CORRECTION/AMENDMENT AFFIDAVIT FORM COR-DCE FOR DIRECT CAMPAIGN EXPENDITURES Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00088636 56 Date Received 3 FILER NAME Raise Your Hand Texas **ELECTRONICALLY FILED** 03/28/2024 Date Hand-delivered or Date Postmarked ORIGINAL January 15 Runoff REPORT TYPE Receipt # Amount July 15 10th day after campaign treasurer resignation 30th day before election Dissolution report Date Processed Other (specify) 8th day before election ORIGINAL PERIOD Month Day Year Month Day Year Date Imaged **COVERED THROUGH** 01/26/2024 02/24/2024 **EXPLANATION OF CORRECTION** Worked with Ethics Commission staff to correct filer name to match filer ID AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check the box next to any and all applicable statements: Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. Signature of Campaign Treasurer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said ____, this the ____ _____, 20_____, to certify which, witness my hand and seal of office. Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath Remember To Attach Any Part Of The Campaign Finance Report Form **Needed To Report And Explain Corrections**

FORM DCE COVER SHEET PG 1

The DCE leaderstice Cuide symbolic bounds and lead this form 1 Filer ID 2 Total pages filed:									
The DCE Instruction Guide explains how to con	nplete this form.	(Ethics Commission File 00088636	ers)	56					
3 FILER NAME MS / MRS / MR	FIRST	MI	OFFICE U	SE ONLY					
NICKNAME	LAST	SUFFIX	Date Received ELECTRONICALLY FILED						
	Raise Your Ha	and Texas		03/28/2024					
4 FILER ADDRESS ADDRESS / PO BOX;	APT / SUITE #; CIT	TY; STATE;	ZIP CODE						
1005 Congress Ave				Date Hand-delivered or I	Date Postmarked				
Change of Address Austin, TX 78701				Receipt #	Amount				
	HONE NUMBER	EXTENSION		Date Processed					
(512) 265-8543 6 REPORT TYPE January 15									
		Oth day before election		Date Imaged					
July 15		h day before election							
	L R	unoff							
7 PERIOD Month Day Ye COVERED 01/26/2024	ear Ti	HROUGH	Month Day 02/24/2024	Year 4					
01/20/2024			02/24/202	7					
8 ELECTION DAT	l —	🗖	ELECTION T						
Month Day Ye 03/05/2024			Runoff	Other					
		General	Special						
9 FILER 1. Candidates ACTIVITY (Identify by page or if	A. Supported								
(Identify by name or, if applicable, classify by party.)									
(Attach lists on plain paper to	B. Opposed								
complete this report if									
necessary.) 2. Measures	A. Supported								
(Describe by date and location of election and nature of issue.)									
	B. Opposed								
3. Officeholders Assisted	N	lr. Stephen Allison S	State Represent	ative					
(Identify by name or, if									
applicable, classify by party.)									
	GO .	TO PAGE 2							

FORM DCE COVER SHEET PG 2

10 FILER NAME			11 Filer ID	(Ethics Commission Filers)
Raise Your Hand T	exas		00088636	
12 EXPENDITURE TOTALS	1. TOTAL UNITEM	IIZED POLITICAL EXPENDITURES	\$	0.00
	2. TOTAL POLIT	ICAL EXPENDITURES	\$	48,196.17
13 AFFIDAVIT	<u> </u>		<u> </u>	
		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	all information required	ccompanying report is to be reported by me
			Signature of Filer	
			or I with authority to sign o	n hehalf of entity
			nly if Filer is an entity)	Theriair of Chity
		(C	.,, ,	
AFFIX NOTARY ST	AMP / SEAL ABOVE			
		idrtify which, witness my hand and seal of office.	, this the	day
Signature of office	er administering oath	Printed name of officer administering oath	Title of office	er administering oath

FORM DCE ADDENDUM

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10 FILER NAME				11 Filer ID	(Ethics Commission Filers)
Raise Your Hand Texa	S			00088636	
12 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			
	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)		Mr. Ernest Bailes State Represe	ntative	
12 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			
	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)		Mr. Gregory Bell State Represen	ntative	
12 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			
	2. Measures (describe by date and location of election and nature of issue)	A. Supported			
		B. Opposed			
	Officeholders Assisted (identify by name or, if		Mr. DeWayne Burns State Repre	esentative	
	applicable, classify by party)				

FORM DCE ADDENDUM

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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 (describe by party) 2. COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 1. Candidates (desertly by name or, if applicable, classify by party) (Attach lists on plain paper to complete this report if necessary.) 2. Measures (desertly by name or, if applicable, classify by party) 2. Measures (desertly by date and location of election and nature of issue) 3. Officeholders Assisted (desertly by date and location of election and nature of issue) 3. Officeholders Assisted (desertly by date and location of election and nature of issue) 4. Supported (desertly by name or, if applicable, classify by party) B. Opposed 1. Candidates (desertly by name or, if applicable, classify by party) A. Supported (desertly by name or, if applicable, classify by party) A. Supported (desertly by name or, if applicable, classify by party) A. Supported (desertly by name or, if applicable, classify by party) A. Supported (desertly by name or, if applicable, classify by party) A. Supported (desertly by name or, if applicable, classify by party) A. Supported (desertly by name or, if applicable, classify by party) A. Supported (desertly by name or, if applicable, classify by party)	10 FILER NAME				11 Filer ID	(Ethics Commission Filers)
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paper to complete this report if necessary.) 2. Measures (describe by data and location of election and nature of issue) 3. Officeholders Assisted didentify by name or, if applicable, classify by party) 12. COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (describe by date and location of heaten and nature of issue) 3. Officeholders A Supported didentify by name or, if applicable, classify by party) B. Opposed A. Supported didentify by name or, if applicable, classify by party) B. Opposed A. Supported didentify by name or, if applicable, classify by party) A. Supported didentify by name or, if applicable, classify by party) B. Opposed A. Supported didentify by name or, if applicable, classify by party) B. Opposed A. Supported didentify by name or, if applicable, classify by party) B. Opposed A. Supported didentify by name or, if applicable, classify by party) B. Opposed A. Supported didentify by name or, if applicable, classify by party)		(identify by name or, if				
Committee Comm	paper to complete this		B. Opposed			
3. Officeholders Assisted (dentify by name or, if applicable, classify by party) 12 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 12. Measures (describe by date and location of election and nature of issue) 13. Officeholders A. Supported 14. Supported 15. Opposed 16. Opposed 17. Justin Holland State Representative A. Supported B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed 16. Thugh Shine State Representative Assisted (dentify by name or, if applicable, classify by party) 17. Candidates (dentify by name or, if applicable, classify by party) A. Supported		(describe by date and location of election and	A. Supported			
Assisted (identify by name or, if applicable, classify by party) 12 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) 3. Officeholders Assisted (identify by name or, if applicable, classify by party) 3. Officeholders Assisted (identify by name or, if applicable, classify by party) 12 COMMITTEE ACTIVITY 1. Candidates (identify by name or, if applicable, classify by party) A. Supported Mr. Hugh Shine State Representative A. Supported			B. Opposed			
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) 12 COMMITTEE ACTIVITY (Identify by name or, if applicable, classify by party) [Identify by name or, if applicable, classify by party) A. Supported Mr. Hugh Shine State Representative A. Supported A. Supported A. Supported A. Supported		Assisted (identify by name or, if		Mr. Justin Holland State Represe	entative	
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) 12 COMMITTEE ACTIVITY 1. Candidates (identify by name or, if applicable, classify by party) A. Supported Mr. Hugh Shine State Representative Mr. Hugh Shine State Representative A. Supported		(identify by name or, if				
(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) 12 COMMITTEE ACTIVITY 1. Candidates (identify by name or, if applicable, classify by party) A. Supported	paper to complete this		B. Opposed			
3. Officeholders Assisted (identify by name or, if applicable, classify by party) 12 COMMITTEE ACTIVITY 1. Candidates (identify by name or, if applicable, classify by party) A. Supported		(describe by date and location of election and	A. Supported			
Assisted (identify by name or, if applicable, classify by party) 12 COMMITTEE ACTIVITY 1. Candidates (identify by name or, if applicable, classify by party) A. Supported			B. Opposed			
ACTIVITY (identify by name or, if applicable, classify by party)		Assisted (identify by name or, if		Mr. Hugh Shine State Represent	tative	
(Attach lists on plain						
paper to complete this report if necessary.)	(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		(describe by date and location of election and	A. Supported			
B. Opposed			B. Opposed			
3. Officeholders Assisted (identify by name or, if		Assisted (identify by name or, if		Mr. Reginald Smith State Repres	sentative	
àpplicable, classify by party)		applicable, classify by party)				

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10 FILER NAME				11 Filer ID	(Ethics Commission Filers)
Raise Your Hand Texa	ıs			00088636	
12 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			
	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)		Mr. Drew Darby State Represent	tative	
12 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			
	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)		Mr. Charles Geren State Represe	entative	
12 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			
	Measures (describe by date and location of election and nature of issue)	A. Supported			
		B. Opposed			
	Officeholders Assisted (identify by name or, if		Mr. Travis Clardy State Represer	ntative	
	applicable, classify by party)				

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10 FILER NAME				11 Filer ID	(Ethics Commission Filers)
Raise Your Hand Texas	S			00088636	
12 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			
	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)		Mr. Jay Dean State Representa	tive	
12 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			
	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)		Mr. John Kuempel State Repres	sentative	
12 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			
	2. Measures (describe by date and location of election and nature of issue)	A. Supported			
		B. Opposed			
	Officeholders Assisted (identify by name or, if		Mr. Kenneth King State Represe	entative	
	applicable, classify by party)				

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10 FILER NAME				11 Filer ID	(Ethics Commission Filers)
Raise Your Hand Texas	5			00088636	
12 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			
	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)		Mr. Standard Lambert State Rep	presentative	
12 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			
	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)		Mr. Gary VanDeaver State Repre	esentative	
12 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			
	2. Measures (describe by date and location of election and nature of issue)	A. Supported			
		B. Opposed			
	Officeholders Assisted (identify by name or, if		Mr. Trenton Ashby State Repres	entative	
	applicable, classify by party)				

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10 FILER NAME				11 Filer ID	(Ethics Commission Filers)
Raise Your Hand Texas	6			00088636	
12 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			
	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)		Mr. David Spiller State Represer	ntative	
12 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			
	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)		Mr. Frederick Frazier State Repr	resentative	
12 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			
	2. Measures (describe by date and location of election and nature of issue)	A. Supported			
		B. Opposed			
	Officeholders Assisted (identify by name or, if		Mr. William Metcalf State Repres	sentative	
	applicable, classify by party)				

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10 FILER NAME				11 Filer ID	(Ethics Commission Filers)
Raise Your Hand Texas	3			00088636	
12 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			
	2. Measures (describe by date and location of election and nature of issue)	A. Supported B. Opposed			
		2. Oppoo od			
	3. Officeholders Assisted (identify by name or, if applicable, classify by party)		Mr. Venton Jones State Represe	entative	
12 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			
	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)		Erin Zwiener State Representati	ive	
12 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			
	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)		Mr. Christian Hayes State Repre	esentative	

S	UBT	OTALS - DCE	FORM DCE	
			CO	OVER SHEET PG 3 11 of 56
	LER NAI aise Yo	ME Ir Hand Texas	15 Filer ID 00088636	(Ethics Commission Filers)
		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	X	SCHEDULE F1: POLITICAL EXPENDITURES		\$ 48,196.17
2.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
3.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Wages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Cabadula F1:	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 1/45 Rpt: 12/56	Raise Your Hand Texas	3 Filer ID (Ethics Commission Filers) 00088636
4 Date	5 Payee name	·
02/16/2024	InFocus Campaigns	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$49.35	700 K Street NW	
Expenditure from	STE 300	
x corporate funds	Washington DC, DC 20001	
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.
		Robocalls into district
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI	H Bell, Keith State R	epresentative District 4 State Representative District 4
Date	Payee name	
02/16/2024	InFocus Campaigns	
Amount (\$)	Payee address; City; State; Zip C	ode
\$44.94	700 K Street NW	
— Constantitude forms	STE 300	
X Expenditure from corporate funds	Washington DC, DC 20001	
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.
		Robocalls into district
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI	H Dean, Jay State R	epresentative District 7 State Representative District 7
Date	Payee name	
02/16/2024	InFocus Campaigns	
Amount (\$)	Payee address; City; State; Zip C	ode
\$245.37	700 K Street NW	
Expenditure from	STE 300	
corporate funds	Washington DC, DC 20001	
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.
		Robocalls into district
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI		epresentative District 9 State Representative District 9

