CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1	`	cs Commission Filers)	2 Total pages filed:			OFFIC	E USE ONLY
	00088296		46			Date Received	
3	CANDIDATE /	MS / MRS / MR	FIRST		MI	ELECTRON	ICALLY FILED
	OFFICEHOLDER NAME		Jace R.			05/03/2024	
		NICKNAME	LAST		SUFFIX		
			Yarbrough			Date Hand deliver	ed or Date Postmarked
4	ORIGINAL	January 15	Runoff	Other ((specify)	Date Hand-deliver	ed of Bate i ostinarked
	REPORT TYPE	July 15	Exceeded modified	reporting limit		Receipt #	Amount
		30th day before election	15th day after cam				
		X 8th day before election	appointment (office	• • •		Date Processed	<u> </u>
_	ODICINIAL DEDICE		<u> </u>	·	Vasu	_	
5	ORIGINAL PERIOD COVERED	Month Day Yea 01/26/2024	THROUGH	Month Day 02/24/2024	Year	Date Imaged	
_	EVEL ANATION OF C			02/24/2024			
,	EXPLANATION OF C	eing filed due to a clerical e		Library and a second second second	0-11-1 44 -4	Also solistical access	
7	AFFIDAVIT		and	rear, or affirm, under p correct. eck the box next to an			·
7	AFFIDAVIT		and	correct.	y and all applica ts: I swear, o faith and withou	able statements: r affirm that the c t an intent to mis	original report lead or to
7	AFFIDAVIT		and	correct. ck the box next to an Semiannual repor was made in good to	y and all applica ts: I swear, o faith and withou formation conta swear, or affirm the 14th busine riginally filed is i at any error or o	able statements: r affirm that the c t an intent to mis ined in the report n, that I am filing t ess day after the naccurate or inco	original report lead or to t. this corrected date I learned omplete. I
7	AFFIDAVIT		and Che	Semiannual report was made in good misrepresent the in Other reports: I report not later than that the report as or swear, or affirm, that	y and all applica ts: I swear, o faith and withou formation conta swear, or affirm the 14th busine riginally filed is i at any error or o	able statements: r affirm that the c t an intent to mis ined in the report n, that I am filing t ess day after the naccurate or inco mission in the re	original report lead or to t. this corrected date I learned omplete. I
7		AMP / SEAL ABOVE	and Che	Semiannual report was made in good misrepresent the in Other reports: I report not later than that the report as on swear, or affirm, that filed was made in g	ts: I swear, of faith and withou formation contant swear, or affirm the 14th busing riginally filed is it any error or olood faith.	able statements: r affirm that the c t an intent to mis ined in the report n, that I am filing t ess day after the naccurate or inco mission in the re	original report lead or to t. this corrected date I learned omplete. I port as originally
7	AFFIX NOTARY ST		and Che	Semiannual report was made in good of misrepresent the in Other reports: I report not later than that the report as or swear, or affirm, that filed was made in g Signat	ts: I swear, o faith and withou formation conta swear, or affirm the 14th busing riginally filed is it any error or o good faith. Jace R. Yar ture of Candidat	able statements: r affirm that the of the an intent to misined in the report n, that I am filing the ess day after the naccurate or incomission in the restriction of the restriction	original report lead or to t. this corrected date I learned omplete. I port as originally
7	AFFIX NOTARY ST. Sworn to and subsci	AMP / SEAL ABOVE ribed before me, by the sai	and Che	Semiannual report was made in good misrepresent the in Other reports: I report not later than that the report as or swear, or affirm, that filed was made in g	ts: I swear, o faith and withou formation conta swear, or affirm the 14th busin riginally filed is i at any error or o lood faith. Jace R. Yar ture of Candidat , this	able statements: r affirm that the of the an intent to misined in the report n, that I am filing the ess day after the naccurate or incomission in the restriction of the restriction	original report lead or to t. this corrected date I learned omplete. I port as originally
7	AFFIX NOTARY ST. Sworn to and subsci	ribed before me, by the sai	and Che	Semiannual report was made in good misrepresent the in Other reports: I report not later than that the report as or swear, or affirm, that filed was made in g	ts: I swear, o faith and withou formation conta swear, or affirm the 14th busin riginally filed is i at any error or o lood faith. Jace R. Yar ture of Candidat , this	able statements: r affirm that the of the an intent to misined in the report n, that I am filing the ess day after the naccurate or incomission in the restriction of the restriction	original report lead or to t. this corrected date I learned omplete. I port as originally

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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple	ete this form.	1 Filer ID (Ethics Commis 00088296	sion Filers)	2 Total pages fil	ed: 6
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST Jace R.		MI		JSE ONLY
NAME					Date Received ELECTRONICA	ALLY FILED
	NICKNAME	LAST		SUFFIX	05/03/2024	
		Yarbrough				
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered o	r Date Postmarked
MAILING ADDRESS	9285 Culp Branch Rd.				Receipt #	Amount
Change of Address	Sanger, TX 76266				Date Processed	
					Date Imaged	
5 CAMPAIGN TREASURER		FIRST		MI	-	
NAME		William				
	NICKNAME	LAST		SUFFIX		
		McNutt				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	APT	/ SUITE #; CITY;	STA	ATE; ZIP CODE
TREASURER ADDRESS	13101 Preston Road					
(Residence or Business)	Dallas, TX 75240					
7 CAMPAIGN TREASURER	AREA CODE PHON	E NUMBER E	EXTENSION			
PHONE	(469) 533-5025					
8 REPORT TYPE	January 15	30th day before	election	Runoff	15th day after car	mpaign treasurer
				Exceeded modified	appointment (office Final Report (Atta	ceholder only)
	July 15 X	. J our day belore t		reporting limit	Tillal Report (Alla	ich cion-i iv
9 PERIOD COVERED	Month Day Year 01/26/2024	T⊔	IROUGH	Month Day 02/24/202	Year	
	01/20/2024	111	1100011	021241202	4	
10 ELECTION	ELECTION DATE Month Day Year		vieno en /	ELECTION TYPE	Othor	
	Month Day Year 03/05/2024		rimary eneral	Special	Other	
			enerai	Special		
11 OFFICE	OFFICE HELD (if any)	·		12 OFFICE SOUGHT		
				State Senator Di	strict 30	
	•					
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

