; City; State; Zip C	Code
\$13,476.00	190 Monroe Ave Ste 300	
Expenditure from corporate funds	Grand Rapids, MI 49503	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Radio Buy Oppose Ernest Bailes HD18
		12 (Wall 28) Spp333 2
9 Complete ONLY if direct	Candidate/Officeholder name Office so	L ought Office held
expenditure to benefit C/O	1	Representative District 18
Doto		
Date	Payee name	
02/23/2024	Rural AMFM LLC	
Amount (\$)	Payee address; City; State; Zip C	Code
\$9,720.62	190 Monroe Ave Ste 300	
Expenditure from corporate funds	Grand Rapids, MI 49503	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
LA LIBITORE		Check if Austin, TX, officeholder living expense
		IE Radio Buy Oppose Hugh Shine HD55
Commists ONLY if direct	Office of	Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so Shine, Hugh State R	ought Office held Representative District 55
	State N	epresentative district 33
Date	Payee name	
02/23/2024	Rural AMFM LLC	
Amount (\$)	Payee address; City; State; Zip C	Code
\$13,311.00	190 Monroe Ave Ste 300	
Evponditure from		
Expenditure from corporate funds	Grand Rapids, MI 49503	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORL		Check if Austin, TX, officeholder living expense
		IE Radio Buy Oppose DeWayne Burns HD58
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	
State Representative District 58		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 90/104 Rpt:	AFC Victory Fund	00088032			
4 Date	5 Payee name	•			
02/23/2024	Rural AMFM LLC				
6 Amount (\$)	7 Payee address; City; State; Zip C	ode			
\$10,718.00	190 Monroe Ave Ste 300				
Expenditure from corporate funds	Grand Rapids, MI 49503				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.			
LAI LIIDITORE		Check if Austin, TX, officeholder living expense			
		IE Radio Buy Oppose Reggie Smith HD62			
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held			
expenditure to benefit C/OI		epresentative District 62			
Date					
02/23/2024	Payee name Rural AMFM LLC				
		ada			
Amount (\$)	Payee address; City; State; Zip C	ode			
\$8,197.00	190 Monroe Ave Ste 300				
Expenditure from corporate funds	Grand Rapids, MI 49503				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Stan Lambert HD71			
		Three of the second state of the second seco			
Complete ONLY if direct	Candidate/Officeholder name Office so	l ught Office held			
expenditure to benefit C/OI		epresentative District 71			
Date	Payee name				
02/23/2024	Rural AMFM LLC				
Amount (\$)	Payee address; City; State; Zip C	ode			
\$7,794.00	190 Monroe Ave Ste 300				
. , -					
Expenditure from corporate funds	Grand Rapids, MI 49503				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		IE Radio Buy Oppose Drew Darby HD72			
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held			
expenditure to benefit C/OH Darby, Drew State Representative District 72					
		I			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politic Credit Card Payment	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 91/104 Rpt:	AFC Victory Fund 00088032
4 Date	5 Payee name
02/23/2024	Rural AMFM LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$13,961.00	190 Monroe Ave Ste 300
Expenditure from corporate funds	Grand Rapids, MI 49503
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense IE Radio Buy Oppose Steve Allison HD121
	ie Radio Bdy Oppose Steve Allison (1821
Complete CNI V if direct	Candidate/Officeholder name Office cought Office hold
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H Allison, Steve State Representative District 121
,	Allison, Steve State Representative District 121
Date	Payee name
02/06/2024	Thomas Graphics Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$11,675.64	PO Box 14226
Expenditure from corporate funds	Austin, TX 78714
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
	Check if Austin, TX, officeholder living expense
	IE Mail Support Ellen Troxclair HD19
0 1: 0:::::::::::::::::::::::::::::::::	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H. Trovelsir, Ellen State Depresentative District 19
	Troxclair, Ellen State Representative District 19
Date	Payee name
02/06/2024	Thomas Graphics Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$4,604.55	PO Box 14226
Expenditure from corporate funds	Austin, TX 78714
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	IE Mail Support Jacey Jetton HD26
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H Jetton, Jacey State Representative District 26