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/Political Credit Card Payment		nmittee	Gift/Awards Legal Serv	erage Expense ds/Memorials Expe vices truction Guide			kpens /ages	e /Contract Labor		Trave	el in District el Out of Dis ER (enter a	strict	ory not listed	above)	
1	Total pages Schedule F1:	2	FILER NAME	=						3	File	r ID	(Eth	nics Commi	ission Filers)	
	Sch: 2/45 Rpt: 13/56		Raise Your	Hand T	exas						000	88636				
4	Date	5	Payee name							1						_
,	02/16/2024	1	InFocus Ca		s											
6	Amount (\$)	7	Payee addres	ss; (City;	State;	Zip Co	de								
	\$170.61		700 K Stree		•		•									
			STE 300													
Χ	Expenditure from corporate funds		Washington	ı DC, D	C 20001											
8		⊢	Category (Se	·		of this sche	adula)	(b)	Description							
-	OF		Advertising			D OI HIIS SCHE	dule)	ι-,	Check if travel	outsi	de of 1	Гехаs. Com	iplete S	Schedule T.		
	EXPENDITURE			•					—							
									Robocalls in	to d	istric	t				
		L														
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi		name		office sou	•	tativa Diat			Office he		totiv	- District	11
	·	_	Clardy, Travi	<u>S</u>			late Re	pres	sentative Dist	IICi .	TT	Sidile r	epie	esemaniv	e District :	
	Date	ı	Payee name													
	02/16/2024	_	InFocus Ca		S 											
	Amount (\$)		Payee addres	•	City;	State;	Zip Co	de								
	\$176.01		700 K Stree	et NW												
	Expenditure from		STE 300													
Х	corporate funds	L	Washington	1 DC, D0	C 20001											
	PURPOSE OF	(a)	Category (Se	ee Categori	es listed at the to	p of this sche	edule)	(b)	Description							_
	EXPENDITURE		Advertising	Expens	e				Check if travel	outsi	de of T	Texas. Com	iplete S	Schedule T.		
									Robocalls in	to di	istric	:t				
												-				
	Complete ONLY if direct		Candidate/Offi	iceholder	name		Office sou	ght				Office he	eld			
	expenditure to benefit C/OF	H 1	Metcalf, Will			S	tate Re	pres	entative Dist	rict :	16	State R	epre	esentativ	e District :	16
	Date	\sqcap	Payee name													_
	02/16/2024		InFocus Ca		s											
	Amount (\$)	_	Payee addres		City;	State;	Zip Co	de								
	\$154.59	1	700 K Stree	•	,											
		ı	STE 300													
Х	Expenditure from corporate funds		Washington	ı DC. D(C 20001											
		-						(h)	Description							
	OF		Category (See Advertising			p of this scne	:dule)	(10)	Check if travel	outsi	de of T	Гехаs. Com	iplete S	Schedule T.		
	EXPENDITURE		Advertising	Схропо					ш							
									Robocalls in	to di	istric	t				
		L														
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offi		name		office sou	•				Office he				_
	experiulture to benefit 6/6/	<u> </u>	Manuel, Chri	stian		S	tate Re	pres	sentative Dist	rict 2	22	State R	epre	esentativ	e District 2	22

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 Lahor

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: Sch: 3/45 Rpt: 14/56	FILER NAME Raise Your Hand Texas	3 Filer ID (Ethics Commission Filers) 00088636
4 Date 02/16/2024	5 Payee name InFocus Campaigns	·
6 Amount (\$) \$124.86 X Expenditure from corporate funds 8 PURPOSE	7 Payee address; City; State; Zip (700 K Street NW STE 300 Washington DC, DC 20001	(b) Description
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Robocalls into district
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so Zwiener, Erin State R	ought Office held epresentative District 45 State Representative District 45
Date 02/16/2024	Payee name InFocus Campaigns	
Amount (\$) \$108.42 X Expenditure from corporate funds	Payee address; City; State; Zip (700 K Street NW STE 300 Washington DC, DC 20001	Code
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. Robocalls into district
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so Frazier, Frederick State R	ought Office held epresentative District 61 State Representative District 61
Date 02/16/2024	Payee name InFocus Campaigns	
Amount (\$) \$238.62 X Expenditure from corporate funds	Payee address; City; State; Zip (700 K Street NW STE 300 Washington DC, DC 20001	Code
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. Robocalls into district
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so Spiller, David State R	Dught Office held Dught Office held Dught State Representative District 68

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Ex Legal Services The Instruction Guid			ense ges/Contract Labor	Tra	wel Out of District HER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAMI	<u> </u>				3 File	er ID (Ethics Commission Filers)
	Sch: 4/45 Rpt: 15/56	Raise Your	Hand Texas				00	088636
4	Date	5 Payee name						
	02/16/2024	InFocus Ca	ımpaigns					
6	Amount (\$)	7 Payee addre	ess; City;	State;	Zip Cod	е		
	\$223.02	700 K Stree	et NW					
	- Evnanditura from	STE 300						
Х	Expenditure from corporate funds	Washington	n DC, DC 20001					
8	PURPOSE	(a) Category (S	ee Categories listed at the	top of this sche	edule) (b) Description		
	OF EXPENDITURE	Advertising	Expense			Check if travel	outside o	f Texas. Complete Schedule T.
						Robocalls int	o distr	ict
9	Complete ONLY if direct	Candidate/Off	iceholder name	0	office soug	ht		Office held
	expenditure to benefit C/O	Lambert, Sta	an	S	tate Rep	resentative Distr	ict 71	State Representative District 71
	Date	Payee name						
	02/16/2024	InFocus Ca	ımpaigns					
	Amount (\$)	Payee addre	ess; City;	State;	Zip Cod	e		
	\$233.52	700 K Stree	et NW					
	- Formanditure from	STE 300						
X	Expenditure from corporate funds	Washingto	n DC, DC 20001					
	PURPOSE	(a) Category (S	ee Categories listed at the	top of this sche	edule) (b) Description		
	OF EXPENDITURE	Advertising	Expense			Check if travel	outside o	f Texas. Complete Schedule T.
						Robocalls int	o Distr	rict
	Complete ONLY if direct		iceholder name	0	office soug	ht		Office held
	expenditure to benefit C/O	Darby, Drew	,	S	tate Rep	resentative Distr	ict 72	State Representative District 72
	Date	Payee name						
	02/16/2024	InFocus Ca	ımpaigns					
	Amount (\$)	Payee addre	ess; City;	State;	Zip Cod	e		
	\$299.85	700 K Stree	et NW					
	- Evnanditura from	STE 300						
X	Expenditure from corporate funds	Washingto	n DC, DC 20001					
	PURPOSE	(a) Category (S	ee Categories listed at the	top of this sche	edule) (b) Description		
	OF EXPENDITURE	Advertising	Expense			Check if travel	outside o	f Texas. Complete Schedule T.
						Robocalls int	n distr	ict
						Nobocano IIII	<i>อ</i> นเอแ	
	Complete ONLY if direct	Candidate/Off	iceholder name	0	office soug	ht		Office held
	expenditure to benefit C/O	d Geren, Char	lie			resentative Distr	ict 99	State 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		inting Expense Travel Out of District laries/Wages/Contract Labor OTHER (enter a category not listed above) I to complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/45 Rpt: 16/56	Raise Your Hand Texas	00088636
4 Date	5 Payee name	
02/16/2024	InFocus Campaigns	
6 Amount (\$)	7 Payee address; City; State; Zi	ip Code
\$109.02	700 K Street NW	
- Francistus from	STE 300	
X Expenditure from corporate funds	Washington DC, DC 20001	
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.
		Robocalls into district
9 Complete ONLY if direct		e sought Office held
expenditure to benefit C/Ol	H Jones, Venton Stat	e Representative District 100 State Representative District
Date	Payee name	
02/16/2024	InFocus Campaigns	
Amount (\$)	Payee address; City; State; Zi	ip Code
\$100.35	700 K Street NW	
- Formanditure from	STE 300	
Expenditure from corporate funds	Washington DC, DC 20001	
PURPOSE	(a) Category (See Categories listed at the top of this schedule	e) (b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
LAI LIIDI. GAL		Robocalls into district
		Robocans into district
Complete ONLY if direct	Candidate/Officeholder name Offic	te sought Office held
expenditure to benefit C/Ol		e Representative District 55 State Representative District 55
Data		
Date 02/16/2024	Payee name InFocus Campaigns	
Amount (\$)	Payee address; City; State; Zi	ip Code
\$5,103.12	700 K Street NW	
Expenditure from	STE 300	
x corporate funds	Washington DC, DC 20001	
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.
		Live calls, robo calls, and texts into district
Complete ONLY if direct		e sought Office held
expenditure to benefit C/O	H VanDeaver, Gary State	e Representative District 1 State Representative District 1

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 Salaries/Magnes/Contract Labor

Candidate/Officeholder/Politica Credit Card Payment	I Committee Le	gal Services he Instruction Guide e	Salaries/W	/ages/Contract Labor		IER (enter a	category not listed above)
1 Total pages Schedule F1:	2 FILER NAME				3 File	r ID	(Ethics Commission Filers)
Sch: 6/45 Rpt: 17/56	Raise Your H	and Texas			000	088636	
4 Date	5 Payee name						
02/16/2024	InFocus Cam	paigns					
6 Amount (\$)	7 Payee address	; City;	State; Zip Co	de			
\$4,705.45	700 K Street	WV					
	STE 300						
X Expenditure from corporate funds	Washington [OC, DC 20001					
8 PURPOSE	(a) Category (See	Categories listed at the top	of this schedule)	(b) Description			
OF EXPENDITURE	Advertising E			Check if travel	outside of	Texas. Com	olete Schedule T.
				Robocalls, Li	ive calls	s, and te	xts into district
9 Complete ONLY if direct	Candidate/Office	holder name	Office sou	ght		Office he	eld
expenditure to benefit C/OF	H Bailes, Ernest			oresentative Distr	rict 18	State R	epresentative District 18
Date	Payee name						
02/16/2024	InFocus Cam	paigns					
Amount (\$)	Payee address	; City;	State; Zip Co	de			
\$4,985.97	700 K Street	WW					
	STE 300						
X Expenditure from corporate funds	Washington [DC DC 20001					
PURPOSE				(b) Description			
OF	Advertising E	Categories listed at the top	of this schedule)		outside of	Texas. Comp	olete Schedule T.
EXPENDITURE	Advertising L	Aperise		Ш			
				Robocalls, Li	ve Call	s, & Tex	ts into district
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office		Office sou	9		Office he	
experiditure to benefit C/Or	¹ Holland, Justin		State Re	oresentative Distr	rict 33	State R	epresentative District 33
Date	Payee name						
02/16/2024	InFocus Cam	paigns					
Amount (\$)	Payee address	; City;	State; Zip Co	de			
\$4,979.08	700 K Street	WV					
	STE 300						
X Expenditure from corporate funds	Washington [OC, DC 20001					
PURPOSE	(a) Category (See	Categories listed at the top	of this schedule)	(b) Description			
OF EXPENDITURE	Advertising E		,		outside of	Texas. Comp	olete Schedule T.
EXPENDITORE				Robocalls, liv	⁄e calls	and text	s into district
Complete ONLY if direct	Candidate/Office	holder name	Office sou	ght		Office he	eld
expenditure to benefit C/O	H Kuempel, Johr	l	State Re	oresentative Distr	rict 44	State R	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 Barmont

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Cabadula F1:	·	<u>'</u>
1 Total pages Schedule F1: Sch: 7/45 Rpt: 18/56	Raise Your Hand Texas	3 Filer ID (Ethics Commission Filers) 00088636
4 Date	5 Payee name	•
02/16/2024	InFocus Campaigns	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de
\$5,033.04	700 K Street NW	
Expenditure from	STE 300	
corporate funds	Washington DC, DC 20001	
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.
		Robocalls, live calls, and texts into district
9 Complete ONLY if direct	Candidate/Officeholder name Office sout	ht Office held
expenditure to benefit C/OI	H Burns, DeWayne State Rep	resentative District 58 State Representative District 58
Date	Payee name	
02/16/2024	InFocus Campaigns	
Amount (\$)	Payee address; City; State; Zip Cod	de
\$5,370.20	700 K Street NW	
	STE 300	
X Expenditure from corporate funds	Washington DC, DC 20001	
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	Advertising Expense	
		Robocalls, live calls, and texts into district
2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		250
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	
experientare to benefit ever	Rogers, Glenn State Rep	resentative District 60 State Representative District 60
Date	Payee name	
02/16/2024	InFocus Campaigns	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$5,021.97	700 K Street NW	
	STE 300	
X Expenditure from corporate funds	Washington DC, DC 20001	
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		Robocalls, live calls, and texts into district
Complete ONLY if direct	Candidate/Officeholder name Office sout	ht Office held
expenditure to benefit C/OI	H Smith, Reggie State Rep	resentative District 62 State Representative 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing 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: 8/45 Rpt: 19/56	Raise Your Hand Texas 00088636
4 Date	5 Payee name
02/16/2024	InFocus Campaigns
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4,981.53	700 K Street NW
Expenditure from	STE 300
X Expenditure from corporate funds	Washington DC, DC 20001
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
	Robocalls, live calls, and texts into district
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	H Allison, Steve State Representative District 121 State Representative District
Date	Payee name
02/05/2024	Meta
Amount (\$)	Payee address; City; State; Zip Code
\$39.53	1 Hacker Way
Expenditure from	
x corporate funds	Menlo Park, CA 94025
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense
	Facebook Ads
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	H Rogers, Glenn (Dr.) State Representative District 60 State Representative District 60
Date	Payee name
02/05/2024	Meta
Amount (\$)	Payee address; City; State; Zip Code
\$38.16	1 Hacker Way
- "	
X Expenditure from corporate funds	Menlo Park, CA 94025
corporate funds PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
corporate funds	
corporate funds PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
corporate funds 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.
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Facebook Ads Candidate/Officeholder name Office sought Office held
corporate funds 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. Facebook Ads Candidate/Officeholder name Office sought 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 Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