3 of 46

13 C / OH NAME	Yarbrough, Jace R.		14 Filer ID (I	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures may have been made without to officeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		I ZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 70.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 31,387.80
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 190,476.36
CONTRIBUTION BALANCE	REPORTING PE			\$ 56,415.81
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 200,000.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		Jac	e R. Yarbrough	
		Signature of	Candidate or Officeholo	der
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
of				
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			C	OVER SHEE	ET PG 3 4 of 46
	LER NAM	ME n, Jace R.	19 Filer ID 00088296	(Ethics Commiss	ion Filers)
		E SUBTOTALS SCHEDULE		SUBTOTAL	AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	30,892.80
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	495.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	190,476.36
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS ITO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRI	IBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to compl	ete this forn	n.	1	Total pages Schedule A1: Sch: 1/15 Rpt: 5/46	
2	FILER NAME Yarbrough, 3	ace R.			3	Filer ID (Ethics Commission 00088296	on Filers)
4	Date 02/08/2024	Allen, John 6 Contributor address; City; State; Zip Code			7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu Self	Stephenville, TX 76401 pation / Job title (See Instructions)	9	Employer (See Instructions Self	5)		
	Date 02/03/2024	BROSSEAU, Thomas Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu Sales	Dallas, TX 75220 pation / Job title (See Instructions)		Employer (See Instructions Blue Star Commercial	<u>;</u>)		
	Date 01/31/2024	Bean, John Contributor address; City; State; Zip Code	te PAC (ID#:)		Amount of Contribution (\$)	\$26.35
	Principal occu	Lampasas, TX 76550 pation / Job title (See Instructions)		Employer (See Instructions retired	<u>;</u>)		
Date Full name of contributor out-of-state PA 01/31/2024 Bean, Sheila)		Amount of Contribution (\$)	\$26.35	
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	<u> </u>		
	Date 02/07/2024	Beck, Andrew				Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUI	LE A1
	The Instru	ction Guide explains how t	to complete this for	m.	1	Total pages Schedule A1: Sch: 2/15 Rpt: 6/46	
2	FILER NAME Yarbrough, 3	lace R.			3	Filer ID (Ethics Commission 00088296	on Filers)
4	Date 01/30/2024	5 Full name of contributor Blair, Melinda6 Contributor address; City; State	out-of-state PAC (ID#: te; Zip Code		7	Amount of Contribution (\$)	\$10.73
8	Principal occu	Willow Park, TX 76087 pation / Job title (See Instructions)	اه	Employer (See Instructions	·)		
0	retired	pation / Job title (See Instructions)	9	retired	·)		
	Date 02/02/2024	Full name of contributor Blizzard, Garrit Contributor address; City; Stat			•	Amount of Contribution (\$)	\$5.00
		Bivins, TX 75555	,				
	Principal occu student	pation / Job title (See Instructions)		Employer (See Instructions student	S)		
	Date 02/07/2024	Full name of contributor Enosseau, Thomas Contributor address; City; Stat	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$100.00
		Dallas, TX 75220			<u>_</u>		
	Principal occu Sales	pation / Job title (See Instructions)		Employer (See Instructions Blue Star	5)		
	Date 02/16/2024	Full name of contributor E Brosseau, Tom Contributor address; City; Stat Dallas, TX 75220)		Amount of Contribution (\$)	\$250.00
	Principal occu Broker	pation / Job title (See Instructions)		Employer (See Instructions Blue Star Commercial F		l Estate	
	Date 02/13/2024	Full name of contributor Burton, Phillip Contributor address; City; Stat Weatherford, TX 76087				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Simpson Strong-Tie	5)		
			L	-			

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUI	E A1
	The Instru	ction Guide explains hov	v to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 3/15 Rpt: 7/46	
2	FILER NAME Yarbrough, J	Jace R.				3	Filer ID (Ethics Commission 00088296	on Filers)
4	Date 02/07/2024	5 Full name of contributor Byrne, Ryan6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Dallas, TX 75229 pation / Job title (See Instruction:	5)	9	Employer (See Instructions	s)		
-	retired	(000	-,		retired	-,		
	Date 02/19/2024	Full name of contributor Carstens, Zach Contributor address; City; S)	•	Amount of Contribution (\$)	\$104.48
		Dallas, TX 75238						
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Date 02/16/2024	Full name of contributor Celeste, Maria Contributor address; City; S	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$10.73
		Little Elm, TX 75068						
	Principal occu Finance	pation / Job title (See Instructions	5)		Employer (See Instructions PEPSICO FRITO-LAY	5)		
	Date 02/17/2024	Full name of contributor Chane, Brandi Contributor address; City; S Fort Worth, TX 76108)		Amount of Contribution (\$)	\$104.48
	Principal occu Pharmacy O	pation / Job title (See Instructions wner	5)		Employer (See Instructions Davis City Pharmacy	5)		
	Date 02/12/2024	Full name of contributor Clay, Dana Contributor address; City; S Bowie, TX 76230)		Amount of Contribution (\$)	\$5,208.65
	Principal occu Health Provi	pation / Job title (See Instructions der	5)		Employer (See Instructions High Plains Health Prov		rs	

	MONET	ARY POLITICAL CONTRII	BUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to comple	ete this for	m.	1	Total pages Schedule A1: Sch: 4/15 Rpt: 8/46	
2	FILER NAME Yarbrough, 3	ace R.			3	Filer ID (Ethics Commission 00088296	n Filers)
4	Date 02/06/2024	 Full name of contributor out-of-state Cody, Shane Contributor address; City; State; Zip Code 	PAC (ID#:		7	Amount of Contribution (\$)	\$250.00
_	Deignaignal	Henrietta, TX 76365	ام	Facularias (Coo Instructions			
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 02/04/2024	Colman, Ronin	PAC (ID#:			Amount of Contribution (\$)	\$260.73
	Deinsinal assu	Arlington, TX 76016	- 1	Franks on (Cas Instructions	_		
	retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 02/07/2024)		Amount of Contribution (\$)	\$250.00
		Dallas, TX 75209					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date 02/20/2024	Cuff, Andrew Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$26.35
	Principal occu	Ligonier, PA 15658 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 01/26/2024	Full name of contributor out-of-state Cure, Richard Contributor address; City; State; Zip Code Sanger, TX 76266				Amount of Contribution (\$)	\$50.00
	Principal occu Farmer Rand	pation / Job title (See Instructions) cher		Employer (See Instructions)		
			l				

	MONET	ARY POLITICAL CO	ONTRIBUTION	IS		SCHEDUI	E A1
	The Instruc	ction Guide explains how t	o complete this for	m.	1	Total pages Schedule A1: Sch: 5/15 Rpt: 9/46	
2	FILER NAME Yarbrough, J	Jace R.			3	Filer ID (Ethics Commission 00088296	on Filers)
4	Date 02/12/2024	5 Full name of contributor Curtin, Cale6 Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code		7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Oak Point, TX 75068 pation / Job title (See Instructions)	وا	Employer (See Instructions	·)		
0	Corporate Co		l ⁹	Matador Resources Cor		any	
	Date 02/15/2024	Full name of contributor Dolansky, Mary Contributor address; City; State)	•	Amount of Contribution (\$)	\$175.00
		Roanoke, TX 76262	+				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 02/05/2024	Full name of contributor DuBose, Clifton Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$1,041.98
		Fort Worth, TX 76132					
	Principal occu Co-Founder	pation / Job title (See Instructions)		Employer (See Instructions Valor	s)		
	Date 02/24/2024	Full name of contributor Ellett, Taz Contributor address; City; State Wichita Falls, TX 76308	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions Bishop Realtor Group	5)		
	Date 02/18/2024	Full name of contributor Family, Niederer Contributor address; City; State Shady Shores, TX 76208	out-of-state PAC (ID#:e; Zip Code)	•	Amount of Contribution (\$)	\$500.00
	Principal occu Self	pation / Job title (See Instructions)		Employer (See Instructions Self	s)		
			·				

	MONET	ARY POLITICAL CONTR	IBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to comp	lete this forr	n.	1	Total pages Schedule A1: Sch: 6/15 Rpt: 10/46	
2	FILER NAME Yarbrough, 3	ace R.			3	Filer ID (Ethics Commission 00088296	n Filers)
4	Date 02/12/2024	 Full name of contributor out-of-star Fleming, JoAnn Contributor address; City; State; Zip Cod)	7	Amount of Contribution (\$)	\$260.73
_	<u> </u>	Flint, TX 75762	- la		_		
8	retired	pation / Job title (See Instructions)	9	Employer (See Instructions retired	5)		
	Date 02/19/2024	Flewelling, Marsha				Amount of Contribution (\$)	\$104.48
	Dringing agg	Frisco, TX 75036	İ	Employer (See Instructions	·,		
	Principal occupation / Job title (See Instructions) Administrative Assistant			Employer (See Instructions Seniors Outreach	5)		
	Date 02/01/2024	Fuqua, Porter	ate PAC (ID#:			Amount of Contribution (\$)	\$100.00
		Dallas, TX 75214					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 01/26/2024	Full name of contributor out-of-state PAC (ID#:) Goodloe, Lynda Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$50.00
	Principal occu	Sanger, TX 76266 pation / Job title (See Instructions)		Employer (See Instructions retired	<u> </u> 5)		
	Date 02/22/2024	Green, Susan	ate PAC (ID#:			Amount of Contribution (\$)	\$26.35
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
			I				