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense
Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to o	complete this form.				
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 92/104 Rpt:	AFC Victory Fund	00088032				
4 Date	5 Payee name	•				
02/06/2024	Thomas Graphics Inc.					
6 Amount (\$)	7 Payee address; City; State; Zip C	Code				
\$5,132.60	PO Box 14226					
Expenditure from corporate funds	Austin, TX 78714					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		IE Mail Support Candy Noble HD89				
		12 mail capport candy residence				
9 Complete ONLY if direct	Candidate/Officeholder name Office so	L ought Office held				
expenditure to benefit C/O	1	epresentative District 89				
Date	Payee name					
02/06/2024	Thomas Graphics Inc.					
Amount (\$)	Payee address; City; State; Zip C	Coda				
\$6,735.72	PO Box 14226	Soute				
Ψ0,133.12	FO DOX 14220					
Expenditure from corporate funds	Austin, TX 78714					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		IE Mail Support Lynn Stucky HD64				
Complete ONLY if direct	Candidate/Officeholder name Office so	Dught Office held				
expenditure to benefit C/O	H Stucky, Lynn State R	epresentative District 64				
Date	Payee name					
02/06/2024	Thomas Graphics Inc.					
Amount (\$)	Payee address; City; State; Zip C	Code				
\$4,416.37	PO Box 14226					
÷ ·, · · 2 · · · ·						
Expenditure from corporate funds	Austin, TX 78714					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense IE Mail Support Stephanie Klick HD91				
		12 mail support stophanic Mick (1891				
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so	L ought Office held				
expenditure to benefit C/O	1	epresentative District 91				
	·					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 93/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	
02/06/2024	Thomas Graphics Inc.	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$4,981.59	PO Box 14226	
Expenditure from corporate funds	Austin, TX 78714	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	3 100	Check if Austin, TX, officeholder living expense
		IE Mail Support Alex Kamkar HD29
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soil	-
experientare to benefit Great	¹ Kamkar, Alex State Re	epresentative District 29
Date	Payee name	
02/12/2024	Thomas Graphics Inc.	
Amount (\$)	Payee address; City; State; Zip C	ode
\$11,675.64	PO Box 14226	
Expenditure from corporate funds	Austin, TX 78714	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
LA LIBITOR		Check if Austin, TX, officeholder living expense
		IE Mail Support Ellen Troxclair HD19
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI	1	epresentative District 19
D-11-		presentative District 15
Date 02/12/2024	Payee name	
	Thomas Graphics Inc.	
Amount (\$)	Payee address; City; State; Zip C	ode
\$4,604.55	PO Box 14226	
Expenditure from		
corporate funds	Austin, TX 78714	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Mail Support Jacey Jetton HD26
		a cappert cases, cons
Complete ONLY if direct	Candidate/Officeholder name Office so	Lught Office held
expenditure to benefit C/OI	1	epresentative District 26
		P

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

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

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 95/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	·
02/12/2024	Thomas Graphics Inc.	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$4,981.59	PO Box 14226	
Expenditure from		
corporate funds	Austin, TX 78714	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Mail Support Alex Kramkar HD29
9 Complete ONLY if direct	Candidate/Officeholder name Office sor	ught Office held
expenditure to benefit C/O	H Kamkar, Alex State Re	epresentative District 29
Date	Payee name	
02/20/2024	Thomas Graphics Inc.	
Amount (\$)	Payee address; City; State; Zip C	ode
\$11,675.64	PO Box 14226	
Expenditure from		
corporate funds	Austin, TX 78714	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Mail Support Troxclair, Ellen HD19
Complete ONLY if direct	Candidate/Officeholder name Office sor	ught Office held
expenditure to benefit C/OI	H Troxclair, Ellen State Re	epresentative District 19
Date	Payee name	
02/20/2024	Thomas Graphics Inc.	
Amount (\$)	Payee address; City; State; Zip C	ode
\$4,604.55	PO Box 14226	
Expenditure from		
corporate funds	Austin, TX 78714	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Mail Support Jacey Jetton HD26
		,
Complete ONLY if direct	Candidate/Officeholder name Office sor	ught Office held
expenditure to benefit C/O	H Jetton, Jacey State Re	epresentative District 26