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: 9/45 Rpt: 20/56	Raise Your Hand Texas 00088636
4 Date	5 Payee name
02/05/2024	Meta
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$39.12	1 Hacker Way
X Expenditure from corporate funds	Menlo Park, CA 94025
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense
	Facebook Ads
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/6	H Lambert, Stan State Representative District 71 State Representative District 71
Date	Payee name
02/05/2024	Meta
Amount (\$)	Payee address; City; State; Zip Code
\$39.77	1 Hacker Way
X Expenditure from corporate funds	Menlo Park, CA 94025
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
	Facebook Ads
	1 40000017140
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
02/05/2024	Meta
Amount (\$)	Payee address; City; State; Zip Code
\$39.18	1 Hacker Way
Expenditure from	
corporate funds	Menlo Park, CA 94025
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
LAI LIIDII OIL	Facebook Ada
	Facebook Ads
2 Li ONILVIS dine et	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H. Stove, Allicon, State Depresentative District 121
<u>'</u>	State 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services The Instruction Guide		Vages/Contract Labor mplete this form.	C	OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME	≣			3 F	iler ID	(Ethics Commission Filers)	_
	Sch: 10/45 Rpt: 21/56	Raise Your	Hand Texas			0	00088636		
4	Date	5 Payee name							
	02/05/2024	Meta							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode				
	\$38.74	1 Hacker W	/ay						
Χ	Expenditure from corporate funds	Menlo Park	, CA 94025						
8	PURPOSE	(a) Category (s	ee Categories listed at the to	n of this schedule)	(b) Description				_
	OF	Advertising		p or time conceduo)		outside	of Texas. Com	plete Schedule T.	
	EXPENDITURE	9	•		_				
					Facebook Ad	S			
9	Complete ONLY if direct		iceholder name	Office sou	ght		Office he	eld	
	expenditure to benefit C/OI	¹ Dean, Jay		State Re	presentative Distri	ct 7	State R	epresentative District 7	
	Date	Payee name							_
	02/05/2024	Meta							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode				_
	\$39.75	1 Hacker W	/ay						
Χ	Expenditure from corporate funds	Menlo Park	c, CA 94025						
	PURPOSE	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b) Description				
	OF EXPENDITURE	Advertising	Expense		Check if travel of	outside	of Texas. Com	plete Schedule T.	
					Facebook Ad	c			
					1 acebook Au	3			
	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	aht		Office he	ald.	_
	expenditure to benefit C/O				9	ct 62		epresentative District 62	2
	Data								_
	Date 02/05/2024	Payee name							
		Meta							_
	Amount (\$)	Payee addre		State; Zip Co	ode				
	\$38.93	1 Hacker W	/ay						
L.	Expenditure from								
Х	corporate funds	Menlo Park	a, CA 94025						
	PURPOSE OF	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b) Description				
	EXPENDITURE	Advertising	Expense		Check if travel of	outside	of Texas. Com	plete Schedule T.	
					Facebook Ad	ς			
					, account	_			
	Complete ONLY if direct	Candidate/∩ff	iceholder name	Office sou	<u>l</u> aht		Office he	eld	_
	expenditure to benefit C/O				presentative Distri	ct 99		epresentative District 99	9
			-	3.0					_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wanes/Contract Labor

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 11/45 Rpt: 22/56	2 FILER NAME Raise Your Hand Texas 3 Filer ID (Ethics Commission Filers) 00088636
4 Date 02/05/2024	5 Payee name Meta
6 Amount (\$) \$39.41	7 Payee address; City; State; Zip Code 1 Hacker Way
X Expenditure from corporate funds	Menlo Park, CA 94025
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. Facebook Ads
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Ken, King Office sought State Representative District 99 State Representative District 88
Date 02/05/2024	Payee name Meta
Amount (\$) \$40.37	Payee address; City; State; Zip Code 1 Hacker Way
corporate funds	Menlo Park, CA 94025
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. Facebook Ads
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held State Representative District 11 State Representative District 11
Date 02/05/2024	Payee name Meta
Amount (\$) \$40.30	Payee address; City; State; Zip Code 1 Hacker Way
X Expenditure from corporate funds	Menlo Park, CA 94025
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. Facebook Ads
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held State Representative District 55 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services The Instruction Guide explain:	Salaries/Wages/Contract Labor s how to complete this form.	OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 12/45 Rpt: 23/56	Raise Your Hand Texas		00088636
4 Date	5 Payee name		
02/05/2024	Meta		
6 Amount (\$)	7 Payee address; City; State	e; Zip Code	
\$40.14	1 Hacker Way		
X Expenditure from corporate funds	Menlo Park, CA 94025		
8 PURPOSE	(a) Category (See Categories listed at the top of this so	chedule) (b) Description	
OF EXPENDITURE	Advertising Expense		outside of Texas. Complete Schedule T.
_//		Facebook Ac	lo.
		Facebook Ac	15
O Commission ONII V if disposit	Condidate/Officeleddoursess	Office county	Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought State Representative Distr	Office held ict 44 State Representative District 44
·	Ruemper, John	State Representative Distr	State Representative District 44
Date	Payee name		
02/05/2024	Meta		
Amount (\$)	Payee address; City; State	e; Zip Code	
\$40.24	1 Hacker Way		
X Expenditure from corporate funds	Menlo Park, CA 94025		
PURPOSE	(a) Category (See Categories listed at the top of this so	chedule) (b) Description	
OF EXPENDITURE	Advertising Expense	· I —	outside of Texas. Complete Schedule T.
EXPENDITORE			
		Facebook Ac	IS
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
experientare to benefit of or	¹ Burns, DeWayne	State Representative Distr	ict 58 State Representative District 58
Date	Payee name		
02/05/2024	Meta		
Amount (\$)	Payee address; City; State	e; Zip Code	
\$40.08	1 Hacker Way		
X Expenditure from corporate funds	Menlo Park, CA 94025		
PURPOSE	(a) Category (See Categories listed at the top of this so	chedule) (b) Description	
OF EXPENDITURE	Advertising Expense		outside of Texas. Complete Schedule T.
EXPENDITORE			
		Facebook Ad	IS
			200
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	¹ Holland, Justin	State Representative Distr	ict 33 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAM	 F			3	Filer ID	(Ethics Commission	Filers)	
_	Sch: 13/45 Rpt: 24/56		Hand Texas			l	00088636	(
4	Date	5 Payee name	:							
	02/05/2024	Meta								
6	Amount (\$) \$39.77	7 Payee addre 1 Hacker V		State; Zip Co	ode					
Х	Expenditure from corporate funds	Menlo Park	c, CA 94025							
8	PURPOSE	(a) Category (s	See Categories listed at the top	of this schedule)	(b) Description					
	OF EXPENDITURE	Advertising		ŕ	Check if travel	outsid	e of Texas. Com	plete Schedule T.		
	EXPENDITORE				Facebook Ac	ls				
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	ght		Office he	eld		
	expenditure to benefit C/O				presentative Distr	ict 4		epresentative Dis	strict 4	
	Date	Payee name	<u> </u>							
	02/05/2024	Meta								
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$40.12	1 Hacker V	V ay							
Х	Expenditure from corporate funds	Menlo Parl	k, CA 94025							
	PURPOSE	(a) Category (S	See Categories listed at the top	of this schedule)	(b) Description					
	OF EXPENDITURE	Advertising			Check if travel	outsid	e of Texas. Com	plete Schedule T.		
	_//				Facebook Ac	ls				
					. 6,668					
	Complete ONLY if direct		iceholder name	Office sou	ght		Office he	eld		
	expenditure to benefit C/O	^H Bailes, Erne	st	State Re	presentative Distr	ict 1	8 State R	epresentative Dis	strict 18	
	Date	Payee name	·							
	02/07/2024	Meta								
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$41.76	1 Hacker V	/ay							
_	Evnondituro from									
Х	Expenditure from corporate funds	Menlo Park	k, CA 94025							
	PURPOSE	(a) Category (s	See Categories listed at the top	of this schedule)	(b) Description					
	OF EXPENDITURE	Advertising			Check if travel	outsid	e of Texas. Com	plete Schedule T.		
					Facebook Ac	ls				
	Complete ONLY if direct	L Candidate/Off	iceholder name	Office sou	<u>l</u> ight		Office he	eld		
	expenditure to benefit C/O		-		presentative Distr	ict 4		epresentative Dis	strict 4	

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee	Legal Services The Instruction Guid	Salaries/Vile explains how to co	Vages/Contract Labor mplete this form.	01	THER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	E			3 Fil	ler ID	(Ethics Commission Filers)
	Sch: 14/45 Rpt: 25/56	l	r Hand Texas			00	0088636	
4	Date	5 Payee nam	Э					
	02/07/2024	Meta						
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip Co	ode			
	\$44.65	1 Hacker \	Vay					
Х	Expenditure from corporate funds	Menlo Par	k, CA 94025					
8	PURPOSE	(a) Category	See Categories listed at the	top of this schodula)	(b) Description			
	OF	Advertising		top of this schedule)		outside o	of Texas. Com	plete Schedule T.
	EXPENDITURE	7	, <u></u>		_			
					Meta Ads			
9	Complete ONLY if direct		ficeholder name	Office sou	ght		Office he	eld
	expenditure to benefit C/OI	^H VanDeaver	Gary	State Re	presentative Distri	ct 1	State R	epresentative District 1
	Date	Payee nam						
	02/07/2024	Meta						
	Amount (\$)	Payee addr	ess; City;	State; Zip Co	ode			
	\$44.22	1 Hacker \		·				
			,					
Х	Expenditure from corporate funds	Menlo Par	k, CA 94025					
	PURPOSE				(b) Decemention			
	OF		See Categories listed at the	top of this schedule)	(b) Description Check if travel of	outside o	of Texas. Com	plete Schedule T.
	EXPENDITURE	Advertisin	J Expense		Ш			,
					Facebook Ad:	S		
	Complete ONLY if direct		ficeholder name	Office sou	ght		Office he	eld
	expenditure to benefit C/O	^H Darby, Drev	V	State Re	presentative Distri	ct 72	State R	epresentative District 72
	Date	Payee nam	2					
	02/07/2024	Meta						
	Amount (\$)	Payee addr	ess; City;	State; Zip Co	ode			
	\$45.77	1 Hacker \		, р				
	4.5		,					
Х	Expenditure from corporate funds	Monlo Par	k, CA 94025					
_								
	PURPOSE OF	l	See Categories listed at the	top of this schedule)	(b) Description	uutaida a	of Tayloo Cam	plete Schedule T.
	EXPENDITURE	Advertisin	g Expense		Check if traver c	Juisiue C	n rexas. Com	piete Scriedule 1.
					Facebook Ad	S		
	Complete ONLY if direct	Candidate/Ot	ficeholder name	Office sou	l <u> </u>		Office he	eld
	expenditure to benefit C/OI				presentative Distri	ct 60		epresentative District 60
					-			-

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

Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guid	Salaries/V	/ages/Contract Labor		R (enter a ca	ttegory not listed above)
1 Total pages Schedule F1:	2 FILER NAM	 E			3 Filer	ID ((Ethics Commission Filers)
Sch: 15/45 Rpt: 26/56		Hand Texas			0008	38636	
4 Date	5 Payee name	9					
02/07/2024	Meta						
6 Amount (\$)	7 Payee addre		State; Zip Co	de			
\$45.20	1 Hacker V	Vay					
X Expenditure from corporate funds	Menlo Parl	k, CA 94025					
8 PURPOSE OF	1	See Categories listed at the	top of this schedule)	(b) Description	autoide of To	waa Campla	ito Cobodulo T
EXPENDITURE	Advertising	Expense		Check if travel	outside of Te	exas. Comple	ete Scriedule 1.
				Facebook Ac	ds		
9 Complete ONLY if direct		ficeholder name	Office sou	ght	C	Office held	I
expenditure to benefit C/O	H Lambert, Sta	an	State Re	oresentative Distr	rict 71 S	State Rep	oresentative District 71
Date	Payee name)					
02/07/2024	Meta						
Amount (\$)	Payee addre	ess; City;	State; Zip Co	de			
\$45.41	1 Hacker V	Vay					
Expenditure from							
X corporate funds	Menlo Parl	k, CA 94025					
PURPOSE OF	1	See Categories listed at the	top of this schedule)	(b) Description			As Calcadula T
EXPENDITURE	Advertising	Expense		Check if travel	outside of Te	exas. Comple	ete Scriedule 1.
				Facebook Ac	ds		
Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office sou			Office held	
experiditure to benefit C/O	H Dean, Jay		State Re	oresentative Distr	rict 7 S	State Rep	oresentative District 7
Date	Payee name	:					
02/07/2024	Meta						
Amount (\$)	Payee addre	, ,,	State; Zip Co	de			
\$44.32	1 Hacker V	Vay					
Expenditure from							
x corporate funds	Menlo Parl	k, CA 94025					
PURPOSE OF		See Categories listed at the	top of this schedule)	(b) Description Check if travel	outside of To	vac Campla	sto Schodulo T
EXPENDITURE	Advertising	Expense		Check it traver	outside of Te	exas. Comple	ele Scriedule 1.
				Facebook Ac	ds		
Complete ONLY if direct	ш	ficeholder name	Office sou	-		Office held	
expenditure to benefit C/O	H Smith, Rego	jie	State Re	oresentative Distr	rict 62 S	State Rep	oresentative District 62