	MONET	ARY POLITICAL CONTRIB	UTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete	e this for	n.	1	Total pages Schedule A1: Sch: 7/15 Rpt: 11/46	
2	FILER NAME Yarbrough, J	ace R.			3	Filer ID (Ethics Commission 00088296	n Filers)
4	Date 02/13/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$10.73
		Frisco, TX 75035					
8	Principal occu retired	pation / Job title (See Instructions)	9	Employer (See Instructions retired	s)		
	Date 02/07/2024	Full name of contributor out-of-state P Harris, Aaron Contributor address; City; State; Zip Code North Richland Hills, TX 76180			•	Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> S)		
	Coffee make	r		Lmk Strategies			
	Date 01/26/2024	Full name of contributor	PAC (ID#:)		Amount of Contribution (\$)	\$52.40
		Aubrey, TX 76227					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 02/07/2024	Full name of contributor out-of-state P Huffines, Terence Contributor address; City; State; Zip Code Dallas, TX 75206	,			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 		
	Date 02/22/2024	Full name of contributor out-of-state P Hughes, Pamela Contributor address; City; State; Zip Code Wichita Falls, TX 76310)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>1 </u>		
			I				

	MONET	ARY POLITICAL CONTRIBU	TIOI	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	nis foi	rm.	1	Total pages Schedule A1: Sch: 8/15 Rpt: 12/46	
2	FILER NAME Yarbrough, J	Jace R.			3	Filer ID (Ethics Commission 00088296	n Filers)
4	Date 01/29/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$500.00
_		Argyle, TX 76226			_		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Date 01/29/2024	Full name of contributor out-of-state PAC Ingram, Crissy Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$26.35
	Deinsinal assu	Fort Worth, TX 76116		Francis vou (Coo la structione	<u></u>		
	Principal occupation / Job title (See Instructions) Executive Director			Employer (See Instructions National Association of		men in Construction	
	Date 01/31/2024	Full name of contributor out-of-state PAC Jarvis, Hunter Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$208.65
		Allen, TX 75002			<u> </u>		
	Real Estate	pation / Job title (See Instructions) Investor		Employer (See Instructions Jarvis Real Estate Inves	•	ent Group	
	Date 02/05/2024	Full name of contributor out-of-state PAC (Jarvis, Sam Contributor address; City; State; Zip Code Dallas, TX 75238)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Commercial	pation / Job title (See Instructions) Banker		Employer (See Instructions Veritex Bank	5)		
	Date 02/19/2024	Full name of contributor out-of-state PAC (Kacsmaryk, Ron Contributor address; City; State; Zip Code Fort Worth, TX 76126				Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
			ı				

	MONET	ARY POLITICAL CONTRIBUTI	ON	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 9/15 Rpt: 13/46	
2	FILER NAME Yarbrough, J	ace R.			3	Filer ID (Ethics Commission 00088296	n Filers)
4	Date 01/28/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$52.40
8	Dringing agg	Huntersville, NC 28078	٦	Employer (See Instructions	<u></u>		
0	Director	pation / Job title (See Instructions)	٩	Employer (See Instructions CSUSA	·)		
	Date 02/07/2024	Full name of contributor out-of-state PAC (ID# Killmeyer, Jason Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$208.65
		Pittsburgh, PA 15222	_				
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Self	S)		
	Date 02/07/2024	Full name of contributor	t:		-	Amount of Contribution (\$)	\$100.00
		Dallas, TX 75209					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 02/11/2024	Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$104.48
	Principal occu Consultant	Plano, TX 75025 pation / Job title (See Instructions)		Employer (See Instructions Self	<u> </u> s)		
	Date 02/06/2024	Full name of contributor out-of-state PAC (ID# Lamb, Phillip Contributor address; City; State; Zip Code Plano, TX 75025)		Amount of Contribution (\$)	\$104.48
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Self	s)		

	MONET	ARY POLITICAL CONTRIBU	TION	NS		SCHEDUI	LE A1
	The Instruc	ction Guide explains how to complete th	nis for	m.	1	Total pages Schedule A1: Sch: 10/15 Rpt: 14/46	
2	FILER NAME Yarbrough, J	Jace R.			3	Filer ID (Ethics Commission 00088296	on Filers)
4	Date 02/07/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$250.00
_		Sunnyvale, TX 75182	1-		Ĺ		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 02/05/2024	Full name of contributor out-of-state PAC Maibach, Michael Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
		Alexandria, VA 22314					
	Principal occu Managing Di	pation / Job title (See Instructions) irector		Employer (See Instructions James Wilson Institute	s)		
	Date 02/06/2024	Full name of contributor	(ID#:)		Amount of Contribution (\$)	\$104.48
		FORT LAUDERDALE, FL 33305					
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions Sunshine Kids Pediatric		are	
	Date 02/02/2024	Full name of contributor out-of-state PAC Meek, Dena Contributor address; City; State; Zip Code Oak Point, TX 75068)		Amount of Contribution (\$)	\$1,500.00
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions First Omni Realty	5)		
	Date 02/11/2024	Full name of contributor out-of-state PAC Meek, Dena Contributor address; City; State; Zip Code Oak Point, TX 75068				Amount of Contribution (\$)	\$500.00
	Principal occu Realtor	pation / Job title (See Instructions)		Employer (See Instructions First Omni Realty	5)		
			1				

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 11/15 Rpt: 15/46	
2	FILER NAME Yarbrough, J	lace R.			3	Filer ID (Ethics Commission 00088296	on Filers)
4	Date 02/20/2024	6 Contributor address; City; State	out-of-state PAC (ID#:; Zip Code		7	Amount of Contribution (\$)	\$100.00
8	Principal occu retired	Wichita Falls, TX 76306 pation / Job title (See Instructions)		Employer (See Instructions retired)		
	Date 02/02/2024	Full name of contributor Mitchell, Bryan Contributor address; City; State Grapevine, TX 76051	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired)		
	Date 02/06/2024	Full name of contributor Murphy, Dave Contributor address; City; State	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Aubrey, TX 76227 pation / Job title (See Instructions)		Employer (See Instructions retired)		
	Date 01/29/2024	Full name of contributor Norred, Warren Contributor address; City; State Arlington, TX 76001	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Norred Law, PLLC)		
	Date 02/05/2024	Full name of contributor Owen, Jan Contributor address; City; State Jacksboro, TX 76458	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$3.00
	Principal occu Rural Carrier	pation / Job title (See Instructions) - Associate		Employer (See Instructions USPS)		
			·				

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUI	E A1
	The Instru	ction Guide explains hov	v to complete this fo	ori	n.	1	Total pages Schedule A1: Sch: 12/15 Rpt: 16/46	
2	FILER NAME Yarbrough, 3	Jace R.				3	Filer ID (Ethics Commission 00088296	on Filers)
4	Date 02/12/2024	5 Full name of contributor Owens, Natasha6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$1,041.98
_		Frisco, TX 75034	, ,	_		Ĺ		
8	Singer	pation / Job title (See Instruction	5)	9	Employer (See Instructions Natasha owens music			
	Date 02/17/2024	Full name of contributor Owings, Leslie Contributor address; City; S)		Amount of Contribution (\$)	\$500.00
	Principal occu	Aledo, TX 76008 pation / Job title (See Instruction:	s) I		Employer (See Instructions	<u> </u> ;)		
			,					
	Date 02/02/2024	Full name of contributor Peden, Rena Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code)		Amount of Contribution (\$)	\$2,000.00
	Dringinal acqu	Fort Worth, TX 76108 pation / Job title (See Instruction:	2)		Employer (See Instructions	·/		
	retired	pation / 300 title (See instruction	5)		retired	•)		
	Date 02/08/2024	Full name of contributor Plangman, Joel Contributor address; City; S Denton, TX 76209)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instruction	5)		Employer (See Instructions	<u>(</u>		
	Date 02/10/2024	Full name of contributor Preston, Joy Contributor address; City; S Frisco, TX 75033	out-of-state PAC (ID#:_	••••			Amount of Contribution (\$)	\$52.40
	Principal occu retired	pation / Job title (See Instruction:	5)		Employer (See Instructions retired	s)		