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 96/104 Rpt:	AFC Victory Fund	00088032				
4	Date	5 Payee name					
	02/20/2024	Thomas Graphics Inc.					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$5,132.60	PO Box 14226					
	Expenditure from corporate funds	Austin, TX 78714					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Advertising Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense				
		, <u> </u>	ort Candy Noble HD89				
		in in a suppose	nt canay Nobio 11200				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/OF	Noble, Candy State Representative Distri	ct 89				
	Date	Payee name					
	02/20/2024	Thomas Graphics Inc.					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$6,735.72	PO Box 14226					
	Expenditure from corporate funds	Austin, TX 78714					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Advertising Expense	eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense				
			pport Lynn Stucky HD64				
		in Mail Suppo	on Lynn Stacky 11504				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/OF	Stucky, Lynn State Representative Distri	ct 64				
	Date	Payee name					
	02/20/2024	Thomas Graphics Inc.					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$4,416.37	PO Box 14226					
_	T Expenditure from						
<u></u>	☐ corporate funds	Austin, TX 78714					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Taylor Complete Cahadula T				
	EXPENDITURE	/ dvertising Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense				
			ort Stephanie Klick HD91				
			•				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/OH	Klick, Stephanie State Representative Distri	ct 91				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.				
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 97/104 Rpt:	AFC Victory Fund	00088032				
4 Date	5 Payee name	•				
02/20/2024	Thomas Graphics Inc.					
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode				
\$4,981.59	PO Box 14226					
E constitue de ference						
Expenditure from corporate funds	Austin, TX 78714					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.				
LAI LIIDITOIL		Check if Austin, TX, officeholder living expense IE Mail Support Alex Kamkar HD29				
		ie Iviali Support Alex Kallikai HD29				
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	lught Office held				
expenditure to benefit C/OI	1	epresentative District 29				
Date		·				
02/16/2024	Payee name Uptown Solutions LLC					
Amount (\$)	Payee address; City; State; Zip Co	oda				
\$1,000.00	2414 19th St NW #34	nie –				
Ψ±,000.00	2414 1341 361444 #34					
X Expenditure from corporate funds	Washington, DC 20009					
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Strategic Consulting				
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held				
expenditure to benefit C/O	1					
Date	Payee name					
02/13/2024	Victory Text LLC					
Amount (\$)	Payee address; City; State; Zip Co	ode				
\$728.07	190 Monroe Ave NW					
— Evanditura from	Ste. 300					
Expenditure from corporate funds	Grand Rapids, MI 49503					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense IE Digital Ads Support Ellen Troxclair HD19				
		IL Digital Aus Support Elicit Hotolait HD10				
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	Lught Office held				
	expenditure to benefit C/OH Troxclair, Ellen State Representative District 19					
		<u>:</u>				

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

Credit Card Payment	The Instruction Guide explains how to c	complete this form.				
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 98/104 Rpt:	AFC Victory Fund	00088032				
4 Date	5 Payee name	•				
02/13/2024	Victory Text LLC					
6 Amount (\$)	7 Payee address; City; State; Zip C	Code				
\$330.96	190 Monroe Ave NW					
— Funcionalitura from	Ste. 300					
Expenditure from corporate funds	Grand Rapids, MI 49503					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense IE Digital Ads Support Jacey Jetton HD26				
		TE Digital Aus Support succy setton (1020				
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Dught Office held				
expenditure to benefit C/OI		epresentative District 26				
Date	Payee name	<u>'</u>				
02/13/2024	Victory Text LLC					
Amount (\$)	Payee address; City; State; Zip C	`ode				
\$376.67	190 Monroe Ave NW	.oue				
Ψοι σ.σ.	Ste. 300					
Expenditure from	Grand Rapids, MI 49503					
corporate funds	·	[na =				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense				
		IE Digital Ads Support Candy Noble HD89				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	•				
experiulture to beliefit 6/01	Noble, Candy State R	epresentative District 89				
Date	Payee name					
02/13/2024	Victory Text LLC					
Amount (\$)	Payee address; City; State; Zip C	code				
\$462.35	190 Monroe Ave NW					
Expenditure from	Ste. 300					
corporate funds	Grand Rapids, MI 49503					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense IE Digital Ads Support Lynn Stucky HD64				
		ie bigital Add Support Eyilli Stacky 11504				
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so	Lought Office held				
	expenditure to benefit C/OH Stucky, Lynn State Representative District 64					
		<u>'</u>				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
rertising Expense Event Expense Loan Repayment/Reimbu