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Ser				Vages	se S/Contract Labor ete this form.			ER (enter a		not listed ab	ove)
_	T. 1 01 11 E4	_							1	_			(Eulaina	. 0	=1
1	Total pages Schedule F1: Sch: 16/45 Rpt: 27/56	2	Raise Your		Гехаѕ					3	Filer	88636	(Ethics	s Commissi	ion Filers)
4	Date	5	Payee name												
-	02/07/2024		Meta												
6	Amount (\$) \$43.74	7	Payee addres 1 Hacker W	•	City;	Stat	e; Zip Co	de							
Х	Expenditure from corporate funds		Menlo, CA 9	94025											
8	PURPOSE OF EXPENDITURE	(a)	Category _{(Se} Advertising			e top of this s	chedule)	(b)	Description Check if travel of		de of 1	¯exas. Com	plete Sch	iedule T.	
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offic Shine, Hugh	ceholde	er name		Office sou State Re	•	sentative Distri	ict !		Office he State R		entative I	District 55
	Date		Payee name												
	02/07/2024		Meta												
	Amount (\$)		Payee addres	ss;	City;	Stat	e; Zip Co	de							
	\$43.35		1 Hacker W	ay											
Χ	Expenditure from corporate funds		Menlo Park	, CA 94	1025										
	PURPOSE	(a)	Category (Se	ee Categor	ries listed at the	e top of this s	chedule)	(b)	Description						
	OF EXPENDITURE		Advertising	Expens	se				Check if travel of	outsi	de of 1	exas. Com	plete Sch	iedule T.	
									Facebook Ad	S					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Offi		er name		Office sou	•	aantativa Diatri	iot '		Office he		ontotivo I	Diotriot
			Allison, Steve				State Re	pres	sentative Distri	ici .	121	State R	eprese	entative i	DISTRICT
	Date		Payee name												
	02/07/2024		Meta												
	Amount (\$)		Payee addres	ss;	City;	Stat	e; Zip Co	de							
	\$43.77		1 Hacker W	ay											
Χ	Expenditure from corporate funds		Menlo Park	, CA 94	1025										
	PURPOSE	(a)	Category (Se	ee Categor	ries listed at the	e top of this s	chedule)	(b)	Description						
	OF EXPENDITURE		Advertising	Expens	se				Check if travel of	outsi	de of T	exas. Com	plete Sch	iedule T.	
									Facebook Ad	S					
	Complete ONLY if direct expenditure to benefit C/OH	1	Candidate/Offi	ceholde	r name		Office sou	•	contative Dietri	iot '		Office he		ontotivo !	District 00
	- p 2	- 1	King, Ken				State Re	pres	sentative Distri	ICE 8	δδ	Siate R	eprese	entative t	District 88

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

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Legal Services The Instruction G	s Expense		pense ages/Contract Labor	Tra	avel Out of District THER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	E				3 Fil	ler ID (Ethics Commission Filers)
	Sch: 17/45 Rpt: 28/56	Raise Your	Hand Texas				00	0088636
4	Date	5 Payee name)					
	02/07/2024	Meta						
6	Amount (\$)	7 Payee addre	ess; City;	State;	Zip Coo	le		
	\$44.09	1 Hacker V	Vay					
X	Expenditure from corporate funds	Menlo Park	c, CA 94025					
8	PURPOSE	(a) Category (S	See Categories listed at t	the top of this sch	edule)	(b) Description		
	OF EXPENDITURE	Advertising		·	,	Check if travel	outside o	of Texas. Complete Schedule T.
	EXPENDITORE							
						Facebook Ac	IS	
9	Complete ONLY if direct expenditure to benefit C/OH	1	ficeholder name		Office soug			Office held
	experiulture to benefit C/OI	¹ Kuempel, Jo	ohn 	S	State Rep	resentative Distr	ict 44	State Representative District 44
	Date	Payee name	?					
	02/07/2024	Meta						
	Amount (\$)	Payee addre	ess; City;	State;	Zip Coo	le		
	\$43.43	1 Hacker V	Vay					
Х	Expenditure from corporate funds	Menlo Park	k, CA 94025					
	PURPOSE	(a) Category (S	See Categories listed at t	the top of this sche	edule)	(b) Description		
	OF EXPENDITURE	Advertising	Expense			Check if travel	outside o	of Texas. Complete Schedule T.
						Facebook Ac	lc.	
						racebook Ac	15	
	Commission ONII V if disposi	Candidate/Off) 	la 4		Office heald
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ficeholder name		Office soug		iot OO	Office held State Penrocentative District 00
		Geren, Char		s	ыаге кер	resentative Distr	ICI 99	State Representative District 99
	Date	Payee name)					
	02/07/2024	Meta						
	Amount (\$)	Payee addre	ess; City;	State;	Zip Coo	le		
	\$42.29	1 Hacker V	Vay					
Х	Expenditure from corporate funds	Menlo Park	c, CA 94025					
	PURPOSE	(a) Category (s	See Categories listed at 1	the top of this sche	edule)	(b) Description		
	OF EXPENDITURE	Advertising				Check if travel	outside o	of Texas. Complete Schedule T.
	EXPENDITORE							
						Facebook Ac	IS	
	Complete ONLY if direct expenditure to benefit C/OH		ficeholder name		Office soug			Office held
L	experiulture to beriefft C/OF	¹ Clardy, Trav	is	S	State Rep	resentative Distr	ict 11	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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal S The Ir	ervices Istruction Guid	le explains h		-	this form.		OTHE	R (enter a	category n	ot listed above)
1	Total pages Schedule F1:	2 FILER	NAME						3	Filer	ID	(Ethics	Commission	Filers)
	Sch: 18/45 Rpt: 29/56		Your Hand	Texas						0008	38636			
4	Date	5 Payee	name											
	02/07/2024	Meta												
6	Amount (\$)	7 Payee	address;	City;	State;	Zip Cod	de							
	\$43.41	1 Had	ker Way											
Χ	Expenditure from corporate funds	Menlo	Park, CA 9	94025										
8	PURPOSE	(a) Categ	ory (See Categ	ories listed at the	top of this sche	dule)	(b) D	escription						
	OF EXPENDITURE	Advei	tising Expe	nse				Check if trave	el outsi	de of Te	exas. Com	plete Sche	dule T.	
							F	acebook A	ds					
9	Complete ONLY if direct		ate/Officehold	ler name	Of	ffice soug	ght			(Office he	eld		
	expenditure to benefit C/OI	H Burns,	DeWayne		St	tate Rep	oresei	ntative Dist	trict !	58 5	State R	epresei	ntative Dis	strict 58
	Date	Payee	name											
	02/07/2024	Meta												
	Amount (\$)	Payee	address;	City;	State;	Zip Cod	de							
	\$43.43	1 Had	ker Way											
Χ	Expenditure from corporate funds	Menlo	Park, CA 9	94025										
	PURPOSE	(a) Categ	ory (See Categ	ories listed at the	top of this sche	dule)	(b) D	escription						
	OF EXPENDITURE	Advei	tising Expe	nse				Check if trave	el outsi	de of Te	exas. Com	plete Sche	dule T.	
							F	acebook A	ds					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate/Officeholo	ler name		ffice soug	•				Office he			
	experiulture to benefit C/Or	¹ Holland	d, Justin		St	tate Rep	oresei	ntative Dist	trict :	33 5	State R	epresei	ntative Dis	strict 33
	Date	Payee	name											
	02/07/2024	Meta												
	Amount (\$)	Payee	address;	City;	State;	Zip Cod	de							
	\$44.06	1 Had	ker Way											
Χ	Expenditure from corporate funds	Menlo	Park, CA 9	94025										
	PURPOSE OF	(a) Categ	ory (See Cate	ories listed at the	top of this sche	dule)	(b) D	escription						
	EXPENDITURE	Advei	tising Expe	nse			L	Check if trave	el outsi	de of Te	exas. Com	plete Sche	dule T.	
							F	acebook A	.ds					
							•	assission A						
	Complete ONLY if direct	Candid	ate/Officeholo	ler name	Ot	ffice soug	aht				Office he	ald.		
	expenditure to benefit C/O		Ernest	ici iiuiiic				ntative Dist	trict				ntative Dis	strict 18
		Danes,										-p. 5561		

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

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memoria Legal Services The Instruction (ls Expense		pense ages/Contract Labor	Tra	avel Out of District THER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	E				3 Fi	ler ID (Ethics Commission Filers)
	Sch: 19/45 Rpt: 30/56	Raise Your	Hand Texas				00	0088636
4	Date	5 Payee name	•					
	02/10/2024	Meta						
6	Amount (\$)	7 Payee addre	ess; City;	State;	; Zip Cod	de		
	\$55.53	1 Hacker V	/ ay					
X	Expenditure from corporate funds	Menlo Park	k, CA 94025					
8	PURPOSE	(a) Category (s	See Categories listed a	the top of this sch	edule)	(b) Description		
	OF EXPENDITURE	Advertising				Check if travel	outside o	of Texas. Complete Schedule T.
	ZX					Facebook Ac	ls	
9	Complete ONLY if direct	Candidate/Off	iceholder name		Office soug	ıht		Office held
	expenditure to benefit C/O					resentative Distr	ict 4	State Representative District 4
	Date	Payee name	,					
	02/10/2024	Meta						
	Amount (\$)	Payee addre	ess; City;	State;	; Zip Cod	de		
	\$52.30	1 Hacker V	/ ay					
Χ	Expenditure from corporate funds	Menlo Parl	c, CA 94025					
	PURPOSE	(a) Category (S	See Categories listed a	the top of this sch	edule)	(b) Description		
	OF EXPENDITURE	Advertising	Expense			Check if travel	outside o	of Texas. Complete Schedule T.
						Facebook Ad	le	
						1 doebook 7 le		
	Complete ONLY if direct	Candidate/Off	iceholder name	C	Office soug	jht		Office held
	expenditure to benefit C/OH	d Geren, Char	lie	5	State Rep	resentative Distr	ict 99	State Representative District 99
	Date	Payee name	<u> </u>					
	02/10/2024	Meta						
	Amount (\$)	Payee addre	ess; City;	State;	; Zip Cod	de		
	\$53.17	1 Hacker V	/ ay					
Χ	Expenditure from corporate funds	Menlo Parl	c, CA 94025					
	PURPOSE	(a) Category (S	See Categories listed a	the top of this sch	edule)	(b) Description		
	OF EXPENDITURE	Advertising	Expense			Check if travel	outside o	of Texas. Complete Schedule T.
	EAR ENDITIONE					Facebook Ac	ls	
L								
	Complete ONLY if direct		iceholder name	C	Office soug	jht		Office held
	expenditure to benefit C/OF	Holland, Jus	tin	S	State Rep	resentative Distr	ict 33	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
Credit Card Baymont

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

Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide	Salaries/V	Vages/Contract Labor		enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAMI	<u> </u>			3 Filer ID	(Ethics Commission Filers)
Sch: 20/45 Rpt: 31/56	Raise Your	Hand Texas			00088	636
4 Date	5 Payee name					
02/10/2024	Meta					
6 Amount (\$)	7 Payee addre		State; Zip Co	ode		
\$53.22	1 Hacker V	<i>r</i> ay				
X Expenditure from corporate funds	Menlo Park	c, CA 94025				
8 PURPOSE OF	I	ee Categories listed at the t	op of this schedule)	(b) Description	outside of Toya	s. Complete Schedule T.
EXPENDITURE	Advertising	Expense		Check it traver	outside of Texa	s. Complete Scriedule 1.
				Facebook Ac	ds	
9 Complete ONLY if direct		iceholder name	Office sou	ight	Off	ice held
expenditure to benefit C/Ol	H Allison, Stev	e	State Re	presentative Distr	rict 121 Sta	ate Representative District
Date	Payee name					
02/10/2024	Meta					
Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode		
\$50.09	1 Hacker V	/ay				
— E						
X Expenditure from corporate funds	Menlo Park	c, CA 94025				
PURPOSE	(a) Category (S	ee Categories listed at the t	op of this schedule)	(b) Description		
OF EXPENDITURE	Advertising	Expense		Check if travel	outside of Texa	s. Complete Schedule T.
				Facebook Ac	łe	
				1 doebook 7 le		
Complete ONLY if direct		iceholder name	Office sou	ght	Off	ice held
expenditure to benefit C/OI	H Bailes, Erne	st	State Re	presentative Distr	rict 18 Sta	ate Representative District 18
Date	Payee name					
02/10/2024	Meta					
Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode		
\$53.40	1 Hacker V	/ay				
Expenditure from						
x corporate funds	Menlo Park	x, CA 94025				
PURPOSE OF	I	ee Categories listed at the t	op of this schedule)	(b) Description		a
EXPENDITURE	Advertising	Expense		Check if travel	outside of Texa	s. Complete Schedule T.
				Facebook Ac	ls	
Complete ONLY if direct		iceholder name	Office sou	ght		ice held
expenditure to benefit C/OI	^H Shine, Hugh		State Re	presentative Distr	rict 55 Sta	ate 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

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

	Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Se				Vages	ete this form.			R (enter a		listed above)	
_		-			Struction Cu	- CAPIGITI	3 11000 10 00	шріс	-	_			/=·/ · · · ·		
1	Total pages Schedule F1: Sch: 21/45 Rpt: 32/56	ı	Raise Your		Texas					3	Filer 000	ID 88636	(Ethics C	ommission Fil	ers)
4	Date	5	Dayoo nama						I						
7	02/10/2024		Payee name Meta												
6	Amount (\$) \$53.71	l	Payee addres 1 Hacker W	-	City;	Stat	e; Zip Co	ode							
Χ	Expenditure from corporate funds		Menlo Park,	CA 94	4025										
8	PURPOSE OF EXPENDITURE		Category _{(Se} Advertising			e top of this s	chedule)	(b)	Description Check if travel of the control of the		de of T	exas. Com	plete Schedu	ıle T.	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic Burns, DeWa		er name		Office sou State Re	•	sentative Distri	ct !		Office he State R		tative Distri	ct 58
	Date		Payee name												
	02/10/2024		Meta												
	Amount (\$)		Payee addres	SS;	City;	Stat	e; Zip Co	de							
	\$53.31		1 Hacker W	ay											
Χ	Expenditure from corporate funds		Menlo Park,	CA 94	4025										
	PURPOSE	(a)	Category (Se	e Catego	ories listed at th	e top of this s	chedule)	(b)	Description						
	OF EXPENDITURE		Advertising	Expen	ise				Check if travel of	outsio	de of T	exas. Com	plete Schedu	ıle T.	
									Facebook Ad	S					
	Complete ONLY if direct		andidate/Offic	ceholde	er name		Office sou	aht				Office he	eld		
	expenditure to benefit C/OI		(uempel, Joh					•	sentative Distri	ct 4	44 :	State R	epresent	tative Distri	ct 44
	Date		Payee name												
	02/10/2024		Meta												
	Amount (\$)		Payee addres	SS;	City;	Stat	e; Zip Co	de							
	\$52.54		1 Hacker W		•		•								
Х	Expenditure from corporate funds		Menlo Park,	CA 94	4025										
	PURPOSE	(a)	Category (Se	e Catego	ories listed at th	e top of this s	chedule)	(b)	Description						
	OF EXPENDITURE		Advertising						Check if travel of	outsio	de of T	exas. Com	plete Schedu	ıle T.	
	EXI ENSITIONE								Facebook Ad	S					
	Complete ONLY if direct		andidate/Offic	ceholde	er name		Office sou	ght			(Office he	eld		
	expenditure to benefit C/OI		Smith, Reggi					•	sentative Distri	ct 6				tative Distri	ct 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 Lahor

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: Sch: 22/45 Rpt: 33/56	FILER NAME Raise Your Hand Texas	3 Filer ID (Ethics Commission Filers) 00088636
4 Date 02/10/2024	5 Payee name Meta	<u> </u>
6 Amount (\$) \$53.10	7 Payee address; City; State; Zip (1 Hacker Way	Code
X Expenditure from corporate funds	Menlo Park, CA 94025	
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. Facebook Ads
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office so Rogers, Glenn State R	ought Office held Representative District 60 State Representative District 60
Date 02/10/2024	Payee name Meta	
Amount (\$) \$53.00	Payee address; City; State; Zip (1 Hacker Way	Code
X Expenditure from corporate funds	Menlo Park, CA 94025	
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. Facebook Ads
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office so State R	Ought Office held Representative District 7 State Representative District 7
Date 02/10/2024	Payee name Meta	
Amount (\$) \$52.58	Payee address; City; State; Zip (1 Hacker Way	Code
X Expenditure from corporate funds	Menlo Park, CA 94025	
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. Facebook Ads
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office so Lambert, Stan State R	ought Office held Representative District 71 State Representative District 71

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services The Instruction Guide ex	Salaries/\	Wages/Contract Labor		OTHER (enter a	category not listed above))
1	Total pages Schedule F1:	2 FILED NAMI		-		3	Filer ID	(Ethics Commission	Filers)
_	Sch: 23/45 Rpt: 34/56		- Hand Texas			1	00088636	(
4	Date	5 Payee name							
	02/10/2024	Meta							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode				
	\$52.40	1 Hacker V	/ay						
Χ	Expenditure from corporate funds	Menlo Park	c, CA 94025						
8	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b) Description				
	OF EXPENDITURE	Advertising			Check if trave	l outsid	e of Texas. Com	plete Schedule T.	
	EXI ENDITORE								
					Facebook A	as			
_					<u> </u>				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		iceholder name	Office sou	•		Office he		
	experientare to benefit eyer	¹ VanDeaver,	Gary	State Re	presentative Dist	rict 1	State R	epresentative Dis	strict 2
	Date	Payee name							
	02/10/2024	Meta							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode				
	\$52.47	1 Hacker V	/ay						
Х	Expenditure from corporate funds	Menlo Park	, CA 94025						
	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b) Description				
	OF EXPENDITURE	Advertising			Check if trave	l outsid	e of Texas. Com	plete Schedule T.	
	ZAI ZHOHORZ								
					Facebook A	as			
	Complete ONLY if direct expenditure to benefit C/OH	_	iceholder name	Office sou	•		Office he		
	——————————————————————————————————————	Darby, Drew		State Re	epresentative Disi	rict 7	2 State R	epresentative Dis	Strict 72
	Date	Payee name							
	02/10/2024	Meta							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode				
	\$52.92	1 Hacker V	/ay						
Χ	Expenditure from corporate funds	Menlo Park	c, CA 94025						
	PURPOSE	(a) Category (s	ee Categories listed at the top of	this schodula)	(b) Description				
	OF	Advertising		tilis scriedule)	l —	l outsid	e of Texas. Com	plete Schedule T.	
	EXPENDITURE	, .a			_				
					Facebook A	ds			
	Complete ONLY if direct		iceholder name	Office sou	ıght		Office he	eld	
	expenditure to benefit C/OH	[⊣] Clardy, Trav	is	State Re	presentative Dist	rict 1	.1 State R	epresentative Dis	strict 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Mange/Control Labor

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services The Instruction Guide		Vages/Contract Labor mplete this form.	ОТІ	HER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME				3 File	er ID	(Ethics Commission Filers)
	Sch: 24/45 Rpt: 35/56	Raise Your	Hand Texas			00	088636	
4	Date	5 Payee name						
	02/10/2024	Meta						
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode			
	\$52.43	1 Hacker W	'ay					
Χ	Expenditure from corporate funds	Menlo Park	, CA 94025					
8	PURPOSE	(a) Category (S	ee Categories listed at the t	op of this schedule)	(b) Description			
	OF EXPENDITURE	Advertising			Check if travel of	outside of	f Texas. Com	plete Schedule T.
					Facebook Ad:	c		
					i acebook Au.	3		
_	Complete ONLY if direct	Candidata/Offi	ceholder name	Office sou	laht.		Office he	nid
9	Complete ONLY if direct expenditure to benefit C/O		cendider name	Office sou	ıgırı presentative Distri	ct 88		epresentative District 88
		King, Ken		State Ne	——————————————————————————————————————	Ct 00	State it	——————————————————————————————————————
	Date	Payee name						
	02/14/2024	Meta						
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode			
	\$54.29	1 Hacker W	'ay					
	- Constantitude forms							
Χ	Expenditure from corporate funds	Menlo Park	, CA 94025					
	PURPOSE	(a) Category (S	ee Categories listed at the t	on of this schedule)	(b) Description			
	OF EXPENDITURE	Advertising		,	Check if travel of	outside of	f Texas. Com	plete Schedule T.
	EXPENDITORE							
					Facebook Ads	S		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ceholder name	Office sou	•	-+ 10	Office he	
		¹ Bailes, Ernes	St	State Re	presentative Distri	Ct 18	State R	epresentative District 18
	Date	Payee name						
	02/14/2024	Meta						
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode			
	\$53.42	1 Hacker W	'ay					
Χ	Expenditure from corporate funds	Menlo Park	, CA 94025					
	PURPOSE	(a) Category (S	ee Categories listed at the t	op of this schedule)	(b) Description			
	OF EXPENDITURE	Advertising	Expense		Check if travel of	outside of	f Texas. Com	plete Schedule T.
					Facebook Ad	c		
					i acebook Aus	J		
	Complete ONLY if direct	CondidatalOff	achalder norse	Office and	laht.		Office le	ald.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ceholder name	Office sou	_{ignt} presentative Distri	ct 62	Office he	end epresentative District 62
		Jilliul, Reggi	<u> </u>	Sidle Re	presentative DISHI	UL UZ	Sidle R	epresentative District 02

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Food/Beverage Expense Gift/Awards/Memorials Expen Legal Services	Polling Exp se Printing Ex		T	ravel in Distric ravel Out of D	
Credit Card Payment		The Instruction Guide e	explains how to con	nplete this form.			
1 Total pages Schedule F1:	2 FILER NAM	ΙΕ			3 F	iler ID	(Ethics Commission Filers)
Sch: 25/45 Rpt: 36/56	Raise You	r Hand Texas			0	0088636	
4 Date	5 Payee name	<u></u>			<u> </u>		
02/14/2024	Meta	,					
6 Amount (\$)	7 Payee addre	ess; City;	State; Zip Cod	de			
\$53.38	1 Hacker V	Vay					
Expenditure from corporate funds	Menlo Pari	k, CA 94025					
8 PURPOSE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
OF EXPENDITURE	Advertising	g Expense		Check if travel	outside	of Texas. Co	mplete Schedule T.
				Facebook Ad	40		
				racebook At	15		
	<u> </u>						
9 Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office soug	•		Office h	
experialitate to benefit 6/0	H Burns, DeW	/ayne	State Rep	resentative Dist	rict 58	3 State F	Representative District 58
Date	Payee name	e					
02/14/2024	Meta						
Amount (\$)	Payee addre	ess; City;	State; Zip Coo	de			
\$53.16	1 Hacker V	•	, ,				
		- 4.5					
Expenditure from corporate funds	Menlo Pari	k, CA 94025					
PURPOSE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
OF EXPENDITURE	Advertising			Check if travel	outside	of Texas. Co	mplete Schedule T.
LXI LINDITORE							
				Facebook A	ds		
Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office soug			Office h	
expenditure to benefit C/O	H Rogers, Gle	enn	State Rep	resentative Dist	rict 60) State F	Representative District 60
Date	Payee name	 e					
02/14/2024	Meta						
Amount (\$)	Payee addre	ess; City;	State; Zip Cod	de			
\$54.31	1 Hacker V	Nay					
		•					
X Expenditure from corporate funds	Menlo Pari	k, CA 94025					
PURPOSE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
OF EXPENDITURE	Advertising	g Expense		Check if travel	outside	of Texas. Co	mplete Schedule T.
2,4 2,451,6142				Facebook As	d.a.		
				Facebook A	มร		
	<u> </u>						
Complete ONLY if direct	1.1	fficeholder name	Office soug			Office h	
expenditure to benefit C/O	H Clardy, Trav	/is	State Rep	resentative Dist	rict 11	L State F	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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Mange/Control Labor

ense Travel in District
pense Travel Out of District
pages/Contract Labor OTHER (enter a cate