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to com	nplete this form	m.	1	Total pages Schedule A1: Sch: 13/15 Rpt: 17/46	
2	FILER NAME Yarbrough, 3	lace R.			3	Filer ID (Ethics Commission 00088296	n Filers)
4	Date 02/16/2024	Preston, Sonja	-state PAC (ID#:		7	Amount of Contribution (\$)	\$26.35
		Frisco, TX 75036					
8	Principal occu Sales	pation / Job title (See Instructions)	9	Employer (See Instructions Liberty Mutual Insurance			
	Date 02/17/2024	Full name of contributor out-of Ragsdale, Robert Contributor address; City; State; Zip C				Amount of Contribution (\$)	\$300.00
	Daine die alle access	Roanoke, TX 76262		Frankrije (Cooks trocking)	_		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 02/13/2024	Full name of contributor out-of Richie, Jimmy Contributor address; City; State; Zip C	-state PAC (ID#:)		Amount of Contribution (\$)	\$521.15
		Forney, TX 75126					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	<u> </u>		
	Date 02/09/2024	Sigala, Alberto				Amount of Contribution (\$)	\$25.00
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions Usaf	<u> </u>		
	Date 02/13/2024	Sileven, David	-state PAC (ID#:)		Amount of Contribution (\$)	\$52.40
	Principal occu Excecutive	pation / Job title (See Instructions)		Employer (See Instructions OpenText, Inc.)		
			I	<u> </u>			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 14/15 Rpt: 18/46	
2	FILER NAME Yarbrough, J			3	Filer ID (Ethics Commission 00088296	on Filers)
4	Date 01/27/2024	 5 Full name of contributor out-of-state PAC (ID#:_ Skiles, Curtis 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$26.35
8	Principal occu	Cleburne, TX 76031 pation / Job title (See Instructions)	9 Employer (See Instructions) ()		
_	Retired	patient too the (eee metactions)	Retired			
	Date 02/16/2024	Full name of contributor out-of-state PAC (ID#:_ Slidell Ranch Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
	Principal occu	Argyle, TX 76226 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 02/01/2024	Full name of contributor out-of-state PAC (ID#:_Stanton, James Contributor address; City; State; Zip Code Dallas, TX 75225			Amount of Contribution (\$)	\$2,604.48
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date 02/19/2024	Full name of contributor out-of-state PAC (ID#:_ Tancabel, John Contributor address; City; State; Zip Code Irving, TX 75038	Stanton LLP		Amount of Contribution (\$)	\$1,500.00
	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions Squire Patton Boggs	5)		
	Date 02/07/2024	Full name of contributor out-of-state PAC (ID#:_ Taylor, Raleigh Contributor address; City; State; Zip Code Alexandria, VA 22309)		Amount of Contribution (\$)	\$208.65
	Principal occu Chief Execut	pation / Job title (See Instructions) tive Officer	Employer (See Instructions Premier Protective Secu		,	

	MONET	ARY POLITICAL CONTRIBU	JTION	S		SCHEDULE A1
	The Instruc	ction Guide explains how to complete	this for	n.	1	Total pages Schedule A1: Sch: 15/15 Rpt: 19/46
2	FILER NAME Yarbrough, J	Jace R.			3	Filer ID (Ethics Commission Filers) 00088296
4	Date 02/07/2024	 Full name of contributor	-)	7	Amount of Contribution (\$) \$1,041.98
_	Deignigal	Frisco, TX 75036	lo.	Frankriau (Caa Inatuustiaus		
8	Real estate i	pation / Job title (See Instructions) nvestor	9	Employer (See Instructions Self	5)	
	Date 01/27/2024	Full name of contributor	-)		Amount of Contribution (\$) \$26.35
	Principal occu	Midland, TX 79703 pation / Job title (See Instructions)		Employer (See Instructions	;) 	
	Administrativ					ildhood Education Center
	Date 02/04/2024	Full name of contributor	C (ID#:			Amount of Contribution (\$) \$500.00
		Dallas, TX 75229			<u>L</u>	
	Board of Dire	pation / Job title (See Instructions) ectors		Employer (See Instructions Western Frontier	5)	
	Date 01/27/2024	Full name of contributor out-of-state PAI Yarbrough, Kelly Contributor address; City; State; Zip Code Cleburne, TX 76033	-)		Amount of Contribution (\$) \$26.35
	Principal occu Custodian	pation / Job title (See Instructions)		Employer (See Instructions Godley ISD	5)	
	Date 01/27/2024	Full name of contributor out-of-state PAI Yarbrough, Randall Contributor address; City; State; Zip Code Cleburne, TX 76033	C (ID#:)		Amount of Contribution (\$) \$26.35
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)	
			•			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 20/46
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Yarbrough,	Jace R.		00088296
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	SUTIONS	\$
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution
02/16/2024	Alexander, Rob		contribution (\$) description \$100.00 Campaign Event Ticket
	7 Contributor address; City; State; Zip Code		I I
			_
	Sherman, TX 75092		Check if travel outside of Texas. Complete Schedule T.
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)
Manufacturi		Self Employed	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution
02/23/2024	Berry, John		contribution (\$) description \$50.00 Ticket / admission for
	Contributor address; City; State; Zip Code		campaign event
			l l
	Jacksboro, TX 76458		Check if travel outside of Texas. Complete Schedule T.
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
Financial Pla		Self	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of In-kind contribution
02/24/2024	Vinyard, Charla		contribution (\$) description \$345.00 Food & beverage for in
	Contributor address; City; State; Zip Code		district event.
			l i
			<u> </u>
	Frisco, TX 75036	1	Check if travel outside of Texas. Complete Schedule T.
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
Real Estate		Self	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
1			

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

	Consuling 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: 1/26 Rpt: 21/46	Yarbrough, Jace R. 00088296
4	Date 02/24/2024	5 Payee name Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	
٠	OF	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		anedot fees
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/22/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.35	1340 Poydras Street
	Ψ1.00	Suite 1770
		New Orleans, LA 70112
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		anedot fees
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/20/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		anedot fees
	0 1. 0	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Onditale to belief Of Of	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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 L	ift/Awards/Memorials E egal Services The Instruction Gui	•		ages	/Contract Labor		Travel Out of Di OTHER (enter a	istrict a category not listed abo	ve)
-	Total pages Cabadula 54:	12					,,	1	2	Filor ID	(Ethios Commission	on Filoro\
1	Total pages Schedule F1: Sch: 2/26 Rpt: 22/46	2	Yarbrough, J	ace R.					3	Filer ID 00088296	(Ethics Commission	on File(S)
4	Date	5	Payee name									
	02/20/2024		Anedot									
6	Amount (\$)	7	Payee address	; City;	State;	Zip Cod	de					
	\$1.35		1340 Poydra	s Street								
			Suite 1770									
			New Orleans	. I A 70112								
8	PURPOSE	(a)		Categories listed at the	- 4646:6-	4.4-1	(b)	Description				
ľ	OF	(")		undraising Expe		dule)	(2)		outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		Concitation	andraionig Exp	CHISC			Check if Austin,	, TX,	officeholder livin	g expense	
								anedot fees				
L		L										
9	Complete ONLY if direct		Candidate/Office	eholder name	Ot	ffice souç	ght			Office h	eld	
	expenditure to benefit C/OI	1										
	Date		Payee name									
	02/19/2024		Anedot									
	Amount (\$)		Payee address	; City;	State;	Zip Cod	de					
	\$4.48		1340 Poydra	s Street								
			Suite 1770									
			New Orleans	, LA 70112								
	PURPOSE OF	(a)	Category (See	Categories listed at the	e top of this sche	dule)	(b)	Description				
	EXPENDITURE		Solicitation/F	undraising Exp	ense			=		de of Texas. Con officeholder livin	nplete Schedule T.	
								anedot fees	, 17,	omeenoider iiviii	g expense	
	Complete ONLY if direct		Candidate/Office	eholder name	Ot	ffice souç	ght			Office h	eld	
	expenditure to benefit C/OI	H 										
	Date		Payee name									
L	02/19/2024		Anedot									
	Amount (\$)		Payee address		State;	Zip Cod	de		_			
	\$4.48		1340 Poydra	s Street								
			Suite 1770									
			New Orleans	, LA 70112								
	PURPOSE	(a)	Category (See	Categories listed at the	e top of this sche	dule)	(b)	Description				
	OF EXPENDITURE			undraising Expe				브			nplete Schedule T.	
								Check if Austin, anedot fees	, TX,	officeholder livin	g expense	
								aneuol iees				
	Complete ONLY if direct	L	Candidate/Office	eholder name	Ot	ffice soug	thr			Office h	eld	
	expenditure to benefit C/O		our landator Office	Jidor ridino	O	00 504(9'''			J.1100 11	~.u	