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

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

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

Candidate/Officenolder/Politica Credit Card Payment	The Instruction Guide explains how to c	complete this form.					
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
Sch: 99/104 Rpt:	AFC Victory Fund	00088032					
4 Date	5 Payee name	•					
02/13/2024	Victory Text LLC						
6 Amount (\$)	7 Payee address; City; State; Zip C	code					
\$338.59	190 Monroe Ave NW						
E constitue de faces	Ste. 300						
Expenditure from corporate funds	Grand Rapids, MI 49503						
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description					
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		IE Digital Ads Support Stephanie Klick HD91					
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held					
expenditure to benefit C/OI	H Klick, Stephanie State Re	epresentative District 91					
Date	Payee name						
02/13/2024	Victory Text LLC						
Amount (\$)	Payee address; City; State; Zip C	Code					
\$339.64	190 Monroe Ave NW						
	Ste. 300						
Expenditure from corporate funds	Grand Rapids, MI 49503						
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description					
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		IE Digital Ads Support Alex Kamkar HD29					
		-					
Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held					
expenditure to benefit C/OI	H Kamkar, Alex State Re	epresentative District 29					
Date	Payee name						
02/22/2024	Victory Text LLC						
Amount (\$)	Payee address; City; State; Zip C	Code					
\$1,874.46	190 Monroe Ave NW						
	Ste. 300						
Expenditure from corporate funds	Grand Rapids, MI 49503						
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description					
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.					
LAFLINDITORL		Check if Austin, TX, officeholder living expense					
		IE Digital Ads Support Ellen Troxclair HD19					
Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held					
expenditure to benefit C/OI		epresentative District 19					
	110/004., 2						

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Gift/Award Legal Sen	erage Expense ds/Memorials Exp vices truction Guid			xpense Vages/	e /Contract Labor		Travel on District Travel Out of D OTHER (enter	istrict	listed above)		
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID	(Ethics C	ommission Filers)
	Sch: 100/104 Rpt:		AFC Victory								00088032		
4	Date	5	Payee name										
	02/22/2024		Victory Tex	t LLC									
6	Amount (\$)	7	Payee addre	ss; (City;	State;	Zip Co	de					
	\$859.74		190 Monroe	e Ave N	W								
			Ste. 300										
$ \Box$	Expenditure from corporate funds		Grand Rap	ids, MI 4	49503								
8	PURPOSE	(a)	Catagory					(h)	Description				
ľ	OF	(~,	Category _{(S} Advertising			op of this sche	eaule)	(5)	_ :	outsio	de of Texas. Cor	nplete Schedu	lle T.
	EXPENDITURE		ravertioning	Схропс	50				Check if Austin,	, TX,	officeholder livin	g expense	
									IE Digital Ads	Sι	ipport Jace	y Jetton I	HD26
	Complete ONLY if direct		Candidate/Off	iceholde	r name	0	ffice sou	ght			Office h	eld	
	expenditure to benefit C/OI	┨,	Jetton, Jace	y		S	tate Re	pres	entative Distri	ict 2	26		
	Date		Payee name										
	02/22/2024		Victory Tex	t LLC									
H	Amount (\$)		Payee addre	ss: (City;	State:	Zip Co	de					
	\$988.26		190 Monroe	-	•	,							
	4000.20		Ste. 300	3711011	••								
Ιп	Expenditure from			Salas NAI	40500								
쁘	corporate funds		Grand Rap										
	PURPOSE OF	(a)	Category (S			op of this sche	edule)	(b)	Description				
	EXPENDITURE		Advertising	Expens	se						de of Texas. Cor officeholder livin		lle T.
									IE Digital Ads				HD89
									g.tot. / toto			.,	200
H	Complete ONLY if direct		Candidate/Off	iceholde	r name		office sou	aht			Office h	eld	
	expenditure to benefit C/OI		Noble, Cand					-	entative Distri	ict 8			
\vdash	Dete	_		-									
ı	Date		Payee name										
	02/22/2024		Victory Tex										
'	Amount (\$)		Payee addre		City;	State;	Zip Co	de					
	\$1,236.90		190 Monro	e Ave N	W								
<u> </u>	Expenditure from		Ste. 300										
Ш	corporate funds		Grand Rap	ids, MI 4	49503								
	PURPOSE	(a)	Category (S	ee Categor	ies listed at the t	op of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Advertising				,		Check if travel of	outsio	de of Texas. Cor	nplete Schedu	lle T.
	EXPENDITORE								_		officeholder livin		
									IE Digital Ads	Sι	ipport Lynn	Stucky F	1D64
<u> </u>													
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off		r name		office sou	•			Office h	eld	
	experientare to beliefft C/Of	' '	Stucky, Lynr	1		S	tate Re	pres	entative Distri	ict (o4		
Forr	ns provided by Texas F	thic	cs Commissi	on	\\\\\	w ethics s	tate ty u	ıs				Version '	V3 5 1 5b35d027