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explain:	s how to complete this form.	OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 26/45 Rpt: 37/56	Raise Your Hand Texas		00088636
4 Date	5 Payee name		
02/14/2024	Meta		
6 Amount (\$)	7 Payee address; City; State	e; Zip Code	
\$53.43	1 Hacker Way		
X Expenditure from corporate funds	Menlo Park, CA 94025		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this so		
EXPENDITURE	Advertising Expense	Check if travel	outside of Texas. Complete Schedule T.
		Facebook Ad	ls .
			-
9 Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/OI		State Representative Distr	
Data	·		
Date	Payee name		
02/14/2024	Meta		
Amount (\$)		e; Zip Code	
\$53.51	1 Hacker Way		
Expenditure from			
x corporate funds	Menlo Park, CA 94025		
PURPOSE	(a) Category (See Categories listed at the top of this so	chedule) (b) Description	
OF EXPENDITURE	Advertising Expense		outside of Texas. Complete Schedule T.
_/		Facebook Ad	lo.
		Facebook Au	is .
Commission ONII V if diment	Condidate/Officeholder ross	Office country	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Darby, Drew	Office sought State Representative Distr	Office held ict 72 State Representative District 72
·	Daiby, Diew	State Representative Distr	ict 72 State Representative District 72
Date	Payee name		
02/14/2024	Meta		
Amount (\$)	Payee address; City; State	e; Zip Code	
\$52.64	1 Hacker Way		
Expenditure from			
x corporate funds	Menlo Park, CA 94025		
PURPOSE OF	(a) Category (See Categories listed at the top of this so		
EXPENDITURE	Advertising Expense	Check if travel	outside of Texas. Complete Schedule T.
		Facebook Ad	S
		1 4005001710	
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/O		State Representative Distr	
	, ,		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Printing Expense Salaries/Wages/Contract Labor how to complete this form.	Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1:	·	·	Filer ID (Ethics Commission Filers)
Sch: 27/45 Rpt: 38/56	Raise Your Hand Texas	3	00088636
4 Date	5 Payee name	<u> </u>	
02/14/2024	Meta		
6 Amount (\$)	7 Payee address; City; State	e; Zip Code	
\$52.45	1 Hacker Way		
X Expenditure from corporate funds	Menlo Park, CA 94025		
8 PURPOSE	(a) Category (See Categories listed at the top of this sc	(b) Description	
OF EXPENDITURE	Advertising Expense	Check if travel outside	de of Texas. Complete Schedule T.
		Facebook Ads	
9 Complete ONLY if direct	Candidate/Officeholder name	I Office sought	Office held
expenditure to benefit C/OI	ш	State Representative District	7 State Representative District 7
Date	Payee name		
02/14/2024	Meta		
Amount (\$)	Payee address; City; State	e; Zip Code	
\$53.19	1 Hacker Way		
X Expenditure from corporate funds	Menlo Park, CA 94025		
PURPOSE	(a) Category (See Categories listed at the top of this sc	(b) Description	
OF EXPENDITURE	Advertising Expense	Check if travel outside	de of Texas. Complete Schedule T.
		Facebook Ads	
		r doosook / do	
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/OI	H Bell, Keith	State Representative District	4 State Board Of Education
Date	Payee name		
02/14/2024	Meta		
Amount (\$)	Payee address; City; State	e; Zip Code	
\$53.90	1 Hacker Way		
X Expenditure from corporate funds	Menlo Park, CA 94025		
PURPOSE OF	(a) Category (See Categories listed at the top of this sc		
EXPENDITURE	Advertising Expense	Check if travel outside	de of Texas. Complete Schedule T.
		Facebook Ads	
Complete ONLY if direct	Candidate/Officeholder name	I Office sought	Office held
expenditure to benefit C/OI	1.1	State Representative District 2	
	<u> </u>	,	

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 Salaries/Wagnes/Contract Labor

Candidate/Officel Credit Card Paymen		I Committee	Legal Services The Instruction Gui	Salaries ide explains how to c	Wages/Contract Labor omplete this form.	OTHE	ER (enter a	category not listed above)	1
1 Total pages Sch	edule F1:	2 FILER NAME				3 Filer	· ID	(Ethics Commission	Filers)
Sch: 28/45 Rpt	t: 39/56	Raise Your	Hand Texas			000	88636		
4 Date		5 Payee name							
02/14/2024		Meta							
6 Amount (\$)		7 Payee addres	ss; City;	State; Zip C	ode				
	\$52.45	1 Hacker W	ay						
X Expenditure from corporate funds	l	Menlo Park,	CA 94025						
8 PURPOSE		(a) Category (Se	ee Categories listed at the	e top of this schedule)	(b) Description				
OF EXPENDITURE	≣	Advertising			Check if travel	outside of T	exas. Com	plete Schedule T.	
-					Facebook Ac	de			
					1 acebook Ac	13			
0 Complete ONLY	if direct	Candidate/Offic	ooholder name	Office so	ught		Office he	ald.	
9 Complete ONLY expenditure to be			centituer name		ugni epresentative Distr			eiu epresentative Dis	trict 55
·		Shirle, Hugh		State N		100 33	State IX	——————————————————————————————————————	1100 33
Date		Payee name							
02/14/2024		Meta							
Amount (\$)		Payee addres	ss; City;	State; Zip C	ode				
	\$53.55	1 Hacker W	ay						
— Consorditus from									
X Expenditure from corporate funds	l	Menlo Park,	CA 94025						
PURPOSE		(a) Category (Se	ee Categories listed at the	e top of this schedule)	(b) Description				
OF EXPENDITURE	=	Advertising		,		outside of T	exas. Com	plete Schedule T.	
LAFENDITORE	-								
					Facebook Ad	ds			
					<u> </u>				
Complete ONLY expenditure to be		Candidate/Offic		Office so	· ·		Office he		
		¹ Allison, Steve		State R	epresentative Distr	rict 121	State R	epresentative Dis	trict
Date		Payee name							
02/14/2024		Meta							
Amount (\$)		Payee addres	ss; City;	State; Zip C	ode				
	\$54.06	1 Hacker W	ay						
X Expenditure from corporate funds	1	Menlo Park,	CA 94025						
PURPOSE		(a) Category (Se	ee Categories listed at the	e top of this schedule)	(b) Description				
OF EXPENDITURE	■	Advertising	Expense		Check if travel	outside of T	exas. Com	plete Schedule T.	
-					Facebook Ad	10			
					I acebook At	J			
Complete ONLY	if direct	Candidata/O#	ooholdor nama	Office	l ught		Office ha	ald.	
Complete ONLY expenditure to be		Candidate/Office Lambert, Sta		Office so	ugnt epresentative Distr		Office he	eia epresentative Dis	trict 71
		Lambert, Sta		State R	epresentative DISti	IICL / I	JIAIE K	epresentative DIS	uict / I

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 Salaries/Wagnes/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services The Instruction Guid		Nages/Contract Labor mplete this form.	ОТ	HER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	Ē			3 File	er ID	(Ethics Commission Filers)
	Sch: 29/45 Rpt: 40/56	Raise Your	Hand Texas			00	088636	
4	Date	5 Payee name						
	02/14/2024	Meta						
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode			
	\$52.63	1 Hacker W	/ay					
Х	Expenditure from corporate funds	Menlo Park	, CA 94025					
8	PURPOSE	(a) Category (S	ee Categories listed at the	top of this schedule)	(b) Description			
	OF EXPENDITURE	Advertising	Expense		Check if travel of	outside of	f Texas. Com	plete Schedule T.
					Facebook Ad	S		
9	Complete ONLY if direct	Candidate/Off	ceholder name	Office sou	ıght		Office he	eld
	expenditure to benefit C/OI	Holland, Jus	tin	State Re	presentative Distr	ict 33	State R	epresentative District 33
	Date	Payee name						
	02/14/2024	Meta						
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode			
	\$54.23	1 Hacker W	/ay					
Χ	Expenditure from corporate funds	Menlo Park	, CA 94025					
	PURPOSE	(a) Category (S	ee Categories listed at the	top of this schedule)	(b) Description			
	OF EXPENDITURE	Advertising	Expense		Check if travel of	outside of	f Texas. Com	plete Schedule T.
					Facebook Ad	s		
	Complete ONLY if direct		ceholder name	Office sou	ıght		Office he	eld
	expenditure to benefit C/O	Geren, Char	lie	State Re	presentative Distri	ict 99	State R	epresentative District 99
	Date	Payee name						
	02/17/2024	Meta						
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode			
	\$57.01	1 Hacker W	/ay					
Χ	Expenditure from corporate funds	Menlo Park	, CA 94025					
	PURPOSE OF	(a) Category (S	ee Categories listed at the	top of this schedule)	(b) Description			
	EXPENDITURE	Advertising	Expense		Check if travel of	outside of	f Texas. Com	plete Schedule T.
					Facebook Ad	s		
					. 4000001/10	_		
	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	<u> </u> aht		Office he	əld
	expenditure to benefit C/O				presentative Distri	ict 1		epresentative District 1
			,					

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.
1 Total pages Schedule F1: Sch: 30/45 Rpt: 41/56	FILER NAME Raise Your Hand Texas	3 Filer ID (Ethics Commission Filers) 00088636
4 Date 02/17/2024	5 Payee name Meta	<u> </u>
6 Amount (\$) \$56.20	7 Payee address; City; State; Zip C 1 Hacker Way	Code
Expenditure from corporate funds	Menlo Park, CA 94025	
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. Facebook Ads
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office so H Lambert, Stan State R	ought Office held epresentative District 71 State Representative District 71
Date 02/17/2024	Payee name Meta	
Amount (\$) \$56.40 X Expenditure from corporate funds	Payee address; City; State; Zip C 1 Hacker Way Menlo Park, CA 94025	Code
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. Facebook Ads
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H King, Ken State R	ought Office held epresentative District 88 State Representative District 88
Date 02/17/2024	Payee name Meta	
Amount (\$) \$55.95	Payee address; City; State; Zip C 1 Hacker Way	Code
X Expenditure from corporate funds	Menlo Park, CA 94025	
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. Facebook Ads
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H Kuempel, John State R	ought Office held epresentative District 44 State Representative District 44

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 Salaries/Mange/Control Labor

Candidate/Officeholder/Politica Credit Card Payment	ŭ	Salaries/Wages/Contract Labor ns how to complete this form.	OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID (Ethics Commission Filers)
Sch: 31/45 Rpt: 42/56	Raise Your Hand Texas		00088636
4 Date	5 Payee name		
02/17/2024	Meta		
6 Amount (\$)	7 Payee address; City; Sta	te; Zip Code	
\$56.55	1 Hacker Way		
X Expenditure from corporate funds	Menlo Park, CA 94025		
8 PURPOSE	(a) Category (See Categories listed at the top of this	(b) Description	
OF EXPENDITURE	Advertising Expense	Check if travel outside	de of Texas. Complete Schedule T.
		Facebook Ads	
		Pacebook Ads	
			755
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought	Office held
experientare to serious ever	1 Dean, Jay	State Representative District	7 State Representative District 7
Date	Payee name		
02/17/2024	Meta		
Amount (\$)	Payee address; City; Sta	te; Zip Code	
\$56.81	1 Hacker Way		
	•		
X Expenditure from	Menlo Park, CA 94025		
Corporate funds	<u> </u>	Les	
PURPOSE OF	(a) Category (See Categories listed at the top of this		de of Toylog Complete Cabadula T
EXPENDITURE	Advertising Expense	Check if travel outside	de of Texas. Complete Schedule T.
		Facebook Ads	
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/OI		State Representative District 6	
	rtogers, cierin	State Representative Bistrict	otate Representative District of
Date	Payee name		
02/17/2024	Meta		
Amount (\$)	Payee address; City; Sta	te; Zip Code	
\$56.10	1 Hacker Way		
X Expenditure from corporate funds	Menlo Park, CA 94025		
PURPOSE	(a) Category (See Categories listed at the top of this	schedule) (b) Description	
OF EXPENDITURE	Advertising Expense	Check if travel outside	de of Texas. Complete Schedule T.
LAI LNDITORE			
		Facebook Ads	
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/O	1 Clardy, Travis	State Representative District	11 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

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

	Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Se				Vages	se s/Contract Labor ete this form.			ER (enter a		ot listed above	e)
_	T	1_				oxp			1	_	="	15	/Eul.:	<u> </u>	F1
	Total pages Schedule F1: Sch: 32/45 Rpt: 43/56	ı	Raise Your		Texas					3	Filer	1D 88636	(Ethics (Commission	Filers)
4	Date	5	Payee name						I						
	02/17/2024		Meta												
6	Amount (\$) \$55.72	ı	Payee addres 1 Hacker W	•	City;	Stat	e; Zip Co	de							
Χ	Expenditure from corporate funds	⊢	Menlo Park,												
8	PURPOSE OF EXPENDITURE		Category _{(Se} Advertising			ne top of this s	chedule)	(b)	Description Check if travel of	outsi	de of T	exas. Com	plete Sched	dule T.	
									Facebook Ad	S					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Offic Geren, Charli		er name		Office sou State Re	•	sentative Distri	ict 9		Office he State R		ntative Dis	strict 99
	Date		Payee name												
	02/17/2024		Meta												
	Amount (\$)	H	Payee addres	ss;	City;	Stat	e; Zip Co	de							
	\$56.27		1 Hacker W	av			•								
	****			,											
Χ	Expenditure from corporate funds		Menlo Park	, CA 9	94025										
	PURPOSE	(a)	Category (Se	e Catego	ories listed at th	ne top of this s	chedule)	(b)	Description						
	OF EXPENDITURE		Advertising	Expen	ise				Check if travel of	outsi	de of T	exas. Com	plete Sched	dule T.	
									Facebook Ad	s					
	Complete ONLY if direct	<u> </u>	andidate/Offic	ceholde	er name		Office sou	ght				Office he	eld		
	expenditure to benefit C/OI		arby, Drew					•	sentative Distri	ict ⁻	72	State R	epreser	ntative Dis	strict 72
	Date		Payee name												
	02/17/2024		Meta												
	Amount (\$)		Payee addres	ss;	City;	Stat	e; Zip Co	de							
	\$56.44		1 Hacker W	ay											
Χ	Expenditure from corporate funds		Menlo Park,	CA 94	4025										
	PURPOSE	(a)	Category (Se	e Catego	ories listed at th	ne top of this s	chedule)	(b)	Description						
	OF EXPENDITURE		Advertising						Check if travel of	outsi	de of T	exas. Com	plete Sched	dule T.	
	LAI LIBITORE								Facebook Ad	S					
	Complete ONLY if direct	<u></u>	andidate/Offic	ceholde	er name		Office sou	ght				Office he	eld		
	expenditure to benefit C/OI		Smith, Reggi					•	sentative Distri	ict (ntative Dis	strict 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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Ser				Vages	ete this form.			R (enter a		ot listed above)	
_	Tatal are see Calcadala E4.	1_	EU ED MANAE						1	_	=11	10	(Eth: (2	T:1\
1	Total pages Schedule F1: Sch: 33/45 Rpt: 44/56	2	Raise Your		Гехаѕ					3	Filer 0008	1D 38636	(Etnics C	Commission	Filers)
4	Date	5	Payee name												
	02/17/2024		Meta												
6	Amount (\$) \$56.82	7	Payee addres 1 Hacker W	•	City;	Stat	e; Zip Co	de							
X	Expenditure from corporate funds		Menlo Park	, CA 94	1025										
8	PURPOSE OF EXPENDITURE	(a)	Category _{(Se} Advertising			e top of this s	chedule)	(b)	Description Check if travel of	outsio	de of Te	exas. Com	plete Sched	dule T.	
									Facebook Ad	S					
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi Alliso, Steve	ceholde	er name		Office sou State Re	•	sentative Distri	ict í		Office he State R		ntative Dis	trict
	Date		Payee name												
	02/17/2024		Meta												
	Amount (\$)		Payee addres	SS;	City;	Stat	e; Zip Co	de							
	\$56.46		1 Hacker W	ay											
Х	Expenditure from corporate funds		Menlo Park	, CA 94	1025										
	PURPOSE	(a)	Category (Se	ee Catego	ries listed at the	e top of this s	chedule)	(b)	Description						
	OF EXPENDITURE		Advertising	Expens	se				Check if travel of	outsio	de of Te	exas. Com	olete Sched	lule T.	
									Facebook Ad	S					
	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholde	r name		Office sou	aht				Office he	ıld		
	expenditure to benefit C/OI		Shine, Hugh					•	sentative Distri	ict 5				ntative Dis	trict 55
	Date		Payee name												
	02/17/2024		Meta												
	Amount (\$)		Payee addres	ss;	City;	Stat	e; Zip Co	de							
	\$56.46		1 Hacker W	ay											
Χ	Expenditure from corporate funds		Menlo Park	, CA 94	1025										
	PURPOSE	(a)	Category (Se	ee Catego	ries listed at the	e top of this s	chedule)	(b)	Description						
	OF EXPENDITURE		Advertising	Expens	se				Check if travel of	outsio	de of Te	exas. Com	olete Sched	lule T.	
									Facebook Ad	S					
	Complete ONLY if direct	- (Candidate/Offi	ceholde	er name		Office sou	ght			C	Office he	eld		
	expenditure to benefit C/OI		Holland, Just					•	sentative Distri	ict 3				ntative Dis	trict 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 Gitt/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		se Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
Credit Card Payment	The Instruction Guide ex	xplains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 34/45 Rpt: 45/56	Raise Your Hand Texas		00088636
4 Date	5 Payee name		
02/17/2024	Meta		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
\$54.24	1 Hacker Way		
Expenditure from			
corporate funds	Menlo Park, CA 94025		
8 PURPOSE	(a) Category (See Categories listed at the top o	of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense		outside of Texas. Complete Schedule T.
		Facebook Ad	S
		1 3.333331.71.3	
9 Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/OF		State Representative Distr	ct 4 State Representative District 4
Date	Payee name		
02/17/2024	Meta		
Amount (\$)	Payee address; City;	State; Zip Code	
\$56.29	1 Hacker Way	, ,	
·			
X Expenditure from corporate funds	Menlo Park, CA 94025		
PURPOSE	(a) Category (See Categories listed at the top o	of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense	Check if travel	outside of Texas. Complete Schedule T.
		Facebook Ad	S
			_
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/OF	H Burns, DeWayne	State Representative Distr	ct 58 State Representative District 58
Date	Payee name		
02/17/2024	Meta		
Amount (\$)	Payee address; City;	State; Zip Code	
\$56.28	1 Hacker Way		
X Expenditure from corporate funds	Menlo Park, CA 94025		
PURPOSE OF	(a) Category (See Categories listed at the top of		
EXPENDITURE	Advertising Expense	Check if travel	outside of Texas. Complete Schedule T.
		Facebook Ad	S
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/OF	Hailes, Ernest	State Representative Distr	ct 18 State Representative District 18

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services The Instruction Guide explains	Salaries/Wages/Contract Labor how to complete this form.	OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 35/45 Rpt: 46/56	Raise Your Hand Texas		00088636
4 Date	5 Payee name		
02/20/2024	Meta		
6 Amount (\$)	7 Payee address; City; State	e; Zip Code	
\$56.55	1 Hacker Way		
Expenditure from corporate funds	Menlo Park, CA 94025		
8 PURPOSE	(a) Category (See Categories listed at the top of this sc	hedule) (b) Description	
OF EXPENDITURE	Advertising Expense	Check if travel of	outside of Texas. Complete Schedule T.
_,, _,, _,,		Facebook Ads	s
9 Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/O	1	State Representative Distri	
Date	Payee name		
02/20/2024	Meta		
Amount (\$)	Payee address; City; State	e; Zip Code	
\$56.09	1 Hacker Way		
X Expenditure from corporate funds	Menlo Park, CA 94025		
PURPOSE	(a) Category (See Categories listed at the top of this sc	hedule) (b) Description	
OF EXPENDITURE	Advertising Expense		outside of Texas. Complete Schedule T.
EXI ENDITORE		Facebook Adv	_
		Facebook Ads	S
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/O	¹ Shine, Hugh	State Representative Distri	ct 55 State Representative District 55
Date	Payee name		
02/20/2024	Meta		
Amount (\$)	Payee address; City; State	e; Zip Code	
\$56.64	1 Hacker Way		
X Expenditure from corporate funds	Menlo Park, CA 94025		
PURPOSE	(a) Category (See Categories listed at the top of this sc		
OF EXPENDITURE	Advertising Expense	Check if travel of	outside of Texas. Complete Schedule T.
		Facebook Ads	S
		1 deebook Ad.	~
Complete ONLY if direct		Office sought	Office held
expenditure to benefit C/OF	¹ Dean, Jay	State Representative Distri	ct 7 State Representative District 7

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 Salarise Wagnes/Contract Labor

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Se				Vages	se s/Contract Labor ete this form.			R (enter a	category not listed	above)
_		-			Struction Gui	iue expiaiii	S HOW to Co	IIIPI	ete tilis lollii.	_				
1	Total pages Schedule F1: Sch: 36/45 Rpt: 47/56	2	FILER NAME Raise Your		Texas					3	Filer	ID 88636	(Ethics Commi	ssion Filers)
_	•	<u> </u>												
4	Date	5	Payee name											
	02/20/2024		Meta											
6	Amount (\$)	7	Payee addres	ss;	City;	Stat	e; Zip Co	de						
	\$56.38		1 Hacker W	'av										
	·			,										
Χ	Expenditure from corporate funds		Menlo City,	CA 94	025									
8	PURPOSE	(a)	Category (Se	ee Catego	ories listed at the	e top of this s	chedule)	(b)	Description					
	OF		Advertising			•	,		Check if travel of	outsi	de of T	exas. Com	plete Schedule T.	
	EXPENDITURE			•										
									Facebook Ad	S				
9	Complete ONLY if direct	(Candidate/Offi	ceholde	er name		Office sou	ght			(Office he	eld	
	expenditure to benefit C/OI	۱ ا	Darby, Drew				State Re	pres	sentative Distri	ict	72	State R	epresentativ	e District 72
	Data	Г												
	Date		Payee name											
	02/20/2024		Meta											
	Amount (\$)		Payee addres	ss;	City;	Stat	e; Zip Co	de						
	\$56.97		1 Hacker W	'ay										
Х	Expenditure from corporate funds		Menlo Park	$C\Delta \Omega$	4 025									
		<u> </u>		-										
	PURPOSE OF	(a)	Category (Se			e top of this s	chedule)	(b)	Description					
	EXPENDITURE		Advertising	Expen	ise				Check if travel of	outsi	de of T	exas. Com	plete Schedule T.	
									Facebook Ad	c				
									1 accoon ha	3				
		<u> </u>						<u> </u>						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offi		er name		Office sou	•				Office he		
	experientere to benefit over	' (Clardy, Travi	S			State Re	pres	sentative Distri	ict :	11 :	State R	epresentativ	e District 11
	Date		Payee name											
	02/20/2024		Meta											
	Amount (\$)	\vdash	Payee addres	56.	City;	Stat	e; Zip Co	nde						
	\$56.22		•		City,	Stat	.c, 2ip Cc	uc						
	φ30.22		1 Hacker W	ay										
_	Expenditure from													
Х	corporate funds		Menlo City,	CA 94	025									
	PURPOSE	(a)	Category (Se	e Catego	ories listed at the	e ton of this s	chedule)	(b)	Description					
	OF	``	Advertising			o top 0. tillo 0.	onoudio			outsi	de of T	exas. Com	plete Schedule T.	
	EXPENDITURE								_					
									Facebook Ad	S				
	Complete ONLY if direct		Candidate/Offi	ceholde	er name		Office sou	ght			(Office he	eld	
	expenditure to benefit C/O		Smith, Reggi		-			•	sentative Distri	ict (epresentativ	e District 62
			,	-									-17: 27: 1000017	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ting Expense Travel Out of District ries/Wages/Contract Labor OTHER (enter a category not listed above) to complete this form.
	·	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 37/45 Rpt: 48/56	Raise Your Hand Texas	3 Filer ID (Ethics Commission Filers) 00088636
4 Date	5 Payee name	
02/20/2024	Meta	
6 Amount (\$) \$56.53	7 Payee address; City; State; Zip 1 Hacker Way	o Code
Expenditure from corporate funds	Menlo Park, CA 94025	
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. Facebook Ads
Complete ONLY if direct expenditure to benefit C/OH		sought Office held Representative District 88 State Representative District 88
Data		
Date 02/20/2024	Payee name Meta	
Amount (\$)	Payee address; City; State; Zip	Code
\$56.94	1 Hacker Way	
X Expenditure from corporate funds	Menlo Park, CA 94025	
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.
		Facebook Ads
Complete ONLY if direct		sought Office held
expenditure to benefit C/OF	¹ VanDeaver, Gary State	Representative District 1 State Representative District 1
Date 02/20/2024	Payee name Meta	
Amount (\$)	Payee address; City; State; Zip) Code
\$55.91	1 Hacker Way	Couc
X Expenditure from corporate funds	Menlo Park, CA 94025	
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		Facebook Ads
Complete ONLY if direct expenditure to benefit C/Oh		sought Office held Representative District 60 State Representative District 60

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

	Candidate/Officeholder/Politica Credit Card Payment	I Co	mmittee	Legal Se		•		Wages	ete this form.		OTHER (enter		gory not listed above)	
1	Total pages Schedule F1:	2	FII FR NAME						I	3	Filer ID	(Ft	hics Commission F	ilers)
_	Sch: 38/45 Rpt: 49/56	_	Raise Your		Texas						00088636	,		
4	Date	5	Payee name											
	02/20/2024		Meta											
6	Amount (\$)	7	Payee addre	ess;	City;	State	; Zip Co	ode						
	\$56.14		1 Hacker W	/ay										
	- Evpanditura from													
Х	Expenditure from corporate funds		Menlo park	, CA 9	4025									
8	PURPOSE OF	(a)	Category (S	ee Categ	ories listed at the	e top of this sc	hedule)	(b)	Description					
	EXPENDITURE		Advertising	Exper	ıse				Check if travel of	outsic	de of Texas. Co	omplete	Schedule T.	
									Facebook Ad	S				
9	Complete ONLY if direct	(Candidate/Off	icehold	er name		Office sou	<u>I</u> ıght			Office	held		
	expenditure to benefit C/OF	۱ ا	_ambert, Sta	an			State Re	pres	sentative Distri	ict 7	71 State	Repr	esentative Dist	rict 71
	Date		Payee name	1										
	02/20/2024		Meta											
	Amount (\$)		Payee addre	ess;	City;	State	; Zip Co	ode						
	\$56.46		1 Hacker W	/ay										
Χ	Expenditure from corporate funds		Menlo Park	, CA 9	4025									
	PURPOSE	(a)	Category (S	ee Categ	ories listed at the	e top of this sc	hedule)	(b)	Description					
	OF EXPENDITURE		Advertising	Exper	nse				Check if travel of	outsic	de of Texas. Co	omplete	Schedule T.	
									Facebook Ad	S				
									T GOOD ON THE	J				
	Complete ONLY if direct		Candidate/Off	icehold	er name		Office sou	ıght			Office	held		
	expenditure to benefit C/OF	۱ ۲	Kuempel, Jo	hn			State Re	pres	sentative Distri	ict 4	14 State	Repr	esentative Dist	rict 44
	Date		Payee name	!										
	02/20/2024		Meta											
	Amount (\$)		Payee addre	ess;	City;	State	; Zip Co	ode						
	\$55.67		1 Hacker W	/ay										
Χ	Expenditure from corporate funds		Menlo Park	, CA 9	4025									
	PURPOSE	(a)	Category (S	ee Categ	ories listed at the	e top of this sc	hedule)	(b)	Description					
	OF EXPENDITURE		Advertising	Exper	nse				Check if travel of	outsic	de of Texas. Co	mplete	Schedule T.	
									Facebook Ad	c				
									. account Au	J				
	Complete ONLY if direct	(Candidate/Off	icehold	er name		Office sou	ıght			Office	held		
	expenditure to benefit C/O	١,	Allison, Stev	е				-	sentative Distri	ict 1	L21 State	Repr	esentative Dist	rict

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services The Instruction Guide 6	Salaries/V	Wages/Contract Labor		OTHER (enter a	category not listed above))
1	Total pages Schedule F1:	2 FILED NAMI				3 5	iler ID	(Ethics Commission	Filers)
_	Sch: 39/45 Rpt: 50/56		Hand Texas			- 1	00088636	(
4	Date	5 Payee name	:						
	02/20/2024	Meta							
6	Amount (\$) \$55.71	7 Payee addre 1 Hacker V		State; Zip Co	ode				
Х	Expenditure from corporate funds	Menlo Park	c, CA 94025						
8	PURPOSE	(a) Category (S	see Categories listed at the top	of this schedule)	(b) Description				
	OF	Advertising		,	Check if tra	vel outside	of Texas. Com	plete Schedule T.	
	EXPENDITURE				Facebook	Ads			
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	ıaht		Office he	eld	
	expenditure to benefit C/O				presentative Di	strict 99	9 State R	Representative Dis	trict 99
	Date	Payee name	!						
	02/20/2024	Meta							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode				
	\$56.17	1 Hacker V	/ay						
Х	Expenditure from corporate funds	Menlo Park	x, CA 94025						
	PURPOSE	(a) Category (S	see Categories listed at the top	of this schedule)	(b) Description				
	OF EXPENDITURE	Advertising		,		vel outside	of Texas. Com	plete Schedule T.	
	EXPENDITURE		·						
					Facebook	Ads			
	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	ıght		Office he	eld	
	expenditure to benefit C/OF	¹ Holland, Jus	tin	State Re	presentative Di	strict 33	3 State R	epresentative Dis	trict 33
	Date	Dayos nome							
		Payee name							
	02/20/2024	Meta							
	Amount (\$)	Payee addre		State; Zip Co	ode				
	\$55.73	1 Hacker V	/ay						
Χ	Expenditure from corporate funds	Menlo Park	x, CA 94025						
	PURPOSE	(a) Category (S	see Categories listed at the top	of this schedule)	(b) Description				
	OF EXPENDITURE	Advertising			Check if tra	vel outside	of Texas. Com	plete Schedule T.	
	EXPENDITORE								
					Facebook	Ads			
	Complete ONLY if direct		iceholder name	Office sou	ught		Office he	eld	
	expenditure to benefit C/OI	H Burns, DeW	ayne	State Re	presentative Di	strict 58	3 State R	Representative Dis	trict 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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to	o complete this form.
1 Total pages Schedule F1: Sch: 40/45 Rpt: 51/56	FILER NAME Raise Your Hand Texas	3 Filer ID (Ethics Commission Filers) 00088636
4 Date 02/20/2024	5 Payee name Meta	Code
6 Amount (\$) \$55.89	7 Payee address; City; State; Zip 1 Hacker Way	Code
X Expenditure from corporate funds	Menlo Park, CA 94025	
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. Facebook Ads
Complete ONLY if direct expenditure to benefit C/OF	1	sought Office held Representative District 18 State Representative District 18
Date 02/24/2024	Payee name Meta	
Amount (\$) \$56.30 X Expenditure from corporate funds	Payee address; City; State; Zip 1 Hacker Way Menlo Park, CA 94025	Code
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. Facebook Ads
Complete ONLY if direct expenditure to benefit C/O	i e	sought Office held Representative District 18 State Representative District 18
Date 02/24/2024	Payee name Meta	
Amount (\$) \$57.41	Payee address; City; State; Zip 1 Hacker Way	Code
X Expenditure from corporate funds	Menlo Park, CA 94025	
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. Facebook Ads
Complete ONLY if direct expenditure to benefit C/Oh		sought Office held Representative District 121 State Representative District

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 Salaries/Mange/Control Labor

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explain	s how to complete this form.	OTHER (enter a category not listed above)						
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)						
Sch: 41/45 Rpt: 52/56	Raise Your Hand Texas		00088636						
4 Date	5 Payee name								
02/24/2024	Meta								
6 Amount (\$)	7 Payee address; City; Stat	e; Zip Code							
\$55.98	1 Hacker Way								
— Comparable was from									
X Expenditure from corporate funds	Menlo Park, CA 94025								
8 PURPOSE	(a) Category (See Categories listed at the top of this se	chedule) (b) Description							
OF EXPENDITURE	Advertising Expense	Check if travel o	Check if travel outside of Texas. Complete Schedule T.						
		Facebook Ads							
		, acceptant							
9 Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held						
expenditure to benefit C/OI		State Representative Distri							
Date	Payee name	·	<u></u>						
02/24/2024	Meta								
Amount (\$)		e; Zip Code							
\$56.14	1 Hacker Way	e, Zip Code							
Ψ50.14	Triacker way								
X Expenditure from	Monlo Park CA 04025								
Corporate funds	Menlo Park, CA 94025	la s							
PURPOSE OF	(a) Category (See Categories listed at the top of this s		utside of Texas. Complete Schedule T.						
EXPENDITURE	Advertising Expense	Check ii tiaver o	uiside of rexus. Complete Scriedule 1.						
		Facebook Ads	5						
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held						
expenditure to benefit C/OI	^H Shine, Hugh	State Representative Distri	ct 55 State Representative District 55						
Date	Payee name								
02/24/2024	Meta								
Amount (\$)	Payee address; City; Stat	e; Zip Code							
\$56.25	1 Hacker Way								
X Expenditure from corporate funds	Menlo Park, CA 94025								
PURPOSE	(a) Category (See Categories listed at the top of this so	chedule) (b) Description							
OF EXPENDITURE	Advertising Expense	Check if travel o	utside of Texas. Complete Schedule T.						
		Facebook Ads							
		1 doebook Aus	-						
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held						
expenditure to benefit C/O		State Representative Distri							
	-,9 -		.,						

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Se				/ages	se s/Contract Labor ete this form.			R (enter a	category not list	ted above)	
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1	Total pages Schedule F1:	2	Raise Your		Toyos					3	Filer	1D 88636	(Ethics Com	mission Filers)	
_	Sch: 42/45 Rpt: 53/56	L		пани	Texas						0000	00000			_
4	Date	5	Payee name												
	02/24/2024		Meta												
6	Amount (\$)	7	Payee addres	SS;	City;	Stat	e; Zip Co	de							
	\$56.06		1 Hacker W	ay											
_	Expenditure from														
Χ	corporate funds		Menlo Park	, CA 9	4025										
8	PURPOSE	(a)	Category (Se	ee Catego	ories listed at th	e top of this s	chedule)	(b)	Description						_
	OF EXPENDITURE		Advertising						Check if travel of	outsi	de of T	exas. Com	plete Schedule	Т.	
	EXI ENDITORE								Facebook Ad	_					
									racebook Au	3					
_	Complete ONLY if direct	<u> </u>	Condidate/Offi	aabald	or nome		Office	abt				Office by	ald		_
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi Kuempel, Jol		er name		Office sou	•	sentative Distri	ict /		Office he		ive District 44	
			tuerriper, Joi	1111			State Ive	pic	beritative Distri	- Cι ·	++ ,	State IX	ергезептат	IVE DISTRICT 44	=
	Date		Payee name												
	02/24/2024		Meta												
	Amount (\$)		Payee addres	ss;	City;	Stat	e; Zip Co	de							
	\$56.27		1 Hacker W	ay											
_	T Expenditure from														
Х	corporate funds		Menlo Park	, CA 9	4025										
	PURPOSE	(a)	Category (Se	ee Catego	ories listed at th	e top of this s	chedule)	(b)	Description						_
	OF EXPENDITURE		Advertising			·	•		Check if travel of	outsi	de of T	exas. Com	plete Schedule	Т.	
	EXI ENDITORE								Facebook Ad	_					
									Facebook Ad	S					
	Operation ONLY if allowed	L_	2 11 - 1 - t - 10#1				04:	1 4				Off: -	-1-1		_
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	ш	Candidate/Offi	cenola	er name		Office sou	•	contativo Dietri	ict -		Office he		ivo Dietriet 7	
			Dean, Jay				State Re	pres	sentative Distri	Cl	,	State R	epresentat	ive District 7	=
	Date		Payee name												
	02/24/2024		Meta												
	Amount (\$)		Payee addres	ss;	City;	Stat	e; Zip Co	de							
	\$56.76		1 Hacker W	ay											
	Evpanditura from														
Х	Expenditure from corporate funds		Menlo Park	, CA 9	4025										
	PURPOSE	(a)	Category (Se	ee Catego	ories listed at th	e top of this s	chedule)	(b)	Description						_
	OF EXPENDITURE		Advertising				,		Check if travel of	outsi	de of T	exas. Com	plete Schedule	Т.	
	EXPENDITORE								-						
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	2							_							_
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi		er name		Office sou	•	andative Distri			Office he		in a Diatrict CO	
	Oracide to borionic O/O1	· · ·	Rogers, Glen	ırı			State Re	pres	sentative Distri	ict (bU :	State R	epresentat	ive District 60	_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 43/45 Rpt: 54/56	2 FILER NAME Raise Your Hand Texas 3 Filer ID (Ethics Commission Filers) 00088636
4 Date 02/24/2024	5 Payee name Meta
6 Amount (\$) \$56.38	7 Payee address; City; State; Zip Code 1 Hacker Way
X Expenditure from corporate funds	Menlo Park, CA 94025
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. Facebook Ads
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held State Representative District 71 State Representative District 71
Date 02/24/2024	Payee name Meta
Amount (\$) \$55.87 Expenditure from corporate funds	Payee address; City; State; Zip Code 1 Hacker Way
corporate funds PURPOSE	Menlo Park, CA 94025 (a) Category (See Categories listed at the top of this schedule) (b) Description
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. Facebook Ads
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held State Representative District 11 State Representative District 11
Date 02/24/2024	Payee name Meta
Amount (\$) \$56.10	Payee address; City; State; Zip Code 1 Hacker Way
X Expenditure from corporate funds	Menlo Park, CA 94025
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. Facebook Ads
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held State Representative District 1 State Representative District 1

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

Credit Card Payment	The Instruction Guide expl	ains how to complete this form.	,
1 Total pages Schedule F1: Sch: 44/45 Rpt: 55/56	FILER NAME Raise Your Hand Texas		3 Filer ID (Ethics Commission Filers) 00088636
4 Date 02/24/2024	5 Payee name Meta		
6 Amount (\$) \$56.64	7 Payee address; City; S 1 Hacker Way	state; Zip Code	
X Expenditure from corporate funds	Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Advertising Expense		ol outside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name H Smith, Reggie	Office sought State Representative Dist	Office held rict 62 State Representative District 62
Date 02/24/2024	Payee name Meta		
Amount (\$) \$56.76 Expenditure from corporate funds	Payee address; City; S 1 Hacker Way Menlo Park, CA 94025	itate; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Advertising Expense		ol outside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H Darby, Drew	Office sought State Representative Dist	Office held rict 72 State Representative District 72
Date 02/24/2024	Payee name Meta		
Amount (\$) \$57.05	Payee address; City; S 1 Hacker Way	itate; Zip Code	
X Expenditure from corporate funds	Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of thi Advertising Expense		ol outside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H King, Ken	Office sought State Representative Dist	Office held rict 88 State Representative District 88

POLITICAL EXPENDITURES SCHEDULE F1 **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services 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 complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 45/45 Rpt: 56/56 Raise Your Hand Texas 00088636 4 Date Payee name 02/24/2024 Meta 6 Amount (\$) Payee address; City; State; Zip Code \$55.58 1 Hacker Way Expenditure from Χ Menlo Park, CA 94025 corporate funds **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Facebook Ads Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Geren, Charlie State Representative District 99 State Representative District 99 Date Payee name 02/24/2024 Meta Amount (\$) Payee address; City; State; Zip Code \$54.45 1 Hacker Way Expenditure from Х Menlo Park, CA 94025 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Facebook Ads Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Bell, Keith State Representative District 4 State Representative District 4