SCHEDULE F1

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

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee L	Gift/Awards/Memorials Legal Services The Instruction Gu	•		ages	/Contract Labor		Travel Out of Di OTHER (enter a	strict a category not listed a	above)
1	Total pages Schedule F1:	2			• •			1	3	Filer ID	(Ethics Commis	sion Filers)
Ė	Sch: 3/26 Rpt: 23/46		Yarbrough, 3	ace R.					,	00088296	(Eurica Commis	
4	Date	5	Payee name									
	02/19/2024		Anedot									
6	Amount (\$)	7	Payee addres		State;	Zip Co	de					
	\$60.30		1340 Poydra	s Street								
			Suite 1770									
L		L	New Orleans	s, LA 70112								
8	PURPOSE	(a)	Category (See	Categories listed at th	ne top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Solicitation/F	undraising Exp	ense			=			plete Schedule T.	
								anedot fees	, 1X,	officeholder living	3 exhense	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	0	Office sou	ght			Office h	eld	
		_										
	Date		Payee name									
	02/17/2024		Anedot									
	Amount (\$)		Payee addres		State;	Zip Co	de					
	\$4.48		1340 Poydra	s Street								
			Suite 1770									
			New Orleans	s, LA 70112								
	PURPOSE	(a)	Category (See	Categories listed at th	ne top of this sche	edule)	(b)	Description				
	OF EXPENDITURE			undraising Exp				=			nplete Schedule T.	
	-							Check if Austin, anedot fees	, TX,	officeholder living	g expense	
								anduot 1003				
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	eholder name	0	Office sou	ght			Office h	eld	
	onpolicitate to beliefit 0/01	_										
	Date		Payee name									
	02/16/2024		Anedot									
	Amount (\$)		Payee addres		State;	Zip Co	de					
	\$10.30		1340 Poydra	s Street								
			Suite 1770									
L			New Orleans	s, LA 70112								
	PURPOSE	(a)		Categories listed at the		edule)	(b)	Description				
	OF EXPENDITURE		Solicitation/F	undraising Exp	ense			브			nplete Schedule T.	
								anedot fees	, 1X,	officeholder living	3 exhense	
	Complete ONLY if direct		Candidate/Offic	eholder name	0	Office sough	ght			Office h	eld	
	expenditure to benefit C/O					- ,	-					

SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services The Instruction Guid	Salaries/	Wage	s/Contract Labor		OTHER (enter a	strict a category not listed above)
Ļ		-		The Instruction Guid	de explains flow to c	ompi	ete tilis lorili.	_		
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 4/26 Rpt: 24/46		Yarbrough,	Jace R.					00088296	
4	Date	5	Payee name							
	02/16/2024		Anedot							
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip C	ode				
ľ	\$1.35	ľ	1340 Poydra	•	State, Lip C	ouc				
	Ψ1.55		Suite 1770	as street						
			New Orlean	s, LA 70112						
8	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this schedule)	(b)	Description			
	OF EXPENDITURE		Solicitation/	Fundraising Expe	ense					plete Schedule T.
	ZA ZHOHOKZ						—	, TX,	officeholder living	g expense
							anedot fees			
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	ceholder name	Office so	ught			Office h	eld
	experiulture to benefit C/Oi									
	Date		Payee name							
	02/16/2024		Anedot							
	Amount (\$)	H	Payee addres	ss; City;	State; Zip C	ode				
	\$0.73		1340 Poydra							
			Suite 1770							
				0 1 4 70112						
			New Orlean							
	PURPOSE OF	(a)		ee Categories listed at the		(b)	Description			
	EXPENDITURE		Solicitation/I	Fundraising Expe	ense		=		de of Texas. Com officeholder living	plete Schedule T.
							anedot fees	, 17,	, omcendaer nving	у схренас
							ancaot ices			
_	Complete ONLY if direct	<u> </u>	Candidato/Offi	ceholder name	Office so	luaht			Office h	old
	expenditure to benefit C/OI		Januluale/Onic	centitien name	Office 30	ugnt			Office fi	ciu
		_								
	Date		Payee name							
	02/13/2024		Anedot							
	Amount (\$)		Payee addres	ss; City;	State; Zip C	ode				
	\$21.15		1340 Poydra	as Street						
			Suite 1770							
			New Orlean	s, LA 70112						
	PURPOSE	(a)				(h)	Description			
	OF	(۵)		ee Categories listed at the Fundraising Expe		(5)		outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE		Sulcitation	runuraising Expe	:1126				officeholder living	
							anedot fees			
	Complete ONLY if direct		Candidate/Offi	ceholder name	Office so	ught			Office h	eld
	expenditure to benefit C/OI					J				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/26 Rpt: 25/46	Yarbrough, Jace R. 00088296
4	Date	5 Payee name
	02/13/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$0.73	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
	-	Check if Austin, TX, officeholder living expense anedot fees
		aneuotilees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/13/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.40	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense
		anedot fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/13/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		anedot fees
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experiorale to belieff C/Of	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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/26 Rpt: 26/46	Yarbrough, Jace R. 00088296
4	Date	5 Payee name
	02/12/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.73	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense anedot fees
		aneuotiees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/12/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$208.65	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense anedot fees
		unductiees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/12/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$41.98	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		anedot fees
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Every Accounting/Banking Fer Consulting Expense For Contributions/ Donations Made By - Giff Candidate/Officeholder/Political Committee Legislations Ferromagnetic Contributions of Candidate/Officeholder

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/26 Rpt: 27/46	Yarbrough, Jace R. 00088296
4	Date	5 Payee name
	02/12/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense anedot fees
		aneuotiees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
٦	expenditure to benefit C/OI	
	Date	Payee name
	02/11/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.48	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense anedot fees
		aneuotiees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/10/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.40	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		anedot fees
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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 File	ers)
•	Sch: 8/26 Rpt: 28/46	Yarbrough, Jace R. 00088296	
4	Date	5 Payee name	
	02/09/2024	Anedot	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1.30	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		anedot fees	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	02/07/2024	Anedot	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.30	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	DUDDOCE		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		anedot fees	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	02/07/2024	Anedot	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.30	1340 Poydras Street	
		Suite 1770	
		New Orleans, LA 70112	
	DUDD005		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		anedot fees	
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
-			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/26 Rpt: 29/46	Yarbrough, Jace R. 00088296
4	Date	5 Payee name
	02/07/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense anedot fees
		aneuot lees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Data	B
	Date	Payee name
	02/07/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.65	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense anedot fees
		anduot ices
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	02/07/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense
		anedot fees
		and delivery
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services The Instruction Guide ex	Salaries/V	Wages	/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)	Τ
	Sch: 10/26 Rpt: 30/46	Yarbrough,	Jace R.					00088296		
4	Date	5 Payee name								
	02/07/2024	Anedot								
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode					
	\$41.98	1340 Poydr	as Street							
		Suite 1770								
		New Orlear	ns, LA 70112							
8	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b)	Description				
	OF EXPENDITURE	Solicitation/	Fundraising Expense					de of Texas. Com		
						_	, TX,	officeholder living	expense	
						anedot fees				
9	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office sou	ıght			Office he	eld	
	Date	Payee name								
	02/07/2024	Anedot								
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					_
	\$4.30	1340 Poydr	-							
	¥55	Suite 1770								
			70440							
		New Orlear	ns, LA 70112							
	PURPOSE OF	(a) Category (Si	ee Categories listed at the top of	this schedule)	(b)	Description				
	EXPENDITURE	Solicitation/	Fundraising Expense			_		de of Texas. Comp		
						anedot fees	, IX,	officeholder living	expense	
						aneuot iees				
	Operation ONLY if allowed	0		04:				O#: I	1-1	_
	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office sou	ıgnı			Office he	eia	
_	D :									=
	Date	Payee name								
	02/07/2024	Anedot								
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$8.65	1340 Poydr	as Street							
		Suite 1770								
		New Orlear	ns, LA 70112							
	PURPOSE	(a) Category (c	ee Categories listed at the top of	this sahadula)	(b)	Description				-
	OF		Fundraising Expense	triis scriedule)	(~)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	Concitation	r dildidioling Expense			Check if Austin	, TX,	officeholder living	expense	
						anedot fees				
	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	ıght			Office he	eld	_
	expenditure to benefit C/OI	H								
										_

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment	Legal Services	Legal Services Salaries/Wages/Contract Labor OTHER (enter a					strict category not listed above)	
Ļ				· · · · · · · · · · · · · · · · · · ·					(E.) E.) .
1	Total pages Schedule F1:						3	Filer ID	(Ethics Commission Filers)
	Sch: 11/26 Rpt: 31/46	Yarbroι	ıgh, Jace R.					00088296	
4	Date	5 Payee na	ame						
	02/06/2024	Anedot							
6	Amount (\$)	7 Payee a	ddress; City;	State; Zip Co	nde				
ľ	\$1.30	l ´	oydras Street	Otato, Zip Ot	Juo				
	Ψ1.50	Suite 17	•						
			-						
		New Or	leans, LA 70112						
8	PURPOSE	(a) Category	/ (See Categories listed at the	e top of this schedule)	(b)	Description			
	OF EXPENDITURE	Solicitat	ion/Fundraising Expe	ense					plete Schedule T.
	ZA ZHOHOKZ					_	, TX,	officeholder living	g expense
						anedot fees			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		/Officeholder name	Office sou	ight			Office he	eld
	experiulture to benefit C/Oi	1							
	Date	Payee na	ame						
	02/06/2024	Anedot							
	Amount (\$)	Payee a	ddress; City;	State; Zip Co	ode				
	\$4.48	1340 Pc	oydras Street						
	•	Suite 17							
			-						
		New Or	leans, LA 70112						
	PURPOSE OF		(See Categories listed at the		(b)	Description			
	EXPENDITURE	Solicitat	ion/Fundraising Exp	ense				de of Texas. Com officeholder living	plete Schedule T.
						anedot fees	, 17,	onicendaei iiving	g expense
_	Complete ONLY if direct	Candidate	/Officeholder name	Office sou	l Iaht			Office he	old
	expenditure to benefit C/OI		/Oniceriolaer name	Office 30t	igiit			Office In	Ciu
	Date	Payee n							
	02/06/2024	Anedot							
	Amount (\$)	Payee a	ddress; City;	State; Zip Co	ode				
	\$4.48	1340 Po	oydras Street						
		Suite 17	770						
		New Or	leans, LA 70112						
	PURPOSE				(h)	Description			
	OF		(See Categories listed at the cion/Fundraising Expe		(5)		outsi	de of Texas. Com	nplete Schedule T.
	EXPENDITURE	Sulcita	ion/Fundraising Expe	51156				officeholder living	•
						anedot fees			
	Complete ONLY if direct	Candidate	/Officeholder name	Office sou	<u> </u>			Office he	eld
	expenditure to benefit C/OI				J				
<u> </u>									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ommittee	Gift/Awards/Memorials E Legal Services The Instruction Gui	Salarie	s/Wage	es/Contract Labor		Travel Out of Di OTHER (enter a	strict i category not listed abo	ove)
1	Total pages Cabadula F1:						2	Filor ID	(Ethics Commissi	on Eilore\
1	Total pages Schedule F1:						3	Filer ID	(Ethics Commissi	UII FIICIS)
	Sch: 12/26 Rpt: 32/46	Yarbroug	ii, jace R.					00088296		
4	Date	Payee nan	ne							
	02/05/2024	Anedot								
6	Amount (\$)	Payee add	ress; City;	State; Zip	Code					
	\$41.98	1340 Pov	dras Street							
		Suite 177								
			ans, LA 70112							
8	PURPOSE OF		(See Categories listed at the		(b)	Description				
	EXPENDITURE	Solicitatio	n/Fundraising Expe	ense		=		ide of Texas. Con , officeholder livin	nplete Schedule T.	
						anedot fees	i, i A,	, officeriolder living	g expense	
						41104011000				
_	Complete ONLY if direct	Candidata/C	Officeholder name	Office	Juah+			Office	old	
9	expenditure to benefit C/O	Cariuidate/C	Officeholder name	Office s	Jugnt	L		Office h	eiu	
L	· 									
	Date	Payee nan	ne							
	02/05/2024	Anedot								
	Amount (\$)	Payee add	ress; City;	State; Zip	Code					
	\$4.30	1340 Poy	dras Street							
		Suite 177	0							
			ans, LA 70112							
	DUDD005				Las					
	PURPOSE OF		(See Categories listed at the		(a)	Description	outoi	ide of Toyon Com	anloto Cohodulo T	
	EXPENDITURE	Solicitatio	n/Fundraising Expe	ense		=		, officeholder livin	plete Schedule T. g expense	
						anedot fees	,,	,	y	
\vdash	Complete ONLY if direct	Candidate/C	Officeholder name	Office s	Juaht	·		Office h	eld	
	expenditure to benefit C/O	Janarato/C	onorda name	011100 3	Jagiil	•		Jilioc II	o.u	
<u> </u>	Data									
	Date	Payee nam	ne							
	02/05/2024	Anedot								
	Amount (\$)	Payee add		State; Zip	Code					
	\$0.42	1340 Poy	dras Street							
		Suite 177	0							
		New Orle	ans, LA 70112							
	PURPOSE	_	(See Categories listed at the	a top of this cahadula	(b)) Description				
	OF		n/Fundraising Expe		(3)		outsi	ide of Texas. Con	nplete Schedule T.	
	EXPENDITURE	Conontatio	anaraioning Expe					, officeholder livin		
						anedot fees				
	Complete ONLY if direct	Candidate/C	Officeholder name	Office s	ought			Office h	eld	
	expenditure to benefit C/OI									

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

	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: 13/26 Rpt: 33/46	Yarbrough, Jace R. 00088296
4	Date	5 Payee name
	02/05/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
_	DUDDOOF	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		anedot fees
		and the contracts
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
H	Date	Payee name
	02/04/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		anedot fees
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/04/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.73	1340 Poydras Street
	\$10.73	-
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		anedot fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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		nmittee L	Gift/Awards/Memorials Legal Services The Instruction Gu			ages/	Contract Labor		Travel Out of Di OTHER (enter a	strict a category not listed abov	re)
1	Total pages Cobadula F1	1						1	2	Filor ID	(Ethics Commissis	a Eilora)
1	Total pages Schedule F1: Sch: 14/26 Rpt: 34/46	l	Yarbrough, 3	lace R.					3	Filer ID 00088296	(Ethics Commissio	ıı ⊨ııers)
_	•	⊢										
4	Date	ı	Payee name									
L	02/03/2024	\mathbb{L}_{-}	Anedot									
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Co	de					
	\$4.30		1340 Poydra	s Street								
			Suite 1770									
		l	New Orleans	: ΙΔ 70112								
_	DUDDOGE	<u> </u>					<i>(</i> 1-)					
8	PURPOSE OF			Categories listed at the		edule)	(a)	Description	tai	do of Toyon Com	poloto Cobodulo T	
	EXPENDITURE		Solicitation/F	undraising Exp	ense			=		officeholder livin	nplete Schedule T.	
								anedot fees	17,	omeendaer nam	у схренос	
_	Complete ONLY if direct	<u> </u>	Candidate/Offic	oholdor nama		Office soug	tht.			Office h	old	
9	expenditure to benefit C/O		zariuluale/Offic	enoluel Hallle		mice Sou(JIIL			Onice n	ciu	
L		_										
	Date	ı	Payee name									
L	02/02/2024		Anedot									
	Amount (\$)		Payee addres	s; City;	State;	Zip Co	de					
	\$80.30		1340 Poydra	s Street								
			Suite 1770									
			New Orleans	S I A 70112								
	PURPOSE	_				1	(h)	December -				
	OF			Categories listed at t		edule)	(u)	Description Check if travel of	nutsi	de of Texas Com	nplete Schedule T.	
	EXPENDITURE		Solicitation/F	undraising Exp	ense			=		officeholder living		
								anedot fees				
\vdash	Complete ONLY if direct		Candidate/Offic	eholder name	C	Office sou	ght			Office h	eld	
	expenditure to benefit C/O		22.25, 0.110		· ·	. 2 3000	,			200 11		
\vdash	Data	<u> </u>	D									
	Date	ı	Payee name									
	02/02/2024		Anedot									
	Amount (\$)	l	Payee addres		State;	Zip Co	de					
	\$40.30		1340 Poydra	s Street								
			Suite 1770									
			New Orleans	s, LA 70112								
	PURPOSE	(a)	Category (90)	e Categories listed at t	he ton of this solo	edule)	(b)	Description				
	OF			undraising Exp		odulo)	. ,		outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE			· · ·				Check if Austin,	TX,	officeholder living	g expense	
								anedot fees				
L									_			
	Complete ONLY if direct		Candidate/Offic	eholder name	С	Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	H										

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/26 Rpt: 35/46	Yarbrough, Jace R. 00088296
4	Date	5 Payee name
	02/02/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$0.50	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense anedot fees
		and tieds
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	
	Date	Payee name
	02/01/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		anedot fees
		anodot 1666
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	
	Date	Payee name
	02/01/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$104.48	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense anedot fees
		aneuot lees
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Oh	•

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 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: 16/26 Rpt: 36/46	Yarbrough, Jace R. 00088296
4	Date	5 Payee name
	01/31/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1.35	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense anedot fees
		aneuotilees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
H	Date	Payee name
	01/31/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.35	
	QC.1Q	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense anedot fees
		aneuot lees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	01/31/2024	Anedot
H	Amount (\$)	Payee address; City; State; Zip Code
	\$8.65	1340 Poydras Street
	φο.05	
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense
		anedot fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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: 17/26 Rpt: 37/46	Yarbrough, Jace R. Commission Filers)
4	Date	5 Payee name
	01/30/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$0.73	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		anedot fees
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/29/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.30	1340 Poydras Street
	,	Suite 1770
		New Orleans, LA 70112
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense anedot fees
		diledot lees
_		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/29/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.35	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		anedot fees
_	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	
	•	

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mer

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made by - Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services Salaries/Wages/Contract Labor OTHER (enter a The Instruction Guide explains how to complete this form.					strict a category not listed above)		
Ļ		ı			e explains now to co	ilipi	ete tilis lorili.	_		(=11: 0 : : =11)
1	Total pages Schedule F1:	l	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 18/26 Rpt: 38/46	<u> </u>	Yarbrough, 、	Jace R.					00088296	
4	Date	5 F	Payee name							
	01/28/2024	/	Anedot							
6	Amount (\$)	7 F	Payee addres	ss; City;	State; Zip Co	nde				
ľ	\$2.40	l	1340 Poydra		Otato, Zip Ot	Juo				
	Ψ2.40	l	Suite 1770	as Street						
		ſ	New Orleans	s, LA 70112						
8	PURPOSE	(a) (Category (Se	e Categories listed at the t	op of this schedule)	(b)	Description			
	OF EXPENDITURE		Solicitation/F	undraising Exper	ise					nplete Schedule T.
	ZA ZHOHOKZ						_	, TX,	officeholder living	g expense
							anedot fees			
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	ceholder name	Office sou	ıght			Office h	eld
	experiulture to benefit C/Oi									
	Date	F	Payee name							
	01/27/2024	/	Anedot							
	Amount (\$)	F	Pavee addres	ss; City;	State; Zip Co	ode				
	\$1.35		1340 Poydra							
	,	l	Suite 1770							
				0 4 70112						
		-	New Orleans							
	PURPOSE OF			e Categories listed at the to		(b)	Description			
	EXPENDITURE		Solicitation/F	Fundraising Exper	ıse		_		de of Texas. Com officeholder living	nplete Schedule T.
							anedot fees	, 17,	omeenolder living	у схренас
_	Complete ONLY if direct		andidate/Offic	ceholder name	Office sou	ıaht			Office h	old.
	expenditure to benefit C/OI		andidate/Onic	cholder hame	Office 30t	igiit			Office II	Ciu
		_								
	Date	l	Payee name							
	01/27/2024	1	Anedot							
	Amount (\$)	F	Payee addres	ss; City;	State; Zip Co	ode				
	\$1.35] 1	1340 Poydra	as Street						
		(Suite 1770							
			New Orleans	s, LA 70112						
	PURPOSE					(h)	Description			
	OF			e Categories listed at the to Fundraising Exper		(5)		outsi	de of Texas. Com	nplete Schedule T.
	EXPENDITURE	`	3011CItation/r	-unuraising Exper	150				officeholder living	•
							anedot fees			
	Complete ONLY if direct	L Ca	andidate/Offic	ceholder name	Office sou	ıght			Office h	eld
	expenditure to benefit C/OI					J				

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/Political Committee Credit Card Payment			Legal Services Salaries/Wages/Contract Labor OTHER (enter a category The Instruction Guide explains how to complete this form.					category not listed above)		
Ļ		-			de explains now to co	niipi	ete tilis lorili.	_		
1	Total pages Schedule F1:	l	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 19/26 Rpt: 39/46		Yarbrough,	Jace R.					00088296	
4	Date	5	Payee name							
	01/27/2024		Anedot							
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip Co	nde				
ľ	\$1.35	l	1340 Poydra	•	Otato, 21p Ot	Juc				
	Ψ1.55	l	Suite 1770	as Street						
		l								
			New Orlean	s, LA 70112						
8	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this schedule)	(b)	Description			
	OF EXPENDITURE		Solicitation/F	undraising Expe	ense					plete Schedule T.
	ZA ZIIDII GIAZ						—	, TX,	officeholder living	g expense
							anedot fees			
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	ceholder name	Office sou	ught			Office he	eld
	experiulture to benefit C/Oi									
	Date		Payee name							
	01/27/2024		Anedot							
	Amount (\$)		Payee addres	ss; City;	State; Zip Co	ode				
	\$1.35		1340 Poydra							
	,	l	Suite 1770							
		l		0 4 70112						
		├	New Orlean							
	PURPOSE OF			e Categories listed at the		(b)	Description			
	EXPENDITURE		Solicitation/F	-undraising Expe	ense		=		de of Texas. Com officeholder living	plete Schedule T.
							anedot fees	, 17,	omeenoider iiving	у схропос
							a			
_	Complete ONLY if direct		`andidate/Offic	ceholder name	Office sou	ıaht			Office he	ald
	expenditure to benefit C/OI		zarialaate/Offic	scholder hame	Office 300	agrit			Office In	Siu .
		_								
	Date		Payee name							
	01/26/2024		Anedot							
	Amount (\$)		Payee addres	ss; City;	State; Zip Co	ode				
	\$2.40		1340 Poydra	as Street						
			Suite 1770							
			New Orleans	s, LA 70112						
	PURPOSE	_				(h)	Description			
	OF			e Categories listed at the Fundraising Expe		(5)		outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE		Sulcitation/i	-unuraising Expe	:1136				officeholder living	•
							anedot fees			
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office sou	ught			Office he	eld
	expenditure to benefit C/OI					J				
-										

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 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: 20/26 Rpt: 40/46	Yarbrough, Jace R. 00088296
4	Date	5 Payee name
	01/26/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense anedot fees
		aneuotiees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/26/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.30	1340 Poydras Street
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense anedot fees
		aneuotiees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/02/2024	Davis, Ryan
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,086.70	864 Trail Road
		Dennison, TX 75021
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Compains Staff
		Campaign Staff
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 21/26 Rpt: 41/46	Yarbrough, Jace R.		00088296
4	Date	5 Payee name		'
l	02/16/2024	Davis, Ryan		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
l	\$2,350.68	864 Trail Road		
l				
l		Dennison, TX 75021		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Campaign Staff
				Campaign Stan
9	Complete ONLY if direct	Candidate/Officeholder name Office sour	aht	Office held
ľ	expenditure to benefit C/O		giit	Office field
H	Date	Payee name		
	01/30/2024	Griffin Communications		
┝	Amount (\$)	Payee address; City; State; Zip Co	da	
l	\$15,985.88	7111 harvest trail Dr.	ue	
l	Ψ13,303.00	7111 Harvest trail Dr.		
		Auctin TV 79726		
L		Austin, TX 78736	<i>(</i> 1.)	
l	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	(a)	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Advertising Expense		Check if Austin, TX, officeholder living expense
				campaign advertising
L				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held
	experialitate to benefit C/O	1		
l	Date	Payee name		
	01/31/2024	Griffin Communications		
l	Amount (\$)	Payee address; City; State; Zip Co	de	
l	\$1,700.00	7111 harvest trail Dr		
l				
l		Austin, TX 78736		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
l				Check if Austin, TX, officeholder living expense Design services
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O		-	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor 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 comp	plet	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 22/26 Rpt: 42/46	Yarbrough, Jace R.		00088296
4	Date	5 Payee name		
	01/31/2024	Griffin Communications		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$4,500.00	7112 harvest trail Dr.		
		Austin, TX 78736		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	b)	Description
	OF EXPENDITURE	Consulting Expense	ļ	Check if travel outside of Texas. Complete Schedule T.
			١	Check if Austin, TX, officeholder living expense Consultant fees
				Consultant rees
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/OI			Since noid
_	Date	Payee name		
	02/01/2024	Griffin Communications		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$2,000.00	7112 harvest trail Dr		
	Ψ2,000.00	7112 Harvest trail Di		
		Austin, TX 78736		
	DUDDOCE		۵۱	
	PURPOSE OF	, ,	o) I	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor	i	Check if Austin, TX, officeholder living expense
				campaign staff
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt	Office held
	experiditure to beriefit C/Of			
	Date	Payee name		
	02/05/2024	Griffin Communications		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$15,985.88	7113 harvest trail Dr.		
		Austin, TX 78736		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	b)	Description
	OF EXPENDITURE	Advertising Expense	ļ	Check if travel outside of Texas. Complete Schedule T.
			ı	Check if Austin, TX, officeholder living expense Campaign advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·		

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee 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 (outpers extrapply not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
<u> </u>	T. 1 0 1 1 54		
1	Total pages Schedule F1:		
L	Sch: 23/26 Rpt: 43/46	Yarbrough, Jace R. 00088296	
4	Date	5 Payee name	
	02/05/2024	Griffin Communications	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
ľ	\$28,875.00	7113 harvest trail Dr	
	Ψ20,013.00	7113 Hai vest tian bi	
		Austin, TX 78736	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	LAI LIIDITORE	Check if Austin, TX, officeholder living expense	
		get out the vote efforts	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	_
	02/08/2024	Griffin Communications	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$15,985.88	7114 harvest trail Dr.	
	φ15,965.66	7114 Haivest tiali Di.	
		Austin, TX 78736	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	LAI LINDITORL	Check if Austin, TX, officeholder living expense	
		campaign advertising	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	_
	02/08/2024	Griffin Communications	
_	Amount (\$)	Payee address; City; State; Zip Code	_
	\$4,204.06	7114 harvest trail Dr	
	Φ4,∠∪4.∪0	1114 Haivest tiali Di	
L		Austin, TX 78736	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	LAI LINDITORL	Check if Austin, TX, officeholder living expense	
		campaign advertising	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H .	

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<u> </u>	T. 1 0 1 1 54	
1	Total pages Schedule F1:	
	Sch: 24/26 Rpt: 44/46	Yarbrough, Jace R. 00088296
4	Date	5 Payee name
	02/13/2024	Griffin Communications
6	Amount (\$)	7 Payee address; City; State; Zip Code
ľ	\$8,457.97	7115 harvest trail Dr.
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		A 15 TV T0T00
		Austin, TX 78736
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense
		campaign advertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/13/2024	Griffin Communications
	Amount (\$)	Payee address; City; State; Zip Code
	\$15,985.88	7115 harvest trail Dr
	Ψ13,303.00	7 113 Halvest tidli Di
		Austin, TX 78736
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		campaign advertising
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiulture to beliefit C/Oi	'
	Date	Payee name
	02/13/2024	Griffin Communications
	Amount (\$)	Payee address; City; State; Zip Code
	\$28,500.00	7116 harvest trail Dr.
		
		A
		Austin, TX 78736
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		get out the vote efforts
	2	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to beliefft C/OI	•

SCHEDULE F1

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

Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl		xpens Vages	e /Contract Labor		Travel in District Travel Out of Dist OTHER (enter a d	trict category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 25/26 Rpt: 45/46	Yarbrough	, Jace R.					00088296	
4	Date	5 Payee name)						
	02/20/2024		nmunications						
6	Amount (\$)	7 Payee addre	ess; City; S	State; Zip Co	ode				
	\$3,500.00	7116 harve	est trail Dr						
		Austin, TX	78736						
8	PURPOSE OF	(a) Category (s	See Categories listed at the top of the	nis schedule)	(b)	Description			
	EXPENDITURE	Advertising	Expense					de of Texas. Comp officeholder living	
						campaign adv			expense
						Jampaign au	. 011	ig	
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	laht			Office he	ıld
9	expenditure to benefit C/O		icenoidei name	Office soc	agrit			Office fie	iu
	Date	Payee name	·						
	02/20/2024	Griffin Com	nmunications						
	Amount (\$)	Payee addre	ess; City; S	State; Zip Co	ode				
	\$10,560.00	7117 harve	est trail Dr.						
		Austin, TX	78736						
	PURPOSE OF		See Categories listed at the top of the	nis schedule)	(b)	Description			
	EXPENDITURE	Advertising	Expense			_		de of Texas. Comp officeholder living	
						campaign adv			expense
						campaign au	veri	using	
_	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	l Jaht			Office he	ld
	expenditure to benefit C/O				J				
\vdash	Date	Dovos name							
	Date 02/22/2024	Payee name	e nmunications						
	Amount (\$)	Payee addre		State; Zip Co	ode				
	\$15,985.88	7117 harve	est trail Dr						
			70700						
		Austin, TX	/8/36						
	PURPOSE OF		See Categories listed at the top of the	nis schedule)	(b)	Description			
	EXPENDITURE	Advertising	Expense			ш		de of Texas. Comp officeholder living	
						campaign adv			expense
						Jampaigii au	. OI I		
\vdash	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	ıaht			Office he	ıld
	expenditure to benefit C/O		nocholuei Haille	Onice SOL	agrit			Office He	ıu

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 26/26 Rpt: 46/46	Yarbrough, Jace R. 00088296						
4	Date	5 Payee name						
	01/31/2024	Griffin Communications						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$10,971.03	7112 harvest trail Dr.						
		Austin, TX 78736						
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.						
	LXI LINDITORL	Check if Austin, TX, officeholder living expense						
		Printing						
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H						
⊨	Date	Payee name						
	01/31/2024	Griffin Communications						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$1,899.90	7112 harvest trail Dr.						
		Austin, TX 78736						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		Voter outreach						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI	H						