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

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

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

Credit Card Layment	The Instruction Guide explains how to	complete this form.				
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 102/104 Rpt:	AFC Victory Fund	00088032				
4 Date	5 Payee name	·				
02/23/2024	Victory Text LLC					
6 Amount (\$)	7 Payee address; City; State; Zip (Code				
\$666.19	190 Monroe Ave NW					
Expenditure from	Ste. 300					
corporate funds	Grand Rapids, MI 49503					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense IE Digital Ads Support Ellen Troxclair HD19				
		TE Digital / ldd Support Ellott 115/2014.11525				
9 Complete ONLY if direct	Candidate/Officeholder name Office s	ought Office held				
expenditure to benefit C/OI	H Troxclair, Ellen State Representative District 19					
Date	Payee name					
02/23/2024	Victory Text LLC					
Amount (\$)	Payee address; City; State; Zip (Code				
\$305.83	190 Monroe Ave NW					
	Ste. 300					
Expenditure from corporate funds	Grand Rapids, MI 49503					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense IE Digital Ads Support Jacey Jetton HD26				
		IL Digital Aus Support Succey Setton 11020				
Complete ONLY if direct	Candidate/Officeholder name Office s	L ought Office held				
expenditure to benefit C/OI	^H Jetton, Jacey State F	Representative District 26				
Date	Payee name					
02/23/2024	Victory Text LLC					
Amount (\$)	Payee address; City; State; Zip (Code				
\$349.65	190 Monroe Ave NW					
	Ste. 300					
Expenditure from corporate funds	Grand Rapids, MI 49503					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense IE Digital Ads Support Candy Noble HD89				
		12 Digital Add Support Carlay Noble 11509				
Complete ONLY if direct	Candidate/Officeholder name Office s	ought Office held				
expenditure to benefit C/O		Representative District 89				

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 103/104 Rpt:	AFC Victory Fund	00088032
4 Date	5 Payee name	•
02/23/2024	Victory Text LLC	
6 Amount (\$)	7 Payee address; City; State; Zip C	Code
\$430.43	190 Monroe Ave NW	
	Ste. 300	
Expenditure from corporate funds	Grand Rapids, MI 49503	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
LAI LIIDITORE		Check if Austin, TX, officeholder living expense
		IE Digital Ads Support Lynn Stucky HD64
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Dught Office held
expenditure to benefit C/OI		epresentative District 64
Date		
02/23/2024	Payee name Victory Text LLC	
Amount (\$)	Payee address; City; State; Zip C	Code
\$309.33	190 Monroe Ave NW	
Expenditure from	Ste. 300	
corporate funds	Grand Rapids, MI 49503	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		IE Digital Ads Support Stephanie Klick HD91
		To Signal 7 do Support Stephania 1 mon 1 2 2 2
Complete ONLY if direct	Candidate/Officeholder name Office so	Dught Office held
expenditure to benefit C/OI	H Klick, Stephanie State R	epresentative District 91
Date	Payee name	
02/23/2024	Victory Text LLC	
Amount (\$)	Payee address; City; State; Zip C	Code
\$320.18	190 Monroe Ave NW	
	Ste. 300	
Expenditure from corporate funds	Grand Rapids, MI 49503	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
		IE Digital Ads Support Alex Kamkar HD29
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	-
experiorure to benefit C/Oi	T Kamkar, Alex State R	epresentative District 29

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee L	Food/Beverage Expense Sift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.	Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 104/104 Rpt:	AFC Victory I	Fund		00088032
4	Date	5 Payee name			
	02/23/2024	Victory Text I	LLC		
6	Amount (\$)	7 Payee address	s; City; State;	Zip Code	
	\$499.10	190 Monroe			
		Ste. 300			
	Expenditure from corporate funds	Grand Rapid	s, MI 49503		
8	PURPOSE	(a) Category (See	e Categories listed at the top of this sche	(b) Description	
	OF EXPENDITURE	Advertising E		· · · · · ·	outside of Texas. Complete Schedule T.
	EXPENDITORE			 	, TX, officeholder living expense
				IE Digital Ads	S Support Kronda Thimesch HD65
_	Complete ONLY !f allower	Candidate/Office	abaldar narra	ffine equals	Office held
9	Complete ONLY if direct expenditure to benefit C/OI			ffice sought tate Representative Distr	Office held

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 124/124 AFC Victory Fund 00088032 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS \$ 0.00 5 Date Payee name 02/25/2024 American Federation for Children Inc. Amount (\$) Payee address; City; State; Zip Code 10440 Little Patuxent Pkwy \$48,242.59 Ste. 300-343 Expenditure from Columia, MD 21044 corporate funds TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff Usage 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH