FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 146 00058241 3 COMMITTEE NAME **OFFICE USE ONLY** Friends of Brandon Creighton Date Received **ELECTRONICALLY FILED** 07/15/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 2257 N. Loop 336, Ste. 140-366 Date Hand-delivered or Date Postmarked Change of Address Conroe, TX 77304 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Dr. Johnny J. NAME NICKNAME LAST **SUFFIX** Peet STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 17350 St. Luke's Way STREET **ADDRESS** Suite 390 (Residence or Business) The Woodlands, TX 77384 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2257 N. Loop 336, Ste. 140-366 MAILING **ADDRESS** Conroe, TX 77304 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (936) 499-9390 PHONE REPORT January 15 30th day before election Exceeded modified reporting limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election X July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Year Month Day Year Month Day COVERED **THROUGH** 06/30/2024 01/01/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** χ Primary Month Day Year Other Runoff 03/03/2026 General Special

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Friends of Brandon Cre	ighton		00058241	
14 COMMITTEE		CANDIDATE / OFFICEHOLDER NAME		
PURPOSE		Sen. Brandon Creighton		
(Attach lists on plain paper to complete this	Candidate			
report if necessary.)	X Officeholder			
	—	State Senator		
SUPPORT				
(Candidate or Measure)		BALLOT IDENTIFICATION / #		ION DATE
OPPOSE			Month	Day Year
(Candidate or Measure)	_			
X ASSIST	Measure	DESCRIPTION		
(Officeholder)		Beettii Heit		
15 CONTRIBUTION TOTALS		NTRIBUTIONS OF \$50 OR LESS (OTHER THAN EES OF LOANS, OR CONTRIBUTIONS MADE	I PLEDGES,	ф. 00
TOTALS	ELECTRONICALLY), UI			\$ \$0.00
	2. TOTAL POLITICAL ((OTHER THAN PLEDGE)	ES, LOANS, OR GUARANTEES OF LOANS)		\$ \$392,687.00
	,	, , , , , , , , , , , , , , , , , , ,		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED PO	OLITICAL EXPENDITURES		
TOTALS				\$ \$6,352.51
	4. TOTAL POLITICAL E	EXPENDITURES		
	" TOTAL TOLINOAL L	LA ENDITORES		\$ \$224,573.29
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CON REPORTING PERIOD	TRIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE	4 700 400 50
BALANCE	REPORTING PERIOD			\$ \$1,786,420.58
OUTSTANDING	6. TOTAL PRINCIPAL AM	OUNT OF ALL OUTSTANDING LOANS AS OF T	HELAST	
LOAN TOTALS	DAY OF THE REPORTI		TIE ENOT	\$ \$0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of perju		
		and correct and includes all information Title 15, Election Code.	required to be	reported by me under
			ny J. Peet	
AFFIX NOTARY	STAMP / SEAL ABOVE	Signature of Car	npaign Freasur	er
Consum to and authorithed	la afava maa lavutka aasid	a b	.:	da
		, the ch, witness my hand and seal of office.	is the	day
OI	_, 20, to certify will	on, wances my name and scar of office.		
Cignoture of officer	ministoring oath	nted name of officer administration and	Title of effi-	or administaring actic
Signature of officer ad	ministening oath Pfil	nted name of officer administering oath	Tille OF OITIC	er administering oath

SUBTOTALS - SPAC

FORM SPAC COVER SHEET PG 3

					3 of 146
17 CO	MMITTE	E NAME	18 Filer ID	(Ethics Commis	ssion Filers)
Frie	ends of	Brandon Creighton	00058241	•	ŕ
		E SUBTOTALS		1	
l		SCHEDULE		SUBTOTA	AL AMOUNT
- 147 (1					
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	392,687.00
				ļ —	
,	П	SCHEDULE 42: MONI MONETARY (IN VINID) POLITICAL CONTRIBUTIONS			
2.	Ш	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	Ш	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
		COLUED III E OA. MONETARY CONTRIBUTIONS FROM CORRORATION OR LARG			
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	ıK	\$	
				-	
5.	П	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	\$	
	<u> </u>	LABOR ORGANIZATION			
		COLIEDURE DE DI EDCED CONTRIBUTIONS EDOM CORDODATION OD LABOR			
6.	Ш	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (JRGANIZATION	\$	
7.	Ш	SCHEDULE E: LOANS		\$	
				+	
8.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	224,573.29
9.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
	ш	CONEDULE 12. CHI AID INCORNED OBLICATIONS		Φ	
10		COLUED III E FO. DUDOLIACE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	anc.		
10.	Ш	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	JNS	\$	
11.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
				-	
12.	П	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	 \$	
				ļ ·	
13.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS		
15.	Ш	SCHEDULE I. NON I SETTIONE EXI ENDITORES I ROWIT SETTIONE CONTRIBUTION	5113	 \$	
		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I	RETURNED		
14.	Ш	TO FILER		\$	
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	MONET	ARY POLITICAL C	NS		SCHEDULE	■ A1	
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/30 Rpt: 4/146	
2	FILER NAME Friends of B	randon Creighton			3	Filer ID (Ethics Commission 00058241	ı Filers)
4	Date 02/26/2024	5 Full name of contributorA&M PAC6 Contributor address; City; States	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$5,000.00
_	Deineinal accu	Austin, TX 78701	. I.	O Familia va (Can linate vationa			
8	Principal occu	pation / Job title (See Instructions))	9 Employer (See Instructions	5)		
	Date 04/25/2024	Full name of contributor Adams, Bryce Contributor address; City; Sta			•	Amount of Contribution (\$)	\$250.00
	Principal occu	Austin, TX 78704 pation / Job title (See Instructions))	Employer (See Instructions	 s)		
	Date 02/26/2024	Full name of contributor Alexander, Ross Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code			Amount of Contribution (\$)	\$750.00
	Principal occu	Texarkana, TX 75503 pation / Job title (See Instructions))	Employer (See Instructions	<u> </u> s)		
	President			Texas A&M University-1	-	arkana	
	Date 03/27/2024	Full name of contributor Allen Boone Humphries R Contributor address; City; Sta Houston, TX 77027				Amount of Contribution (\$) \$2	15,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 02/26/2024	Full name of contributor Allen, Brad Contributor address; City; Sta	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$500.00
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions Company of Rock Hous			
			1				

	MONET	ARY POLITICAL CONTRIBUTIO	IS		SCHEDULE A1	
	The Instru	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 2/30 Rpt: 5/146
2	FILER NAME Friends of B	andon Creighton			3	Filer ID (Ethics Commission Filers) 00058241
4	Date 03/27/2024	 Full name of contributor)	7	Amount of Contribution (\$) \$10,000.00
8	Principal occu	Houston, TX 77040 pation / Job title (See Instructions)	9	Employer (See Instructions	 	
	Co-founder	,		NewQuest Properties	,	
	Date 05/17/2024	Full name of contributor out-of-state PAC (ID#:_ Ambler, Julie Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$500.00
		Conroe, TX 77384				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)	
	Date 05/17/2024	Full name of contributor out-of-state PAC (ID#:_Ambler, Price Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$500.00
		Conroe, TX 77384				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)	
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_Anderson, Sherrie Contributor address; City; State; Zip Code Austin, TX 78749)		Amount of Contribution (\$) \$250.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)	
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_Arnold & Itkin LLP Contributor address; City; State; Zip Code Houston, TX 77007				Amount of Contribution (\$) \$10,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/30 Rpt: 6/146		
2	FILER NAME Friends of B	randon Creighton		3	Filer ID (Ethics Commission 00058241	on Filers)	
4	Date 02/26/2024	Full name of contributor		7	Amount of Contribution (\$)	\$2,500.00	
_		Austin, TX 78767	la = 1 (0 1 1 1				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 03/18/2024	Full name of contributor out-of-state PAC (ID#:_ Bahorich, Donna Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00	
	Principal occu	Houston, TX 77024 pation / Job title (See Instructions)	Employer (See Instructions Retired)			
	Date 01/29/2024	Full name of contributor out-of-state PAC (ID#:_ Bair, Ronald Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
	Principal occu	Montogmery, TX 77356 pation / Job title (See Instructions)	Employer (See Instructions Retired)			
	Date 02/08/2024	Full name of contributor out-of-state PAC (ID#:_ Beasley, Kevin W Contributor address; City; State; Zip Code Houston, TX 77024)		Amount of Contribution (\$)	\$250.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 05/02/2024	Full name of contributor out-of-state PAC (ID#:_Benson, Thomas Contributor address; City; State; Zip Code Austin, TX 78703			Amount of Contribution (\$)	\$250.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CO	S	SCHEDULE A1			
	The Instru	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 4/30 Rpt: 7/146	
2	FILER NAME Friends of B	andon Creighton			3	Filer ID (Ethics Commission 00058241	on Filers)
4	Date 02/08/2024	5 Full name of contributorBerthelot, Iris6 Contributor address; City; State)	7	Amount of Contribution (\$)	\$500.00
_	Deinsinal	Houston, TX 77056	lo lo	Faralana (On a lantanation			
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 03/27/2024	Full name of contributor Beyer, Charles Contributor address; City; State	out-of-state PAC (ID#:;			Amount of Contribution (\$)	\$5,000.00
	Principal occu	Houston, TX 77007 pation / Job title (See Instructions)		Employer (See Instructions			
	Executive	pation / 300 title (See Instructions)		Storm Water Solutions)		
	Date 05/21/2024	Full name of contributor Blair Law Firm P.C. Contributor address; City; State	out-of-state PAC (ID#:; Zip Code)		Amount of Contribution (\$)	\$2,000.00
		The Woodlands, TX 77380					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 03/13/2024	Full name of contributor Bradley, Edna Contributor address; City; State Magnolia, TX 77354	out-of-state PAC (ID#:;)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 03/24/2024	Full name of contributor Brassington, Jessica Contributor address; City; State MONTGOMERY, TX 77316	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDULE A1
	The Instruc	ction Guide explains how to	o complete this form	n.	1	Total pages Schedule A1: Sch: 5/30 Rpt: 8/146
2	FILER NAME Friends of Br	andon Creighton			3	Filer ID (Ethics Commission Filers) 00058241
4	Date 02/26/2024	5 Full name of contributor Brewer, Jim6 Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code)	7	Amount of Contribution (\$) \$500.00
_	Deinstead	Amarillo, TX 79101		Farabasa (Ossabastas tisas		
8	CO-Founder	pation / Job title (See Instructions)	9	Employer (See Instructions J-BREX COMPANY)	
	Date 05/21/2024	Full name of contributor Brigham, Ben Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$) \$10,000.00
	Principal occu	Austin, TX 78746 pation / Job title (See Instructions)		Employer (See Instructions)	
	Chairman			Brigham Royalties		
	Date 05/21/2024	Full name of contributor Broaddus, James Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$) \$2,500.00
		Austin, TX 78746				
	Principal occu Principal	pation / Job title (See Instructions)		Employer (See Instructions Broaddus & Associates)	
	Date 03/27/2024	Full name of contributor Brock, Gary Contributor address; City; State Houston, TX 77019)		Amount of Contribution (\$) \$1,000.00
	Principal occu MD	pation / Job title (See Instructions)		Employer (See Instructions Texas Orthopedic Hospi		
	Date 05/07/2024	Full name of contributor Bryan, JP Contributor address; City; State Houston, TX 77098	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$) \$25,000.00
	Principal occu Founder	pation / Job title (See Instructions)		Employer (See Instructions Torch Energy Advisors I		orporated (TEAI)

	MONEI	DNETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instruc	ction Guide explains how	to complete this fo	orn	n.	1	Total pages Schedule A1: Sch: 6/30 Rpt: 9/146			
2	FILER NAME Friends of Br	randon Creighton				3	Filer ID (Ethics Commission 00058241	on Filers)		
4	Date 02/26/2024	5 Full name of contributor Brynes, Stan6 Contributor address; City; St	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$250.00		
8	Principal occu President	Dimmitt, TX 79027 pation / Job title (See Instructions	s)	9	Employer (See Instructions Frontier Capital Group I					
	Date 04/24/2024	Full name of contributor Burrus, Gene Contributor address; City; Si Austin, TX 78746	out-of-state PAC (ID#:_	•••••)		Amount of Contribution (\$)	\$500.00		
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	<u> </u> 5)				
	Date 02/26/2024	Full name of contributor C. Purser Holdings LLC Contributor address; City; Si	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$375.00		
	Principal occu	Killeen, TX 76542 pation / Job title (See Instructions	s)		Employer (See Instructions	<u> </u> 5)				
	Date 01/29/2024	Full name of contributor Cable, Samuel Contributor address; City; Si	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$100.00		
	Principal occu Retired	Conroe, TX 77304 pation / Job title (See Instructions	(5)		Employer (See Instructions Retired	<u> </u> 5)				
	Date 05/07/2024	Full name of contributor Catherine Taylor 2016 Re Contributor address; City; Si Dallas, TX 75209	-				Amount of Contribution (\$)	\$1,000.00		
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	s)				

	MONEI	ARY POLITICAL (CONTRIBUTIO	N2		SCHEDU	LE A1
	The Instru	ction Guide explains hov	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/30 Rpt: 10/146	
2	FILER NAME Friends of B	andon Creighton			3	Filer ID (Ethics Commission 00058241	on Filers)
4	Date 01/29/2024	5 Full name of contributor Collins, Richard6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$15,000.00
		Dallas, TX 75206					
8	Principal occu CEO	pation / Job title (See Instructions	5)	9 Employer (See Instructions Istation	5)		
	Date 02/08/2024	Full name of contributor Colston Jr, Bill Contributor address; City; S	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Riviera, TX 78379 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> 5)		
	Retired			Retired			
	Date 05/01/2024	Full name of contributor Colyandro, John Contributor address; City; S	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Date 01/29/2024	Full name of contributor Comcast Corporation & N Contributor address; City; S Philadelphia, PA 19103		00248716)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date 05/07/2024	Full name of contributor Connor, William Contributor address; City; S Houston, TX 77096	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$2,500.00
	Principal occu Principal	pation / Job title (See Instructions	5)	Employer (See Instructions Connor Investment Rea		state / Liberty Developme	nt Partners
			1				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/30 Rpt: 11/146		
2	FILER NAME Friends of B	randon Creighton		3	Filer ID (Ethics Commission 00058241	on Filers)	
4	Date 03/12/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00	
8	Principal occu	Washington, DC 20024 pation / Job title (See Instructions)	Employer (See Instructions				
•	Fillicipal occu	pation / Job title (See Instructions)	Employer (See Instructions				
	Date 05/01/2024	Full name of contributor			Amount of Contribution (\$)	\$1,000.00	
	Dringinal occu	Austin, TX 78703 spation / Job title (See Instructions)	Employer (See Instructions				
	r illicipai occu	pation / 300 title (See Instructions)	Employer (See Instructions	,			
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_ Crenshaw, Will Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00	
		Beaumont, TX 77704					
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Crenshaw Law Firm)			
	Date 05/21/2024	Full name of contributor out-of-state PAC (ID#:_ Cross Oak Group Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_ Curtis, Andy Contributor address; City; State; Zip Code Salado, TX 76571			Amount of Contribution (\$)	\$500.00	
	Principal occu Director	pation / Job title (See Instructions)	Employer (See Instructions Heights Lumber & Supp		Inc.?		

	MONEI	ARY POLITICAL (CONTRIBUTIO)N:	S		SCHEDUI	E A1
	The Instruc	ction Guide explains hov	v to complete this fo	orm	1.	1	Total pages Schedule A1: Sch: 9/30 Rpt: 12/146	
2	FILER NAME					3	Filer ID (Ethics Commission	on Filers)
		randon Creighton	_				00058241	
4	Date 02/26/2024	5 Full name of contributorDawson, Eugene6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$1,000.00
	Deire sin al	San Antonio, TX 78230		10	Forder (On the trustion			
8		pation / Job title (See Instruction	S)		Employer (See Instructions		_	
	Co-Founder				Pape Dawson Engineers	s ir	C	
	Date 02/07/2024	Full name of contributor Dombkowski, Jason Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$500.00
		West Lafayette, IN 47906	5					
	Principal occu Retired	pation / Job title (See Instruction	s)		Employer (See Instructions Retired)		
	Date 02/26/2024	Full name of contributor Dorroh, Julia Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$250.00
		Killeen, TX 76542						
	Principal occu	I	s)		Employer (See Instructions)		
	Board Direct	·	,		Killieen Education Found		ion	
	Date 02/26/2024	Full name of contributor Dorsett Johnson LLP Contributor address; City; S Austin, TX 78738	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instruction:	s)		Employer (See Instructions)		
	Date 03/27/2024	Full name of contributor EHRA Engineering PAC Contributor address; City; S Houston, TX 77042	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instruction	5)		Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/30 Rpt: 13/146		
2	FILER NAME Friends of B	randon Creighton		3	Filer ID (Ethics Commission 00058241	on Filers)	
4	Date 05/02/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00	
8	Principal occu	Austin, TX 78703 pation / Job title (See Instructions)	9 Employer (See Instructions	\			
0	Fillicipal occu	pation / Job title (See Instructions)	Employer (See Instructions	,			
	Date 01/29/2024	Full name of contributor out-of-state PAC (ID#:_ Elswick, Roger Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00	
		Houston, TX 77068					
	Principal occu Dealer	pation / Job title (See Instructions)	Employer (See Instructions Community Autogroup)			
	Date 05/21/2024	Full name of contributor out-of-state PAC (ID#:_ Evans, Stacey Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
		The Woodlands, TX 77384					
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)			
	Date 03/12/2024	Full name of contributor out-of-state PAC (ID#:_ ExxonMobil PAC Contributor address; City; State; Zip Code Irving, TX 75039			Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_Farley, Debbie Contributor address; City; State; Zip Code Killeen, TX 76542			Amount of Contribution (\$)	\$250.00	
	Principal occu Manager	pation / Job title (See Instructions)	Employer (See Instructions Dsy Land Company GP,		.C		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/30 Rpt: 14/146		
2	FILER NAME Friends of B	randon Creighton		3	Filer ID (Ethics Commission 00058241	on Filers)	
4	Date 03/27/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00	
•	Dringing oggu	Houston, TX 77007	Employer (See Instructions				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 05/21/2024	Full name of contributor			Amount of Contribution (\$)	\$250.00	
	Principal occu	Austin, TX 78703 pation / Job title (See Instructions)	Employer (See Instructions)			
	- Timoipai occa	pation 7 cos title (ecc metadotorie)	Employer (eee medacione	,			
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_ Fuljenz, Michael Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00	
		Beaumont, TX 77706					
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Universal Coin & Bullion				
	Date 03/27/2024	Full name of contributor out-of-state PAC (ID#:_ Gary Gates for Texas Contributor address; City; State; Zip Code Rosenberg, TX 77471			Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 05/18/2024	Full name of contributor out-of-state PAC (ID#:_ Gassmann, Kimberley Contributor address; City; State; Zip Code Spring, TX 77382			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/30 Rpt: 15/146		
2	FILER NAME Friends of B	randon Creighton		3	Filer ID (Ethics Commission 00058241	on Filers)	
4	Date 03/12/2024	5 Full name of contributor out-of-state PAC (ID#:_ Gibson, Gary 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$2,500.00	
•	Dringing Loggy	Houston, TX 77056	0 Employer (See Instructions				
8	CFO	pation / Job title (See Instructions)	9 Employer (See Instructions Star Furniture)			
	Date 04/18/2024	Full name of contributor out-of-state PAC (ID#:_ Gilbane, Richard Contributor address; City; State; Zip Code Austin, TX 78701-0026			Amount of Contribution (\$)	\$250.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 05/07/2024	Full name of contributor out-of-state PAC (ID#:_ Goering, Marcus Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00	
		Kingwood, TX 77345-5401					
	Principal occu Principal	pation / Job title (See Instructions)	Employer (See Instructions Liberty Development Pa		ers		
	Date 05/07/2024	Full name of contributor out-of-state PAC (ID#:_ Goodman, Barry Contributor address; City; State; Zip Code Houston, TX 77006			Amount of Contribution (\$)	\$1,000.00	
	Principal occu Professional	pation / Job title (See Instructions)	Employer (See Instructions The Goodman Corporati				
	Date 04/19/2024	Full name of contributor out-of-state PAC (ID#:_ Goodman, Barry Contributor address; City; State; Zip Code Austin, TX 78732			Amount of Contribution (\$)	\$1,000.00	
	Principal occu Professional	pation / Job title (See Instructions)	Employer (See Instructions The Goodman Corporati				

	MONET	ARY POLITICAL CONTRI	BUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to comple	ete this forr	n.	1	Total pages Schedule A1: Sch: 13/30 Rpt: 16/146	
2	FILER NAME Friends of Br	andon Creighton			3	Filer ID (Ethics Commission 00058241	on Filers)
4	Date 02/07/2024	 Full name of contributor out-of-state out-of-state Gore, Rex Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$10,000.00
_	Deire die elle e e e	Austin, TX 78704	la la	Farada e a (Carada de Araba de Carada de Carad			
8	CEO	pation / Job title (See Instructions)	9	Employer (See Instructions Cleanscapes	5)		
	Date 05/21/2024	Gore, Rex				Amount of Contribution (\$)	\$10,000.00
	Principal occu	Austin, TX 78704 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	CEO	(555)		Clean Scapes	,		
	Date 05/21/2024				Amount of Contribution (\$)	\$2,500.00	
		Albany, NY 12207					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 02/07/2024	Grenader, David)		Amount of Contribution (\$)	\$5,000.00
	Principal occu Self Employe	pation / Job title (See Instructions)		Employer (See Instructions Real Estate Managemen			
	Date 02/26/2024	Full name of contributor out-of-state Griffith, Carl Contributor address; City; State; Zip Code Winnie, TX 77665)		Amount of Contribution (\$)	\$1,000.00
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Griffith Moseley Johnson		Associates, INC	

	MONET	ARY POLITICAL (IS .	SCHEDULE A1				
	The Instruc	ction Guide explains hov	ı to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 14/30 Rpt: 17/146	
2	FILER NAME Friends of Br	randon Creighton				3	Filer ID (Ethics Commission 00058241	on Filers)
4	Date 05/21/2024	5 Full name of contributor Haliti, Besnik6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$6,000.00
8	Principal occu Owner	The Woodlands, TX 7738 pation / Job title (See Instructions		9	Employer (See Instructions Joes Italian	 		
	Date 05/21/2024	Full name of contributor Hance, Kent Contributor address; City; S Lubbock, TX 79409)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	<u>. </u>		
	Date 02/26/2024	Full name of contributor Hardin, Dr. Barry Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
		Beaumont, TX 77702 pation / Job title (See Instructions	s)		Employer (See Instructions	•		
	Anesthesiolo Date 02/26/2024	Full name of contributor Haschke, Justin Contributor address; City; S Stephenville, TX 76401			Baptist Hospitals of Sou	the	Amount of Contribution (\$)	\$250.00
	Principal occu Wealth Advis	pation / Job title (See Instructions SOT	5)		Employer (See Instructions BMY Wealth Manageme	•	Group	
	Date 02/26/2024	Full name of contributor Hellberg, Roxanne Contributor address; City; S Beaumont, TX 77713					Amount of Contribution (\$)	\$250.00
	Principal occu County Clerk	pation / Job title (See Instructions	5)		Employer (See Instructions Jefferson County Clerk	s)		

	MONET	ARY POLITICAL CONTRIBUTIO		LE A1		
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 15/30 Rpt: 18/146	
2	FILER NAME Friends of B	andon Creighton		3	Filer ID (Ethics Commission 00058241	on Filers)
4	Date 02/08/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
_	Deireirel	Corpus Christi, TX 78413				
8	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 05/21/2024	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,500.00
	Dringing agg	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	<u></u>		
	Fillicipal occu	oalion7 300 title (See Instructions)	Employer (See Instructions	·)		
	Date 03/07/2024	Full name of contributor out-of-state PAC (ID#: Holt, David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/27/2024	Full name of contributor out-of-state PAC (ID#: Home PAC Greater Houston Builders Assoc. Contributor address; City; State; Zip Code Houston, TX 77064			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/27/2024	Full name of contributor out-of-state PAC (ID#: Houston Pilots PAC Contributor address; City; State; Zip Code Deer Park, TX 77536)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
		l				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/30 Rpt: 19/146		
2	FILER NAME Friends of B	randon Creighton		3	Filer ID (Ethics Commission 00058241	on Filers)	
4	Date 02/09/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$250.00	
_	<u> </u>	San Antonio, TX 78256					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))			
	Date 02/07/2024	Full name of contributor out-of-state PAC (ID#:_ Hsu, Justin Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5,000.00	
	Dringing oggu	New York, NY 10132	Employer (See Instructions				
	Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions Cornell University)			
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_ Hurley, James Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00	
		Stephenville, TX 76402					
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Tarleton State University				
	Date 05/21/2024	Full name of contributor out-of-state PAC (ID#:_ Inman, Bobby R. Contributor address; City; State; Zip Code Austin, TX 78746)		Amount of Contribution (\$)	\$250.00	
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)			
	Date 04/17/2024	Full name of contributor out-of-state PAC (ID#:_ Jensen, Jennifer Contributor address; City; State; Zip Code Austin, TX 78750)		Amount of Contribution (\$)	\$250.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONT	S	SCHEDULE A1			
	The Instru	ction Guide explains how to com	plete this form	n.	1	Total pages Schedule A1: Sch: 17/30 Rpt: 20/146	
2	FILER NAME Friends of Br	andon Creighton			3	Filer ID (Ethics Commission 00058241	on Filers)
4	Date 05/01/2024	Johnson, Michael	-state PAC (ID#:		7	Amount of Contribution (\$)	\$5,000.00
0	Principal occu	Austin, TX 78701	l _o	Employer (See Instructions	.,		
8	Consultant	pation / Job title (See Instructions)	9	Employer (See Instructions Self	·)		
	Date 02/26/2024	Full name of contributor out-of- Khan, Mansoor Contributor address; City; State; Zip C	-state PAC (ID#: ode			Amount of Contribution (\$)	\$500.00
	Principal occu	College Station, TX 77845		Employer (See Instructions	_		
	Researcher	pation / Job title (See Instructions)		Texas A&M School of P		macy	
	Date 04/17/2024	Full name of contributor out-of- Knippa, Bradley Contributor address; City; State; Zip C	-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 03/27/2024	Kobza, Cale	-state PAC (ID#:)		Amount of Contribution (\$)	\$2,500.00
	Principal occu Chief Financ	pation / Job title (See Instructions) ial Officer		Employer (See Instructions Clearwater	()		
	Date 04/22/2024	Langford, Lance	-state PAC (ID#:			Amount of Contribution (\$)	\$2,500.00
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Langford Energy Partne			
			1				

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS	SCHEDULE A	A1
	The Instruc	ction Guide explains how	to complete this for	rm.	1 Total pages Schedule A1: Sch: 18/30 Rpt: 21/146	
2	FILER NAME				3 Filer ID (Ethics Commission Fil	ers)
	Friends of Br	randon Creighton			00058241	
4	Date 03/27/2024	5 Full name of contributorLanham, Robert6 Contributor address; City; State	out-of-state PAC (ID#:		7 Amount of Contribution (\$) \$25,	000.00
		Katy, TX 77494				
8		pation / Job title (See Instructions)) 9	Employer (See Instructions		
	President			Williams Brothers Const	struction	
	Date 05/01/2024	Full name of contributor Lin, Lisa PingHui Contributor address; City; Sta	out-of-state PAC (ID#:		Amount of Contribution (\$)	000.00
		AUSTIN, TX 78759				
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	ns)	
	Date 02/26/2024	Full name of contributor Lohse, Paula Contributor address; City; Sta	out-of-state PAC (ID#:		Amount of Contribution (\$)	250.00
		Harker Heights, TX 76548				
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	ns)	
	Dealer Princ	ipal		Toyota of Killeen		
	Date 02/26/2024	Full name of contributor Lyondell Chemical Compa Contributor address; City; Sta Houston, TX 77010)	Amount of Contribution (\$)	000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	ns)	
	Date 02/05/2024	Full name of contributor Manske, Court Contributor address; City; Sta	out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$1.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)	

	MONET	ARY POLITICAL C		SCHEDU	SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 19/30 Rpt: 22/146	
2	FILER NAME Friends of B	randon Creighton			3	Filer ID (Ethics Commission 00058241	on Filers)
4	Date 01/31/2024	5 Full name of contributor Manske, Court6 Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code		7	Amount of Contribution (\$)	\$1.00
		Austin, TX 78703					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 02/26/2024	Full name of contributor Mayfield, A Dawin Contributor address; City; St)		Amount of Contribution (\$)	\$500.00
	Principal occu	Dublin, TX 76446 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired	panelly cost and (cost mendenelle	,	Retired	-,		
	Date 02/26/2024	Full name of contributor McCormick, Philip Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$250.00
		Houston, TX 77025					
	Principal occu Chief Financ	pation / Job title (See Instructions ial)	Employer (See Instructions Cyanco	s)		
	Date 02/26/2024	Full name of contributor McKenzie, Mark Contributor address; City; St Fort Worth, TX 76132)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions Focused Post Acute Ca		Partners LLC	
	Date 04/29/2024	Full name of contributor Miller , Robert Contributor address; City; St Dallas, TX 75201)	•	Amount of Contribution (\$)	\$2,500.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Locke Lord, LLP	5)		

	MONET	ARY POLITICAL COI	S	SCHEDULE A1			
	The Instruc	ction Guide explains how to	complete this forr	n.	1	Total pages Schedule A1: Sch: 20/30 Rpt: 23/146	
2	FILER NAME Friends of Br	randon Creighton			3	Filer ID (Ethics Commission 00058241	on Filers)
4	Date 02/26/2024	Montagne, James	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$750.00
8	Principal occu	Beaumont, TX 77706 pation / Job title (See Instructions)	9	Employer (See Instructions	.)		
	General Mar			Sabine River Authority T		as	
	Date 03/27/2024	Full name of contributor Composition of Contributor address; City; State; 2				Amount of Contribution (\$)	\$2,500.00
		Houston, TX 77019					
	Principal occu Manager	pation / Job title (See Instructions)		Employer (See Instructions Moody Law Group	5)		
	Date 01/12/2024	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$3,500.00
		Houston, TX 77098					
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions Moran Services	5)		
	Date 04/04/2024	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$2,500.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 02/26/2024	Full name of contributor x one Gas INC PAC Contributor address; City; State; 2 Tulsa, OK 74103	out-of-state PAC (ID#: <u>C00</u>	554444		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			l				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 21/30 Rpt: 24/146		
2	FILER NAME Friends of B	randon Creighton		3	Filer ID (Ethics Commission 00058241	on Filers)	
4	Date 03/27/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,500.00	
_	Dringing! goog	San Antonio, TX 78213	0 Employer/Coo Instructions				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_Patterson, Cary Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00	
		Texarkana, TX 75503					
	Frincipal occu Founder	pation / Job title (See Instructions)	Employer (See Instructions Nix Patterson LLP	5)			
	Date 03/27/2024	Full name of contributor)		Amount of Contribution (\$)	\$1,000.00	
		League City, TX 77573					
	Principal occu Account Mar	pation / Job title (See Instructions) nager	Employer (See Instructions Wholesale Electric Supp		Co		
	Date 02/14/2024	Full name of contributor out-of-state PAC (ID#:_ Perez, Romeo Contributor address; City; State; Zip Code Cypress, TX 77433)		Amount of Contribution (\$)	\$100.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 02/07/2024	Full name of contributor out-of-state PAC (ID#:_ Petkovsek, Heather Contributor address; City; State; Zip Code Austin, TX 78703)		Amount of Contribution (\$)	\$2,500.00	
	Principal occu Director	pation / Job title (See Instructions)	Employer (See Instructions Modern Group)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 22/30 Rpt: 25/146		
2	FILER NAME Friends of B	randon Creighton		3	Filer ID (Ethics Commission 00058241	on Filers)	
4	Date 02/20/2024	5 Full name of contributor out-of-state PAC (ID#:_ Pierce, Vernon 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00	
_		Beaumont, TX 77706					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 03/27/2024	Full name of contributor out-of-state PAC (ID#:_Plowman, Glenn Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00	
	Principal occu	Simonton, TX 77476 pation / Job title (See Instructions)	Employer (See Instructions)			
	President	pation 7 cos title (eee metadotoris)	Twinwood	,			
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_ Plumbers Local Union NO. 68 PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00	
	Dringing Lagra	Houston, TX 77249	Familia ya (Can Instructiona				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 04/17/2024	Full name of contributor out-of-state PAC (ID#:_Pohl, William Contributor address; City; State; Zip Code Austin, TX 78750)		Amount of Contribution (\$)	\$250.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 05/21/2024	Full name of contributor out-of-state PAC (ID#:_ Precast PAC Contributor address; City; State; Zip Code Austin, TX 78716)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 23/30 Rpt: 26/146		
2	FILER NAME Friends of B	randon Creighton				3	Filer ID (Ethics Commission Filers) 00058241
4	Date 02/26/2024			7	Amount of Contribution (\$) \$250.00		
_	Deignaignal	Amarillo, TX 79121			Franks or (Cook activistics	<u></u>	
8	Retired	pation / Job title (See Instructions	(3)	9	Employer (See Instructions Retired	5)	
	Date 02/07/2024	Full name of contributor Reddy, Indra Contributor address; City; St)		Amount of Contribution (\$) \$500.00
	Principal occu	Corpus Christi, TX 78414 pation / Job title (See Instructions			Employer (See Instructions	;) 	
Senior Associate Vice President Texas A&M)			
	Date Full name of contributor out-of-state PAC (ID#:) 05/21/2024 Robert, Kasprzak Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$20,000.00		
		Pasadena, CA 91101					
	Principal occu Retired	pation / Job title (See Instructions	;) 		Employer (See Instructions Retired	5)	
	Date Full name of contributor out-of-state PAC (ID#:) 02/26/2024 Roebuck, Jeremey Contributor address; City; State; Zip Code Lumberton, TX 77657				Amount of Contribution (\$) \$1,000.00		
			Employer (See Instructions Southeast Texas Ear, N		e and Throat LLP		
	Date Full name of contributor out-of-state PAC (ID#:) 02/26/2024 Rogers, Dyke Contributor address; City; State; Zip Code Dalhart, TX 79022			Amount of Contribution (\$) \$500.00			
	Principal occu Owner	pation / Job title (See Instructions	(3)		Employer (See Instructions Frontier Fuel Co.	5)	

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 24/30 Rpt: 27/146			
2	FILER NAME Friends of B	randon Creighton			3	Filer ID (Ethics Commission 00058241	on Filers)	
4	Date 05/21/2024	5 Full name of contributor Roosa, Robert6 Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code		7	Amount of Contribution (\$)	\$2,500.00	
_	Dringing Lagra	Austin, TX 78732) lo	Frankrian (Coo looku ations	<u></u>			
0		pation / Job title (See Instructions tive Officer and Partner) 9	Employer (See Instructions Brigham Royalties	s)			
	Date 02/26/2024	Full name of contributor Rural Friends of Electric C Contributor address; City; St			•	Amount of Contribution (\$)	\$2,000.00	
	Dringing! goog	Austin, TX 78701		Employer (See Instruction	<u>,,</u>			
	Principal occu	pation / Job title (See Instructions	,	Employer (See Instructions	o)			
	Date 02/26/2024	Full name of contributor Sabine Pilot PAC Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)	•	Amount of Contribution (\$)	\$5,000.00	
		Port Arthur, TX 77640						
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	s)			
	Date 02/26/2024	Full name of contributor Sampson Public Affairs LL Contributor address; City; St Austin, TX 78749)	•	Amount of Contribution (\$)	\$1,000.00	
Principal occupation / Job title (See Instructions) Employer (See Instructions)		<u> </u> S)						
	Date 02/26/2024	Full name of contributor Schaeffer, David Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu CPA	pation / Job title (See Instructions)	Employer (See Instructions Stanley Schaeffer & Ass		iates		
				, , , , , , , , , , , ,				

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 25/30 Rpt: 28/146		
2	FILER NAME Friends of Br	andon Creighton			3	Filer ID (Ethics Commission 00058241	on Filers)
4	Date 02/26/2024	Date 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$500.00	
_	Deignigal	Amarillo, TX 79119	lo-	Faralous (Coo lastausticas			
8	Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 02/26/2024	Full name of contributor out-of-s Schaeffer, Jerry Contributor address; City; State; Zip Co	tate PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Happy, TX 79042 Principal occupation / Job title (See Instructions) Employer (See Instructions)		Employer (See Instructions	<u>.</u>			
	Consultant Schaffer Consulting		,				
	Date 02/07/2024	Full name of contributor out-of-s Schwartz Page & Harding L.L.P. Contributor address; City; State; Zip Co	tate PAC (ID#: de)		Amount of Contribution (\$)	\$2,500.00
		Houston, TX 77056					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Date 02/26/2024	Full name of contributor out-of-s Shapiro Linn Strategic Consulting L Contributor address; City; State; Zip Co Austin, TX 78734				Amount of Contribution (\$)	\$1,000.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)		5)					
	Date 02/26/2024				Amount of Contribution (\$)	\$1,000.00	
	Principal occu Chancellor	pation / Job title (See Instructions)		Employer (See Instructions Texas A&M	5)		
			1				

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orı	m.	1	Total pages Schedule A1: Sch: 26/30 Rpt: 29/146		
2	FILER NAME Friends of B	andon Creighton			3	Filer ID (Ethics Commission Filers) 00058241		
4	Date 02/26/2024 5 Full name of contributor out-of-state PAC (ID#:) Sharp, John 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$1,000.00				
8	Dringinal occu	College Station, TX 77840 pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions				
•	Chancellor	pation / 300 title (See Instructions)	<u> </u>	Texas A&M	·)			
	Date 03/27/2024	Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$10,000.00		
	The Woodlands, TX 77380 Principal occupation / Job title (See Instructions) Employer (See Instructions)		<u> </u> 5)					
	CEO The Signorelli Comp		The Signorelli Company	′				
	Date 02/20/2024	Full name of contributor out-of-state PAC (ID#:_ Spurlin, Sharon Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$100.00		
		Houston, TX 77055						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_ Stepp, Ronald Contributor address; City; State; Zip Code Harker Heights, TX 76548)	•	Amount of Contribution (\$) \$250.00		
			Employer (See Instructions Lott Vernon & Company		.c.			
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_ Ted B. Lyon Associates P.C. Contributor address; City; State; Zip Code Mesquite, TX 75150				Amount of Contribution (\$) \$2,500.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 27/30 Rpt: 30/146		
2	FILER NAME Friends of B	randon Creighton		3	Filer ID (Ethics Commission Filers) 00058241		
4			7	Amount of Contribution (\$) \$5,000.0	0		
_		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))			
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Consumer Lenders PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$2,500.0	0	
	Principal occu	Greenville, SC 29615 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Medical Association PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$10,000.0	0	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))			
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Society of Anesthesiologists PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$5,000.0	0	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))			
	Date 03/12/2024	Full name of contributor x out-of-state PAC (ID#: CTHE US Oncology Network PAC Contributor address; City; State; Zip Code The Woodlands, TX 77380	C00339655)		Amount of Contribution (\$) \$2,500.0	0	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))			

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 28/30 Rpt: 31/146	=		
2	FILER NAME Friends of B	randon Creighton				3	Filer ID (Ethics Commission Filers) 00058241	
4	Date 05/21/2024 5 Full name of contributor out-of-state PAC (ID#:) Theis, Sidney 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$10,000.00)			
		College Station, TX 7784						
8	Principal occu CEO	pation / Job title (See Instructions	(1)	9	Employer (See Instructions RDTEC Radar Technology		Inc	
	Date 01/29/2024	Full name of contributor Thomas, Ralph Contributor address; City; S Houston, TX 77010					Amount of Contribution (\$) \$15,000.00)
	Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired		5)					
	Date 05/07/2024	Full name of contributor Truchard, James Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$) \$250.00)
	Principal occu	Austin, TX 78746 pation / Job title (See Instructions	5)		Employer (See Instructions	<u> </u>		_
	Date 03/12/2024	Full name of contributor USAA Employee PAC Contributor address; City; S San Antonio, TX 78288					Amount of Contribution (\$) \$2,000.00	=
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	5)		_
	Date 04/24/2024	Full name of contributor Von Dohlen, Tim Contributor address; City; S Austin, TX 78733	out-of-state PAC (ID#:)		Amount of Contribution (\$) \$1,000.00	=
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	<u> </u>		_

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 29/30 Rpt: 32/146	
2	FILER NAME Friends of B	randon Creighton		3	Filer ID (Ethics Commission 00058241	on Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Walker, Bradley 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00	
_		Kingsville, TX 78364				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 04/22/2024	Full name of contributor out-of-state PAC (ID#:_ Wallace, Hunter Contributor address; City; State; Zip Code KINGSLAND, TX 78639			Amount of Contribution (\$)	\$500.00
			Employer (See Instructions))		
	Date 05/07/2024 Full name of contributor out-of-state PAC (ID#:) Williams, Ted Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00	
	Pointing I accord	Austin, TX 78730	Faralassa (Caralastastica)			
	CEO	pation / Job title (See Instructions)	Employer (See Instructions) Rockport Companies) 		
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_Williams, Thomas Contributor address; City; State; Zip Code Navasota, TX 77868)		Amount of Contribution (\$)	\$1,000.00
	Principal occupation / Job title (See Instructions) Field Manager Employer (See Instruction Bulldog Security System					
	Date 02/26/2024				Amount of Contribution (\$)	\$250.00
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions) Wolfe Distributing Co.)		

N	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A1
Т	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 30/30 Rpt: 33/146
	ILER NAME riends of B	randon Creighton		3 Filer ID (Ethics Commission Filers) 00058241
4 D	eate 2/26/2024	5 Full name of contributor		7 Amount of Contribution (\$) \$100.00
		Kingwood, TX 77345		
	rincipal occu CPA	ipation / Job title (See Instructions)	9 Employer (See Instructions Fitts Roberts Kolkhorst	
	oate 3/12/2024	Full name of contributor out-of-state PAC (ID#:_Zachry Corporation PAC Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$2,500.00
		San Antonio, TX 78265		
Р	rincipal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
┰	Total pages Schedule F1:	
	Sch: 1/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
l	05/06/2024	105 cafe
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$58.75	3010 W Davis St
l		
l		Conroe, TX 77304
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Meeting to discuss officeholder/ campaign issues.
l		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
l	05/29/2024	AT&T Hotel and Conference Center
Г	Amount (\$)	Payee address; City; State; Zip Code
l	\$21.00	1900 University Ave
l		
		Austin , TX 78705
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		Parking for officeholder meeting.
l		. and great and an emberroad and an embe
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
⊨	Data	Para a sana
l	Date	Payee name
L	05/29/2024	AT&T Hotel and Conference Center
l	Amount (\$)	Payee address; City; State; Zip Code
l	\$21.00	1900 University Ave
		Austin , TX 78705
\vdash	PURPOSE	
l	OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Parking for officeholder meeting.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

sement Solicitation/Fundraising Expense

xpense Transportation Equipment & Related Expense
Travel in District
Travel Out of District

abor OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	l 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: 2/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	06/17/2024	AT&T
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$216.15	2952 IH 45 N
		Conroe, TX 77304
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign phone bill.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	
	Date	Payee name
	05/15/2024	AT&T
	Amount (\$)	Payee address; City; State; Zip Code
	\$216.15	2952 IH 45 N
		Conroe, TX 77304
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign phone bill.
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	•
H	Date	Payee name
	04/16/2024	AT&T
L		
	Amount (\$) \$216.17	Payee address; City; State; Zip Code 2952 IH 45 N
	Φ210.17	2932 In 43 IN
l		Conroo TV 77204
	DUDD 005	Conroe, TX 77304
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign phone bill.
1		
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
一		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

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 Travel in District

Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/113 Rpt: Friends of Brandon Creighton 00058241 4 Date Payee name 03/15/2024 AT&T 6 Amount (\$) Payee address; City; State; Zip Code \$211.17 2952 IH 45 N Conroe, TX 77304 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign phone bill. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/15/2024 AT&T Amount (\$) Payee address; City; State; Zip Code \$216.45 2952 IH 45 N Conroe, TX 77304 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign phone bill. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2024 AT&T Amount (\$) Payee address: City: State; Zip Code \$216.45 2952 IH 45 N Conroe, TX 77304 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign phone bill. 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 -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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	<u> </u>	-
	Sch: 4/113 Rpt:	Friends of Brandon Creighton 3 File ID (Ellines Commission Files) 00058241	
Ļ	-		_
4	Date	5 Payee name	
L	05/06/2024	Ace Parking	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$25.00	1601 Lake Robbins Pwky	
		The Woodlands , TX 77340	
8	PURPOSE		_
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Parking for officeholder meeting	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	H	
_	Date	Payee name	=
	06/17/2024	Amazon	
-	Amount (\$)	Payee address; City; State; Zip Code	_
	` '		
	\$16.63	434 Terry Avenue North	
L		Seattle, WA 98109	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		Check if Austin, TX, officeholder living expense	
		Supplies for Austin office.	
_	Operation ONE V. C. F.	Our distance (Office health annuary Control of the	_
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
L	,		_
	Date	Payee name	
L	02/07/2024	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$250.00	434 Terry Avenue North	
		Seattle, WA 98109	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	-
	OF	Office Overhead/Rental Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Supplies for Austin office.	ĺ
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	п 	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense
Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to con	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 5/113 Rpt:	Friends of Brandon Creighton		00058241
4	Date	5 Payee name		'
	02/20/2024	Amazon		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$162.36	434 Terry Avenue North		
		Seattle, WA 98109		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
	LAPENDITORE			Check if Austin, TX, officeholder living expense
				Supplies for Austin office.
9	Complete ONLY if direct	Candidate/Officeholder name Office souc	ht	Office held
9	expenditure to benefit C/OI		JIIL	Office field
\vdash	Date	Davisa rasma		
	02/20/2024	Payee name Amazon		
_			d =	
	Amount (\$) \$41.10	Payee address; City; State; Zip Coo 434 Terry Avenue North	зе	
	Φ41.10	434 Terry Avenue North		
		Coordo MA 00100		
		Seattle, WA 98109		
	PURPOSE OF	,	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense		Check if Austin, TX, officeholder living expense
				Supplies for Austin office.
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	06/17/2024	Amazon		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$172.49	434 Terry Avenue North		
		Seattle, WA 98109		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Supplies for Austin office.
				Supplies for Austri Office.
_	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI		,	255 1010

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 Salarias/Magas/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Printing Expense Salaries/Wages/Contract Labor Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 6/113 Rpt: Friends of Brandon Creighton 00058241 4 Date Payee name 01/12/2024 Amazon 6 Amount (\$) Payee address; City; State; Zip Code \$282.88 434 Terry Avenue North Seattle, WA 98109 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies for Austin office. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/22/2024 Amazon Amount (\$) Payee address; City; State; Zip Code \$23.31 434 Terry Avenue North Seattle, WA 98109 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies for Austin office. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/22/2024 Amazon Amount (\$) Payee address: City: State; Zip Code \$64.91 434 Terry Avenue North Seattle, WA 98109 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies for Austin office. 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 Candidate/Officeholder/Political Committee

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1		2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 7/113 Rpt:	Friends of Brandon Creighton	00058241
4		5 Payee name	
	04/12/2024	Amazon	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$12.97	434 Terry Avenue North	
		Seattle, WA 98109	
Ļ	DUDDOCE		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	avel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Al	ustin, TX, officeholder living expense
		Supplies for	or Austin office.
_	0 1: 0:0:0:0:0:0:0:0:0:0:0:0:0:0:0:0:0:0		000
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
-	Data		
	Date 04/11/2024	Payee name Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$59.54	434 Terry Avenue North	
	400.0 .	.o., .o., ,o.,o.	
		Seattle, WA 98109	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	avel outside of Texas. Complete Schedule T.
	LXI ENDITORE		ustin, TX, officeholder living expense
		Supplies	or Austin office.
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	04/15/2024	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$159.20	434 Terry Avenue North	
		Seattle, WA 98109	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	onice Overneau/Nental Expense	vel outside of Texas. Complete Schedule T. Istin, TX, officeholder living expense
			or Austin office.
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
L			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.	
1 Total pages Schedule F1	: 2 FILER NAME	3 Filer ID (E	Ethics Commission Filers)
Sch: 8/113 Rpt:	Friends of Brandon Creighton	00058241	
4 Date	5 Payee name	•	
04/23/2024	Amazon		
6 Amount (\$)	7 Payee address; City; State; Zip Co	de	
\$48.71			
	Seattle, WA 98109		
8 PURPOSE		(b) Description	
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check if travel outside of Texas. Complete	e Schedule T.
EXPENDITURE	Office Overhead/Nertal Expense	Check if Austin, TX, officeholder living exp	
		Supplies for Austin office.	
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held	
expenditure to benefit C/	JH		
Date	Payee name		
05/02/2024	Amazon		
Amount (\$)	Payee address; City; State; Zip Co	de	
\$76.17			
	, , , , , , , , , , , , , , , , , , , ,		
	Seattle, WA 98109		
PURPOSE		(b) Description	
OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete	e Schedule T.
EXPENDITURE	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living exp	
		Supplies for Austin office.	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held	
expenditure to benefit C/	OH .		
Date	Payee name		
05/14/2024	Amazon		
Amount (\$)	Payee address; City; State; Zip Co	de	
\$48.71			
,			
	Seattle, WA 98109		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete	a Schadula T
EXPENDITURE	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living exp	
		Supplies for Austin office.	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held	
expenditure to benefit C/			

SCHEDULE F1

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

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		_
	Sch: 9/113 Rpt:	Friends of Brandon Creighton 00058241	
4	Date	5 Payee name	
	01/03/2024	Amli On 2nd	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$3,559.60	425 W 3rd St.	
		Austin, TX 78701	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Officeholder Austin apartment.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
_	Date	Payee name	=
	02/05/2024	Amli On 2nd	
			_
	Amount (\$)	Payee address; City; State; Zip Code 425 W 3rd St.	
	\$3,693.60	425 W 310 St.	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Officeholder Austin apartment.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
_	Date	Davos nama	_
	03/05/2024	Payee name Amli On 2nd	
			_
	Amount (\$)	Payee address; City; State; Zip Code 425 W 3rd St.	
	\$3,647.69	425 W 310 St.	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Officeholder Austin apartment.	
	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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schodule F1:	1
1 Total pages Schedule F1: Sch: 10/113 Rpt:	Friends of Brandon Creighton 73 Filer ID (Eurics Commission Filers) 00058241
4 Date	5 Payee name
04/03/2024	Amli On 2nd
6 Amount (\$) \$3,636.41	7 Payee address; City; State; Zip Code 425 W 3rd St. Austin, TX 78701
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Officeholder Austin apartment.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/03/2024	Amli On 2nd
Amount (\$) \$3,805.53	Payee address; City; State; Zip Code 425 W 3rd St. Austin, TX 78701
PURPOSE	1
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Officeholder Austin apartment.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/04/2024	Amli On 2nd
Amount (\$) \$3,672.30	Payee address; City; State; Zip Code 425 W 3rd St.
	Austin, TX 78701
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Officeholder Austin apartment.
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Fi	lers)
	Sch: 11/113 Rpt:	Friends of Brandon Creighton 00058241	
4	Date	5 Payee name	
	06/24/2024	Austin Proper	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$238.14	600 W 2nd St	
l		Austin , TX 78701	
8	PURPOSE		
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
l	EXPENDITURE	Check if Austin, TX, officeholder living expense	
l		Meeting to discuss officeholder/ campaign issue	es.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L	experientare to benefit G/OI		
	Date	Payee name	
l	03/12/2024	Avenida North Garage	
	Amount (\$)	Payee address; City; State; Zip Code	
l	\$22.00	701 Avenida de las Americas	
l			
l		Houston, TX 77010	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
l	LXI LINDITORE	Check if Austin, TX, officeholder living expense	
		parking for officeholder meeting.	
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
⊨	Data		
	Date 01/12/2024	Payee name Baradaran, Shiva	
┡			
l	Amount (\$)	Payee address; City; State; Zip Code	
l	\$137.00	1835 Woodland Field Crossing	
l		Apt. 495	
L		The Woodlands, TX 77380	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
l		Mileage reimbursement for 274 miles @ \$.67 p	er
		mile not reimbursed at state expense.	
H	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 Co Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
•	Sch: 12/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	02/12/2024	Baradaran, Shiva
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$162.00	1835 Woodland Field Crossing
		Apt. 495
		The Woodlands, TX 77380
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Mileage reimbursement for 324 miles @ \$0.50 per
		mile not reimbursed by the state.
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	03/12/2024	Baradaran, Shiva
	Amount (\$)	Payee address; City; State; Zip Code
	` '	
	\$240.00	1835 Woodland Field Crossing
		Apt. 495
		The Woodlands, TX 77380
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Mileage reimbursement for 480 miles @ \$0.50 per mile not reimbursed by the state.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/14/2024	Baradaran, Shiva
	Amount (\$)	Payee address; City; State; Zip Code
	\$345.72	1835 Woodland Field Crossing
	40.0	•
		Apt. 495
		The Woodlands, TX 77380
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Mileage reimbursement for 516 miles @ \$.67 per mile not reimbursed at state expense.
\vdash	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 Committee
Condit Contributions

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		nmittee	Legal Services The Instruction Guid	Salarie	s/Wage	es/Contract Labor		OTHER (enter a	a category not listed above)
_	T-t-1 O-b F1:	_						1	Ell ID	(Ethics Commission Filess)
1	Total pages Schedule F1:	ı						3	Filer ID	(Ethics Commission Filers)
	Sch: 13/113 Rpt:		Friends of B	randon Creightoi	n				00058241	
4	Date	5	Payee name							
	05/29/2024		Baradaran,	Shiva						
_	Amount (ft)	<u> </u>	Payee addres		State; Zip (Codo				
6	Amount (\$)	ı	•		•	Joue				
	\$3,000.00		1835 W0001	and Field Crossii	ng					
			Apt. 495							
			The Woodla	nds, TX 77380						
8	PURPOSE	(a)	Category (ca	e Categories listed at the	top of this selectule)	(b)) Description			
	OF			iges/Contract Lat		()		outsi	de of Texas. Cor	mplete Schedule T.
	EXPENDITURE		Salaries/ Wa	iges/contract Lar	JOI		=		officeholder livin	
							Campaign co	ntr	act wages.	
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Office s	l ought	t		Office h	neld
	expenditure to benefit C/OI	H								
	Date		Payee name					_		
	06/05/2024		Baradaran,	Shiva						
	Amount (\$)		Payee addres	ss; City;	State; Zip (Code				
	\$206.36		1835 Wood!	and Field Crossii	na .					
	,	l			-9					
		l	Apt. 495							
			The Woodla	nds, TX 77380						
	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this schedule)	(b)) Description			
	OF EXPENDITURE		Travel Out of	of District			=			mplete Schedule T.
	EXI ENDITORE						ш		officeholder livin	
							Mileage reim			308 miles @ \$.67 per
							Tille flot fellil	bui	seu ai siait	е ехрепѕе.
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office s	ought	t		Office h	neld
	expenditure to benefit C/OI	Н								
	Date		Payee name							
	04/24/2024		Bartletts Dis	tillerv						
	Amount (\$)	ı	Payee addres	•	State; Zip (Code				
	\$149.68		1303 Beach	Airport Rd						
			Conroe , TX	77301						
	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this schedule)	(b)) Description			
	OF EXPENDITURE			age Expense						mplete Schedule T.
	EXPENDITURE						_		officeholder livin	
							Meeting to di	SCL	ıss officeho	lder/ campaign issues.
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office s	ought	t		Office h	neld
	expenditure to benefit C/O	Н								
-										

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		•			iges/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)	
<u> </u>		_					1_	E1 15	/Edition 0	-11>
1	Total pages Schedule F1: Sch: 14/113 Rpt:	2	Friends of Brandon Creight	on			3	Filer ID 00058241	(Ethics Commission F	-liers)
_	<u> </u>	-					<u> </u>			
4	Date	5	Payee name							
	04/24/2024		Bartletts Distillery							
6	Amount (\$)	7	Payee address; City;	State; Zir	p Cod	e				
	\$210.32		1303 Beach Airport Rd	, ,	•					
	Ψ210.02		1000 Bedon / Inport Na							
			Conroe , TX 77301							
8	PURPOSE	(a)	Category (See Categories listed at the	ho top of this schodulo)	, (b) Description				
	OF	``	Food/Beverage Expense	ne top of this scriedule)	'	_	l outs	ide of Texas. Com	plete Schedule T.	
	EXPENDITURE		1 oou/beverage Expense					, officeholder living		
						Meeting to d	iscı	ıss officehol	der/ campaign issu	ies.
						3			, , , , , , , , , , , , , , , , , , ,	
_		<u> </u>								
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office	e soug	ht		Office he	eld	
	experialiture to beliefit C/Oi	•								
	Date		Payee name							
	04/24/2024		Bartletts Distillery							
_	Amount (ft)	⊢		State; Zir	n Cod	lo.				
	Amount (\$)			State, Zij	p Cou	E				
	\$270.92		1303 Beach Airport Rd							
			Conroe , TX 77301							
	PURPOSE	(a)	Category (2 2 1 1 1 1 1 1 1 1		. [b) Description				
	OF	'"	Category (See Categories listed at the	ne top of this schedule)	'		l outs	ide of Texas. Com	nlete Schedule T	
	EXPENDITURE		Food/Beverage Expense			<u>—</u>		, officeholder living		
						ш			der/ campaign issu	ies.
_	Operation ONE Wife Street	<u> </u>		O#:		L		O#: I-	-1-1	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office	e soug	nı		Office he	eiu	
	experientare to benefit e/ei									
	Date		Payee name							
	05/14/2024		Black Walnut Cafe							
	Amount (\$)		Payee address; City;	State; Zir	n Cod					
	()			State, Zij	p Cou					
	\$19.21		9000 New Trails Dr.							
			The Woodlands, TX 77381							
	PURPOSE	(a)	Category (See Categories listed at the	he ton of this schodule	, 1	b) Description				
	OF	``	Food/Beverage Expense	ne top of this scriedule)	'		l outs	ide of Texas. Com	plete Schedule T.	
	EXPENDITURE		Food/Deverage Expense					, officeholder living		
						_			der/ campaign issu	ies.
							•		12.3.19.1.000	
L	Complete ONLY if direct	Щ	Candidata/Officabalder ======	O#:	0.00::::	ht		O#: !-	ald.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Οπισε	e soug	III		Office he	tiu	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 15/113 Rpt:	Friends of Brandon Creighton	00058241
4	Date	5 Payee name	·
	03/22/2024	Black Walnut Cafe	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,860.10	9000 New Trails Dr.	
		The Woodlands, TX 77381	
8	PURPOSE OF	,) Description
	EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Meeting to discuss officeholder/ campaign issues.
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	05/10/2024	Black Walnut Cafe	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$36.02	9000 New Trails Dr.	
		The Woodlands, TX 77381	
	PURPOSE OF	2 (Description
	EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Meeting to discuss officeholder/ campaign issues.
	Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
	Complete ONLY if direct expenditure to benefit C/O	3	t Office held
	expenditure to benefit C/Oł	Payee name	t Office held
	expenditure to benefit C/Oli Date 01/08/2024	Payee name Blakemore & Associates	
	Date 01/08/2024 Amount (\$)	Payee name Blakemore & Associates Payee address; City; State; Zip Code	
_	expenditure to benefit C/Oli Date 01/08/2024	Payee name Blakemore & Associates	
	Date 01/08/2024 Amount (\$)	Payee name Blakemore & Associates Payee address; City; State; Zip Code 1 Greenway Plaza	
	Date 01/08/2024 Amount (\$) \$2,500.00	Payee name Blakemore & Associates Payee address; City; State; Zip Code 1 Greenway Plaza Houston, TX 77007	
_	Date 01/08/2024 Amount (\$) \$2,500.00	Payee name Blakemore & Associates Payee address; City; State; Zip Code 1 Greenway Plaza Houston, TX 77007 (a) Category (See Categories listed at the top of this schedule)) Description
	Date 01/08/2024 Amount (\$) \$2,500.00	Payee name Blakemore & Associates Payee address; City; State; Zip Code 1 Greenway Plaza Houston, TX 77007	
	Date 01/08/2024 Amount (\$) \$2,500.00	Payee name Blakemore & Associates Payee address; City; State; Zip Code 1 Greenway Plaza Houston, TX 77007 (a) Category (See Categories listed at the top of this schedule)) Description ☐ Check if travel outside of Texas. Complete Schedule T.
	Date 01/08/2024 Amount (\$) \$2,500.00 PURPOSE OF EXPENDITURE	Payee name Blakemore & Associates Payee address; City; State; Zip Code 1 Greenway Plaza Houston, TX 77007 (a) Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political campaign service.
	Date 01/08/2024 Amount (\$) \$2,500.00	Payee name Blakemore & Associates Payee address; City; State; Zip Code 1 Greenway Plaza Houston, TX 77007 (a) Category (See Categories listed at the top of this schedule) Consulting Expense Candidate/Officeholder name Office sough	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political campaign service.
	Date 01/08/2024 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee name Blakemore & Associates Payee address; City; State; Zip Code 1 Greenway Plaza Houston, TX 77007 (a) Category (See Categories listed at the top of this schedule) Consulting Expense Candidate/Officeholder name Office sough	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political campaign service.
	Date 01/08/2024 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee name Blakemore & Associates Payee address; City; State; Zip Code 1 Greenway Plaza Houston, TX 77007 (a) Category (See Categories listed at the top of this schedule) Consulting Expense Candidate/Officeholder name Office sough	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political campaign service.

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	r a category not listed above)
1	Total pages Schedule F1:	1: 2 FILER NAME 3 Filer ID	(Ethics Commission Filers)
	Sch: 16/113 Rpt:	Friends of Brandon Creighton 00058242	1
4	Date	5 Payee name	
	01/31/2024	Blakemore & Associates	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,500.00	1 Greenway Plaza	
		Houston, TX 77007	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Co	·
		Political campaign service	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office	held
	expenditure to benefit C/O		
_	Date	Payee name	
	03/01/2024	Blakemore & Associates	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,500.00		
	42,000.00	1 0.00111114) 1 1424	
		Houston, TX 77007	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Co	·
		Political campaign service	
		1 ontioal campaign service	J.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office	held
	expenditure to benefit C/OI		
-	Date	Payee name	
	04/02/2024	Blakemore & Associates	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,500.00		
	Ψ2,500.00	1 Oreenway Flaza	
		Houston, TX 77007	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Co	
	EXPENDITORE	Check if Austin, TX, officeholder liv	
		Political campaign service	S.
	Operation ONLY if direct	Occalidate 10ff calculate a constant of the co	h-14
	Complete ONLY if direct expenditure to benefit C/O		neia

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		mmittee Lega	Awards/Memorials Ex al Services • Instruction Guid			ages	/Contract Labor		Travel Out of D OTHER (enter a	istrict a category not listed above)
1	Total pages Schodula F1:	2			-		_		12	Eilor ID	(Ethics Commission Filers)
	Total pages Schedule F1: Sch: 17/113 Rpt:		Friends of Brar	idon Creightor	1				3	Filer ID 00058241	(Eurics Commission Filers)
4	Date	5	Payee name								
•	02/02/2024	ľ	CHICK FIL A								
L	02/02/2024	oxdot	CHICK FIL A								
6	Amount (\$)	7	Payee address;	City;	State;	Zip Coo	de				
	\$108.30		503 WEST ML	K BLVD							
		1	AUSTIN, TX 78	R701							
Ļ	DUDD05-	_				ı	<i>a</i> :				
8	PURPOSE OF	(a)	Category (See Ca		top of this sched	dule)	(b)	Description			
	EXPENDITURE		Food/Beverage	Expense				=			mplete Schedule T.
								—		officeholder livin	
		1						Meeting to dis	SCU	iss uniceno	iuei 155ue5.
9	Complete ONLY if direct		Candidate/Officeh	older name	Of	fice soug	ght			Office h	neld
	expenditure to benefit C/O	Н									
	Date		Payee name								
	05/28/2024		CHICK FIL A								
H		\vdash		City:	Stato:	Zip Cod	de				
	Amount (\$)		Payee address;	City;	ડાલાંસ,	Zip C00	ue				
	\$599.16	1	503 WEST ML	∠ RTAD							
			AUSTIN, TX 78	3701							
	PURPOSE	(a)	Category (See Ca	tennries listed at the	ton of this school	fule)	(b)	Description			
	OF	l` <i>"</i>	Food/Beverage		tob or triis seried	iuic)	. ,		outsi	de of Texas. Cor	mplete Schedule T.
	EXPENDITURE		. Jour Develage	- Experise				—		officeholder livin	
		1						Meeting to dis	scu	iss officeho	lder/ campaign issues.
\vdash	Complete ONLY if direct		Candidate/Officeh	older name	Of	fice soug	aht			Office h	neld
	expenditure to benefit C/O				31		٠.٠٠			J00 11	
_		_									
	Date		Payee name								
L	06/07/2024		CHICK FIL A								
	Amount (\$)		Payee address;	City;	State;	Zip Cod	de				
	\$39.42		503 WEST ML	K BLVD							
			AUSTIN, TX 78	2701							
		_	AUSTIN, IA /) (OT							
	PURPOSE OF	(a)	Category (See Ca		top of this sched	dule)	(b)	Description			
	EXPENDITURE	1	Food/Beverage	Expense				ш			mplete Schedule T.
		1						ш		officeholder livin	
								weeting to als	SCU	iss uniceno	lder/ campaign issues.
	Complete ONLY if direct		Candidate/Officeh	older name	Of	fice soug	ght			Office h	neld
	expenditure to benefit C/O	п									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/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: 18/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	05/09/2024	CHICK FIL A
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.37	503 WEST MLK BLVD
		AUSTIN, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
		meeting to discuss officerioties, campaign issues.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/26/2024	Canales, Ivan
	Amount (\$)	Payee address; City; State; Zip Code
	\$428.00	300 Town Park Dr.
		Apt. #6307
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense Mileage reimbursement for 856 miles @ \$0.50 per
		mile not reimbursed by the state.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/26/2024	Canales, Ivan
	Amount (\$)	Payee address; City; State; Zip Code
	\$60.30	300 Town Park Dr.
		Apt. #6307
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Mileage reimbursement for 90 miles @ \$0.67 per mile not reimbursed by the state.
	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 Commit 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 names Schodule F1:		·s)
	Total pages Schedule F1: Sch: 19/113 Rpt:	Friends of Brandon Creighton 7 Filer ID (Editios Continuossion Filer 00058241)	<i>ا</i> ن
4	Date	5 Payee name	
	05/06/2024	Canales, Ivan	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$317.50	300 Town Park Dr.	
		Apt. #6307	
		Conroe, TX 77304	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.	
	LAFENDITORE	Check if Austin, TX, officeholder living expense	
		Mileage reimbursement for 474 miles @ \$.67 per mile not reimbursed at state expense.	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	05/29/2024	Canales, Ivan	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3,500.00	300 Town Park Dr.	
		Apt. #6307	
		Conroe, TX 77304	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor	
		Campaign contract wages.	
		Campaign commute mages.	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held Office held	
	Date	Payee name	
	05/30/2024	Canales, Ivan	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$482.40	300 Town Park Dr.	
		Apt. #6307	
		Conroe, TX 77304	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Mileage reimbursement for 720 miles @ \$.67 per	
		mile not reimbursed at state expense.	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comr 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		Gift/Awards/Memorials Legal Services The Instruction G			ages/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	2 FII FD	NAME				3	Filer ID	(Ethics Commission Filers)
_	Sch: 20/113 Rpt:		ds of Brandon Creight	ton			ľ	00058241	(Lanes commission riners)
4	Date	5 Payee	e name						
	02/02/2024	Canv	a						
6	Amount (\$)	7 Payee	address; City;	State; Zi	p Cod	le			
	\$116.64	3212	E Cesar Chavez St						
		Austii	n, TX 78702						
8	PURPOSE		Ory (See Categories listed at	the ten of this sehedule	, ((b) Description			
	OF		rtising Expense	trie top of triis scriedule	"		el outs	ide of Texas. Com	plete Schedule T.
	EXPENDITURE	, 10.70				Check if Aust	tin, TX	, officeholder living	g expense
						Campaign/	Offic	eholder adv	ertising services
9	Complete ONLY if direct	Candida	ate/Officeholder name	Office	e sougl	ht		Office he	eld
	expenditure to benefit C/OI								
	Date	Payee	name						
	06/13/2024	Chili's	5						
	Amount (\$)	Payee	address; City;	State; Zi	p Cod	le			
	\$42.02	4420	N Lamar Blvd						
		Austii	n , TX 78756						
	PURPOSE OF	(a) Categ	Ory (See Categories listed at	the top of this schedule	e) ((b) Description			
	EXPENDITURE	Food	/Beverage Expense			ш		ide of Texas. Com , officeholder living	
						ш			der/ campaign issues.
						wiccurig to t	11300	JJJ OIIICCTIOI	acii campaigii issacs.
	Complete ONLY if direct	Candida	ate/Officeholder name	Office	e sougl	ht		Office he	eld
	expenditure to benefit C/OI								
	Date	Payee	e name						
	01/08/2024	China							
	Amount (\$)	Payee	address; City;	State; Zi	p Cod	le			
	\$212.82	,	Bee Cave Rd #124	•					
	+ 0	-							
		Austii	n, TX 78746				_		
	PURPOSE	(a) Categ	Ory (See Categories listed at	the top of this schedule	(1)	(b) Description	_		
	OF EXPENDITURE	Food	/Beverage Expense					ide of Texas. Com	
								, officeholder living	•
						weeting to t	JISCL	uss onicenol	der/candidate issues.
_	Complete ONLY if direct	Candida	ate/Officeholder name	Office	e sougl	ht		Office he	eld
	expenditure to benefit C/OI	Carraidi	ato, Sinconordor name	Onio	o oougi			Jilioc III	···

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 Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 21/113 Rpt:	Friends of Brandon Creighton 00058241	
4	Date	5 Payee name	
	03/18/2024	Chinatown	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$142.63	2712 Bee Cave Rd #124	
		Austin, TX 78746	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/candidate issues.	
		Weeting to disouss officeriolativotal additional installed	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
_	Date	Payee name	=
	06/13/2024	Circle H Charters	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	715 N Holiday Dr	
	4000.00	TECHTIONAL ST	
		Galveston , TX 77550	
	PURPOSE		_
	OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Charter for campaign event.	
			_
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	<u>'</u>		
	Date	Payee name	
	04/22/2024	Clark's Seafood	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$452.78	1200 W 6th St.	
		Austin, TX 78703	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Meeting to discuss officeholder/ campaign issues.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	H	
_			_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
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	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: 22/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	06/03/2024	Clark's Seafood
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$124.58	1200 W 6th St.
		Austin, TX 78703
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
		Meeting to discuss officerioties, campaign issues.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/20/2024	Clark's Seafood
	Amount (\$)	Payee address; City; State; Zip Code
	\$243.51	1200 W 6th St.
		Austin, TX 78703
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
		Meeting to discuss officerioties, campaign issues.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	03/01/2024	Clements, Tara
	Amount (\$)	Payee address; City; State; Zip Code
	\$186.00	1811 Crown Dr
	Ψ100.00	1011 Grown Br
		Austin, TX 78745
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	ZA ZIIDII GRZ	Check if Austin, TX, officeholder living expense
		Mileage reimbursement for 372 miles @ \$0.50 per mile not reimbursed by the state.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe 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:	
ļ -	Sch: 23/113 Rpt:	Friends of Brandon Creighton 00058241
		Ÿ
4	Date	5 Payee name
	06/17/2024	Clements, Tara
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$293.46	1811 Crown Dr
		Austin, TX 78745
Ļ		1
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Mileage reimbursement for 438 miles @ \$.67 per
		mile not reimbursed at state expense.
_		· ·
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		·
	Date	Payee name
	06/20/2024	Comcast
	Amount (\$)	Payee address; City; State; Zip Code
	\$182.27	1701 John F Kennedy Blvd.
	\$102.21	Trop commit Rombay Birdi
		Philadelphia, PA 19103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Online campaign services.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitate to bettern over	'
	Date	Payee name
	05/20/2024	Comcast
	Amount (\$)	Payee address; City; State; Zip Code
	\$183.92	1701 John F Kennedy Blvd.
	\$100.0L	
		Dhiladalahia DA 10103
		Philadelphia, PA 19103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Online campaign services.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	CAPETIONALE TO DEHEIR C/OI	1

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		nmittee	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid			xpens Wages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers)
L	Sch: 24/113 Rpt:	L	Friends of E	Brandon Creighton	1					00058241	
4	Date	5	Payee name								
L	04/19/2024		Comcast								
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode				
	\$183.92		1701 John I	Kennedy Blvd.							
			Philadelphia	a, PA 19103							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the t	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Office Over	head/Rental Expe	nse			=		de of Texas. Comp	
								Online campa		officeholder living	expense
								Crimic Gampa	∡ເຜເ	. 501 11005.	
9	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name		Office sou	l Jaht			Office he	eld
Ĺ	expenditure to benefit C/OI			- Turno			-9·"				
	Date		Payee name								
	03/19/2024		Comcast								
	Amount (\$)	_	Payee addre		State;	Zip Co	ode				
	\$183.92		1701 John I	E Kennedy Blvd.							
			Philadelphia	a, PA 19103							
	PURPOSE	(a)	Category (Se	ee Categories listed at the t	top of this sch	edule)	(b)	Description			
	OF EXPENDITURE			head/Rental Expe				□		de of Texas. Comp	
								Online campa		officeholder living	expense
								Crimic Gampe	ເລເ	. 501 11005.	
\vdash	Complete ONLY if direct		Candidate/Offi	ceholder name	(Office sou	<u>l</u> ught			Office he	ıld
	expenditure to benefit C/OI						J				
H	Date		Payee name								
	02/20/2024		Comcast								
	Amount (\$)		Payee addre	ss; City;	State:	Zip Co	ode				
	\$174.85			= Kennedy Blvd.	Olato,	_,,	- 40				
	41. 1.30			in the second second							
			Philadelphia	a, PA 19103							
	PURPOSE OF	(a)		ee Categories listed at the t		edule)	(b)	Description	_		
	EXPENDITURE		Office Over	head/Rental Expe	nse			ш		de of Texas. Comp officeholder living	
								Online campa			опропос
									. ₉ ,		
	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ıght			Office he	eld
	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	
<u> </u>	T. 1 0 1 1 54	<u>_</u>
1	Total pages Schedule F1: Sch: 25/113 Rpt:	2 FILER NAME Friends of Brandon Creighton 3 Filer ID (Ethics Commission Filers) 00058241
4	Date	5 Payee name
	01/19/2024	Comcast
6	Amount (\$) \$185.49	7 Payee address; City; State; Zip Code 1701 John F Kennedy Blvd. Philadelphia, PA 19103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online campaign services.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/12/2024	Conroe's Incredible Pizza Company
	Amount (\$) \$8.00	Payee address; City; State; Zip Code 230 S Loop 336
	Φ0.00	250 3 Loop 550
		Conroe, TX 77304
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/23/2024	Cooper , Catie
	Amount (\$)	Payee address; City; State; Zip Code
	\$233.50	7806 Mullen Dr
		Austin , TX 78757
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Mileage reimbursement for 467 miles @ \$0.50 per
		mile not reimbursed by the state.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	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: 26/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	06/13/2024	Cooper , Catie
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$306.19	7806 Mullen Dr
		Austin , TX 78757
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Mileage reimbursement for 457 miles @ \$.67 per
		mile not reimbursed at state expense.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	1
	Date	Payee name
	01/12/2024	East Montgomery County Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.52	P.O. Box 292
		New Caney, TX 77357
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Continuation for organization event.
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
L	05/28/2024	Erben & Yarbrough
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,050.00	807 Brazos St.
		Austin , TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign/ officeholder legal services.
	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/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 27/113 Rpt:	Friends of Brandon Creighton	00058241
4	Date	5 Payee name	·
	06/03/2024	Facebook	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$135.40	1601 Willow Road	
		Menlo Park, CA 94025	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Online political advertising.
			, ,
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
F	Date	Payee name	
	01/29/2024	Facebook	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$900.00	1601 Willow Road	
		Menlo Park, CA 94025	
Г	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 Online political advertising.
			Offine political devertising.
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
F	Date	Payee name	
	04/24/2024	Facebook	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$250.00	1601 Willow Road	
		Menlo Park, CA 94025	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Online political advertising.
			Online political advertising.
-	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/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 28/113 Rpt:	Friends of Brandon Creighton	00058241
4	Date	5 Payee name	·
	04/08/2024	Facebook	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$569.99	1601 Willow Road	
		Menlo Park, CA 94025	
8	PURPOSE OF	· · · · · · · · · · · · · · · · · · ·	Description
	EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Online political advertising.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
Г	Date	Payee name	
	03/01/2024	Facebook	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$631.05	1601 Willow Road	
		Menlo Park, CA 94025	
Г	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
			Online political advertising.
			, ,
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
Г	Date	Payee name	
	02/01/2024	Facebook	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$227.48	1601 Willow Road	
		Menlo Park, CA 94025	
	PURPOSE OF	,	Description
	EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Online political advertising.
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 29/113 Rpt:	2 FILER NAME Striends of Brandon Creighton 3 Filer ID (Ethics Commission Filers) 00058241
4	Date 01/02/2024	5 Payee name Facebook
6	Amount (\$) \$725.67	7 Payee address; City; State; Zip Code 1601 Willow Road
8	PURPOSE	Menlo Park, CA 94025
0	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online political advertising.
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 05/01/2024	Payee name Facebook
	Amount (\$) \$200.00	Payee address; City; State; Zip Code 1601 Willow Road
		Menlo Park, CA 94025
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online political advertising.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 04/26/2024	Payee name Facebook
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 1601 Willow Road
		Menlo Park, CA 94025
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online political advertising.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Food/Beverage Expen Gift/Awards/Memorials Legal Services The Instruction G	Expense		xpens Wages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)	
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers)	
L	Sch: 30/113 Rpt:	L	Friends of E	Brandon Creight	on					00058241		
4	Date	5	Payee name									
	01/08/2024		Google									
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode					
	\$10.65		1600 Amph	itheatre Parkwa	ıy Mountain							
			View, CA 94	1043								
8	PURPOSE	(a)	Category (Se	ee Categories listed at t	the top of this sche	edule)	(b)	Description				_
	OF EXPENDITURE		Advertising		are top or this some	cudicy		Check if travel		de of Texas. Comp		
	EXPENDITORE							_		officeholder living	expense	
								Online politica	al a	idvertising.		
Ļ	0 1, 5, 5, 5, 5		. p=				<u> </u>					_
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	C	Office sou	ught			Office he	eld	
	Date		Payee name					-				
	02/06/2024		Google									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode					_
	\$10.65		1600 Amph	itheatre Parkwa	y Mountain							
			View, CA 94	1043								
Г	PURPOSE	(a)	Category (Se	ee Categories listed at t	the top of this sche	edule)	(b)	Description				_
	OF EXPENDITURE		Advertising					□		de of Texas. Comp		
								ш		officeholder living	expense	
								Online politica	ui d	wverusing.		
\vdash	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name		Office sou	laht Taht			Office he	eld	_
	expenditure to benefit C/O					55 500				Ooo 110	.	
-	Date		Dayoo nama									_
	03/06/2024		Payee name Google									
				C:t-::	Ctata	7in O	nd c					_
	Amount (\$)		Payee addres			Zip Co	oae					
	\$10.65		TOOO AIIIbu	itheatre Parkwa	iy iviouritain							
			View, CA 94	1043								
	PURPOSE	(a)	Category (Se	ee Categories listed at t	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Advertising							de of Texas. Comp		
								Online politica		officeholder living	expense	
								Orinine politica	aı d	wverusiriy.		
_	Complete ONLY if direct	<u> </u>	`andidate/Offi	ceholder name		Office sou	lapt			Office he	ald	_
	expenditure to benefit C/O		andate/OIII	conduct name	C	71110E 3UU	agrit			Onice He	AU.	
												_

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/Political Committee Credit Card Payment	Legal Services	Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed about the Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1: 2 FILER	NAME		3 Filer ID (Ethics Commission Filers)		
Sch: 31/113 Rpt: Friend	ds of Brandon Creighton		00058241		
4 Date 5 Payee	name				
04/08/2024 Goog	le				
6 Amount (\$) 7 Payee	address; City; State;	Zip Code			
\$10.65 1600	Amphitheatre Parkway Mountain				
	CA 94043				
	Ory (See Categories listed at the top of this sche				
EXPENDITURE Adver	rtising Expense	_	outside of Texas. Complete Schedule T. n, TX, officeholder living expense		
		, <u>–</u>	cal advertising.		
			act de vortionig.		
9 Complete ONLY if direct Candida	ate/Officeholder name Of	fice sought	Office held		
expenditure to benefit C/OH					
Date Payee	name				
05/06/2024 Goog	le				
Amount (\$) Payee	address; City; State;	Zip Code			
\$10.65 1600	Amphitheatre Parkway Mountain				
View,	CA 94043				
	Ory (See Categories listed at the top of this sche				
EXPENDITURE Adver	rtising Expense		outside of Texas. Complete Schedule T. n, TX, officeholder living expense		
		 	cal advertising.		
		Orimio pondo	at davortionig.		
Complete ONLY if direct Candida	ate/Officeholder name Of	fice sought	Office held		
expenditure to benefit C/OH		J			
Date Payee	name				
06/06/2024 Goog	le				
Amount (\$) Payee	address; City; State;	Zip Code			
\$10.65 1600	Amphitheatre Parkway Mountain				
View,	CA 94043				
PURPOSE (a) Category	Ory (See Categories listed at the top of this sche	·			
OF Adver	rtising Expense		outside of Texas. Complete Schedule T.		
			n, TX, officeholder living expense		
		Offilitie politic	al advertising.		
Complete ONLY if direct Candida	ate/Officeholder name Of	fice sought	Office held		
expenditure to benefit C/OH	ate/Onlectionate Indine	noc sought	Office field		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total names Schodulo F1:	
	Total pages Schedule F1: Sch: 32/113 Rpt:	Friends of Brandon Creighton 7 Filer ID (Ethics Commission Filers) 00058241
4	Date	5 Payee name
	01/02/2024	Google
6	Amount (\$) \$153.50	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online political advertising.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/02/2024	Google
	Amount (\$)	Payee address; City; State; Zip Code
	\$153.50	1600 Amphitheatre Parkway Mountain
		View, CA 94043
	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
		Online political advertising.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/03/2024	Google
	Amount (\$)	Payee address; City; State; Zip Code
	\$184.20	1600 Amphitheatre Parkway Mountain
		View, CA 94043
	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
		Online political advertising.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

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		nmittee	Food/Beverage Expen Gift/Awards/Memorials Legal Services The Instruction G	Expense		xpens Wages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers)
L	Sch: 33/113 Rpt:		Friends of E	Brandon Creight	on					00058241	
4	Date	5	Payee name								
L	03/04/2024		Google								
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode				
	\$153.50		1600 Amph	itheatre Parkwa	y Mountain						
			View, CA 94	1043							
8	PURPOSE	(a)	Category (Se	ee Categories listed at t	he top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Advertising	Expense						de of Texas. Comp	
								Online politica		officeholder living	expense
								Ormite ponde	ai u	avertionig.	
9	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name		Office sou	l Jaht			Office he	eld
Ĺ	expenditure to benefit C/OI						,g				
	Date		Payee name								
L	04/02/2024	L	Google								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode				
	\$166.37		1600 Amph	itheatre Parkwa	y Mountain						
			View, CA 94	1043							
	PURPOSE OF	(a)	Category (Se	ee Categories listed at t	he top of this sch	edule)	(b)	Description			
	EXPENDITURE		Advertising	Expense				□		de of Texas. Comp officeholder living	
								Online politica			схрепас
								•		3	
Н	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ıght			Office he	eld
	expenditure to benefit C/O	Н									
F	Date		Payee name								
	05/02/2024		Google								
	Amount (\$)	T	Payee addre	ss; City;	State;	Zip Co	ode				
	\$184.20			itheatre Parkwa		-					
			View, CA 94	1043							
	PURPOSE OF	(a)		ee Categories listed at t	the top of this scho	edule)	(b)	Description			
	EXPENDITURE		Advertising	Expense						de of Texas. Comp officeholder living	
								Online politica			composition .
								,		3	
	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ıght			Office he	eld
	expenditure to benefit C/O	Н					-				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 34/113 Rpt:	Friends of Brandon Creighton 00058241
4 Date	5 Payee name
05/29/2024	Grand Hyatt San Antonio
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$31.39	600 E Market St
	San Antonio, TX 78205
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Parking for 2024 GOP convention
	Faiking for 2024 GOF convention
O Commission Chill M If all	Condidate/Office helder no rec
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/07/2024	HEB
Amount (\$)	Payee address; City; State; Zip Code
\$131.12	1000 E. 41st St.
	Austin, TX 78751
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Supplies for Austin office.
	Supplies for Austri office.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	
Date	Payee name
02/07/2024	HEB
Amount (\$)	Payee address; City; State; Zip Code
\$189.80	1000 E. 41st St.
	Austin, TX 78751
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
_/	Check if Austin, TX, officeholder living expense
	Supplies for Austin office.
Complete ONLY Station	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/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: 35/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	03/20/2024	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$99.47	1000 E. 41st St.
		Austin, TX 78751
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
		Cappines in Additioning.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	04/19/2024	HEB
H	Amount (\$)	Payee address; City; State; Zip Code
	\$64.11	1000 E. 41st St.
	Ψ01121	1000 2. 1100 00.
		Austin, TX 78751
┝	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
L	2	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
┕		
	Date	Payee name
	04/19/2024	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.89	1000 E. 41st St.
L		Austin, TX 78751
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
ı		

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				ages/Contract Labor		Travel Out of Distri OTHER (enter a ca	ct ategory not listed above)
1	Total pages Cabadula F1:	12	<u> </u>		-	2	Filer ID	(Ethics Commission Filore)
	Total pages Schedule F1: Sch: 36/113 Rpt:		Friends of Brandon Creighton			3	00058241	(Ethics Commission Filers)
4	<u> </u>	E						
4	Date	5	Payee name					
L	05/14/2024	L	HEB					
6	Amount (\$)	7	Payee address; City; State; Zi	ip Coc	de			
	\$83.09		1000 E. 41st St.					
			Austin, TX 78751					
Ļ								
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	9)	(b) Description			
	EXPENDITURE		Office Overhead/Rental Expense				de of Texas. Comple	
					—		officeholder living e	xpense
					Supplies for A	∖uS	ouri office.	
9	Complete ONLY if direct		Candidate/Officeholder name Office	e soug	jht		Office held	t
	expenditure to benefit C/OI	Н						
	Date		Payee name					
	06/05/2024		HEB					
<u> </u>	Amount (\$)	\vdash	Payee address; City; State; Zi	in Coo	10			
	` '			ір Сос	i c			
	\$154.32		1000 E. 41st St.					
			Austin, TX 78751					
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	2)	(b) Description			
	OF	۱` '	Office Overhead/Rental Expense	′ [outsi	de of Texas. Comple	ete Schedule T.
	EXPENDITURE		C 5 5 Tollioda/Normal Expense		ш		officeholder living e	
					Supplies for A	۱us	stin office.	
\vdash	Complete ONLY if direct		Candidate/Officeholder name Office	e soug	ıht		Office held	d
	expenditure to benefit C/OI			9	•			
H	Date	_						
	Date		Payee name					
L	05/15/2024		HEB					
	Amount (\$)		Payee address; City; State; Zi	ip Coc	de			
	\$19.96		1000 E. 41st St.					
			Austin, TX 78751					
	DUDDOCE	(-)		1.	(h) p			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	e) ((b) Description	J. 14~:	de of Texas. Comple	oto Schodulo T
	EXPENDITURE		Office Overhead/Rental Expense		ш		officeholder living e	
					Supplies for A			лропас
					Supplies for A	เนอ	an onice.	
	Operation Children	L	2		.l. a		6‴ 1 :	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name Office	e soug	jnt		Office held	ַ
	Superiord to belieff 0/01	•						

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 37/113 Rpt:	2 FILER NAME Friends of Brandon Creighton 3 Filer ID (Ethics Con 00058241	nmission Filers)
4	Date 01/31/2024	5 Payee name HEB	
6	Amount (\$) \$201.31	7 Payee address; City; State; Zip Code 1000 E. 41st St. Austin, TX 78751	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Supplies for Austin office.	т.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
	Date 02/28/2024	Payee name HEB	
	Amount (\$) \$112.20	Payee address; City; State; Zip Code 1000 E. 41st St. Austin, TX 78751	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Supplies for Austin office.	т.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
	Date 03/20/2024	Payee name HEB	
	Amount (\$) \$161.26	Payee address; City; State; Zip Code 1000 E. 41st St.	
		Austin, TX 78751	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Supplies for Austin office.	т.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

se Event Expense Loan Repayment/Reimbu

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

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: 38/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	04/26/2024	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$227.76	1000 E. 41st St.
		Austin, TX 78751
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
		Supplies for Austri office.
	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	05/15/2024	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$168.62	1000 E. 41st St.
		Austin, TX 78751
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
		Сарриос или и насын синсси
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	
	Date	Payee name
	05/31/2024	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$186.42	1000 E. 41st St.
		Austin, TX 78751
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
	0 1 0 0 0 0 0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
		•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment		The Instruction Guide explains how to	comp	lete this form.		
1	Total pages Schedule F1:	2	FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 39/113 Rpt:		Friends of Brandon Creighton			00058241	
4	Date	5	Payee name		•		
	04/20/2024		Harris County Republican Party				
6	Amount (\$)	7	Payee address; City; State; Zip (Code			
	\$20,000.00		7232 Wynnwood Ln				
			Houston, TX 77008				
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)) Description		
	OF EXPENDITURE		Event Expense		ш		mplete Schedule T.
					Check if Austin, T Lincoln Reaga		
					Lincoln Reagai	ir diriirici 202	
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office so	ought	t .	Office I	neld
	expenditure to benefit C/OI		55 S	o a g		000	
_	Date	Т	Payee name				
	05/15/2024		Harris County Republican Party				
	Amount (\$)	╁	Payee address; City; State; Zip (Code			
	\$20,000.00		7232 Wynnwood Ln				
	7-2,000						
			Houston, TX 77008				
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)) Description		
	OF	(",	Event Expense	(*)		tside of Texas. Co	mplete Schedule T.
	EXPENDITURE		Zveric Expense		Check if Austin, T		
					Lincoln Reaga	n dinner 202	24
				1			
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office so	ought	t	Office I	neld
		_					
	Date		Payee name				
	05/26/2024	L	Harris County Republican Party				
	Amount (\$)		Payee address; City; State; Zip (Code			
	\$20,000.00		7232 Wynnwood Ln				
		L	Houston, TX 77008				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)) Description		
	EXPENDITURE		Event Expense		Check if travel out		mplete Schedule T.
					Lincoln Reaga		
					· ·		
	Complete ONLY if direct		Candidate/Officeholder name Office s	u ought	t	Office I	neld
	expenditure to benefit C/O	Н		-			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/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: 40/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	03/12/2024	Hearsay Woodlands
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.11	20 Waterway Ave
		The Woodlands, TX 77380
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
		mooung to discuss officially campaign located.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Payeo namo
	05/06/2024	Payee name Heights Beir Garten
	Amount (\$)	Payee address; City; State; Zip Code
	\$47.67	1433 N Shepherd Dr
		Houston, TX 77008
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
	Operation ONLY if allowed	On didn't Office helds
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
L	01/03/2024	Hill Country Springs
	Amount (\$)	Payee address; City; State; Zip Code
	\$41.47	10019 IH35 South
		Austin, TX 78747
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Water for Austin office.
	Operation Of the Control of the Cont	Open Highest (Office health an arms)
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	

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 Schodule F1:	1				
1 Total pages Schedule F1: Sch: 41/113 Rpt:	Friends of Brandon Creighton 3 Filer ID (Ethics Commission Filers) 00058241				
4 Date	5 Payee name				
02/02/2024	Hill Country Springs				
6 Amount (\$) \$25.96	7 Payee address; City; State; Zip Code 10019 IH35 South Austin, TX 78747				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Water for Austin office.				
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
03/04/2024	Hill Country Springs				
Amount (\$)	Payee address; City; State; Zip Code				
\$49.97	10019 IH35 South				
	Austin, TX 78747				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Check if Austin, TX, officeholder living expense Water for Austin office.				
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
04/02/2024	Hill Country Springs				
Amount (\$)	Payee address; City; State; Zip Code				
\$102.19	10019 IH35 South				
	Austin, TX 78747				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	Water for Austin office.				
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				

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	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 42/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	05/02/2024	Hill Country Springs
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$55.71	10019 IH35 South
		Austin, TX 78747
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Water for Austin office.
		Water for Audum Gilled.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	06/04/2024	Hill Country Springs
H	Amount (\$)	Payee address; City; State; Zip Code
	\$101.32	10019 IH35 South
		Austin, TX 78747
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Water for Austin office.
		Water for Alacam emice.
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	05/14/2024	Hilton Americas
H	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	1600 Lamar St.
		Houston, TX 77010
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LXI ENDITORE	Check if Austin, TX, officeholder living expense
		Parking for officeholder meeting
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

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/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: 43/113 Rpt:	Friends of Brandon Creighton 00058241		
4	Date	5 Payee name		
	05/30/2024	Homewood Suites		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$46.80	78 East Ave		
		Austin, TX 78701		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Hotel for staff during officeholder Austin meeting.		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O	H		
	Date	Payee name		
	02/23/2024	Houston Livestock Show & Rodeo		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$550.00	P.O. Box 20070		
		Houston, TX 77225-0070		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Contribution for organization annual fundraiser.		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	H		
	Date	Payee name		
	05/28/2024	Hyatt Regency San Antonio		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$367.70	123 Losoya St		
		San Antonio , TX 78205		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense Hotel expense for campaign meeting.		
		Tiotel expense for eampaign meeting.		
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OH			

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
_	Tatal as a second of Education Education				
1	Total pages Schedule F1: Sch: 44/113 Rpt:	2 FILER NAME Friends of Brandon Creighton 3 Filer ID (Ethics Commission Filers) 00058241			
4	Data	5 David annu			
4	Date	5 Payee name			
	05/28/2024	Hyatt Regency San Antonio			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$862.36	123 Losoya St			
		San Antonio , TX 78205			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
		Hotel expense for campaign meeting.			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI				
L					
	Date	Payee name			
	05/28/2024	Hyatt Regency San Antonio			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,149.35	123 Losoya St			
	• •				
		0 - A - A TV 70005			
		San Antonio , TX 78205			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.			
	LXI LINDITORL	Check if Austin, TX, officeholder living expense			
		Hotel expense for campaign meeting.			
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	1			
H	Date	Davido namo			
		Payee name			
	02/12/2024	Ida Claire			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$45.86	5001 Beltline Rd			
		Addison, TX 75254			
		_			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense			
		Meeting to discuss officeholder/ campaign issues.			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	1			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILED NAME	3 Filer ID (Ethics Commission Filers)
_	Sch: 45/113 Rpt:	Friends of Brandon Creighton	00058241
4	Date	5 Payee name	
	05/28/2024	Iles, Karissa	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,000.00	11133 Interstate 45 S	
		Suite 110	
		Conroe, TX 77302	
8	PURPOSE		
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel of	outside of Texas. Complete Schedule T.
	EXPENDITURE	Galaries/ Wages/ Contract Eabor	TX, officeholder living expense
		Campaign co	ntract wages.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/08/2024	Istorage Self Storage	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$204.00	1777 N Loop 336 W	
	Ψ204.00	1777 W 200P 000 W	
		Conroe, TX 77304	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	onice overnead/Nerital Expense	outside of Texas. Complete Schedule T.
		Campaign sto	TX, officeholder living expense
		Campaign sid	nage.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
	Date	Payee name	
	01/29/2024	Istorage Self Storage	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$312.00	1777 N Loop 336 W	
		·	
		Conroe, TX 77304	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overficad/Northal Expense	outside of Texas. Complete Schedule T.
		Campaign sto	TX, officeholder living expense
		Campaign sit	riago.
_	Complete Chilly 'C. "	Condidate/Officeholder news	Office held
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	The straight of the straight of the	··	

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	Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Cor	Travel in District Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment	The Instruction Guide explains how to complete t	this form.
1	Total pages Schedule F1:	P. FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 46/113 Rpt:	Friends of Brandon Creighton	00058241
4	Date	Payee name	•
	02/08/2024	Istorage Self Storage	
6	Amount (\$)	' Payee address; City; State; Zip Code	
-	\$204.00	1777 N Loop 336 W	
	42000		
		Conroe, TX 77304	
_	5115565		
8	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	escription
	EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Că	ampaign storage.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
_	expenditure to benefit C/OI	- Carladato Cincorolato Flamo	
	Date	Payee name	
	02/27/2024	Istorage Self Storage	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$312.00	1777 N Loop 336 W	
		·	
		Conroe, TX 77304	
	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) De	escription
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense
		Ca	ampaign storage.
	0 1: 0 1: 0		05.
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	03/08/2024	Istorage Self Storage	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$204.00	1777 N Loop 336 W	
		Conroe, TX 77304	
	PURPOSE		escription
	OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		Ca	ampaign storage.
	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	
1 Total pages Cabadula F1:	,
1 Total pages Schedule F1: Sch: 47/113 Rpt:	2 FILER NAME3 Filer ID(Ethics Commission Filers)Friends of Brandon Creighton00058241
-	
	5 Payee name
03/27/2024	Istorage Self Storage
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$312.00	1777 N Loop 336 W
	Conroe, TX 77304
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
-	Compaign storage
	Campaign storage.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
04/08/2024	Istorage Self Storage
Amount (\$)	Payee address; City; State; Zip Code
` '	
\$204.00	1777 N Loop 336 W
	Conroe, TX 77304
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Campaign storage.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payeo namo
04/29/2024	Payee name
	Istorage Self Storage
Amount (\$)	Payee address; City; State; Zip Code
\$312.00	1777 N Loop 336 W
	Conroe, TX 77304
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Campaign storage.
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 Committ 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: 48/113 Rpt:	2 FILER NAME Striends of Brandon Creighton 3 Filer ID (Ethics Commission Filers) 00058241			
4	Date	5 Payee name			
	05/09/2024	Istorage Self Storage			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$204.00	1777 N Loop 336 W			
		Conroe, TX 77304			
		Conide, 1X 77304			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Office Overhead/Rental Expense			
		Check if Austin, TX, officeholder living expense			
		Campaign storage.			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	1			
	Date	Payee name			
	05/28/2024	Istorage Self Storage			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$312.00				
	Φ312.00	1777 N Loop 336 W			
		Conroe, TX 77304			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense			
	EXPENDITORE	Check if Austin, TX, officeholder living expense			
		Campaign storage.			
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	1			
	Date	Payee name			
	06/10/2024	Istorage Self Storage			
_	Amount (\$)	Payee address; City; State; Zip Code			
	` '				
	\$204.00	1777 N Loop 336 W			
		Conroe, TX 77304			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense			
	EXPENDITORE	Check if Austin, TX, officeholder living expense			
		Campaign storage.			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	1			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Political Committee Credit Card Payment Candidate/Officeholder/Political Committee Credit Card Payment The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F1:	P FILER NAME				3	Filer ID	(Ethics Commission Filers	5)
	Sch: 49/113 Rpt:	Friends of Brandon Creighton				00058241			
4	Date	Payee name							
	06/28/2024	Istorage Self Storage							
6	Amount (\$)	Payee address; City;	State; Zip Co	ode					
	\$312.00	1777 N Loop 336 W							
		Conroe, TX 77304							
8	PURPOSE	a) Category (See Categories listed	at the top of this schedule)	(b)	Description				
	OF EXPENDITURE	Office Overhead/Rental	Expense		므		de of Texas. Com		
					Campaign sto		officeholder living	expense	
					Campaign sic	лa	ge.		
9	Complete ONLY if direct	Candidate/Officeholder name	e Office sou	l ught			Office he	eld	
	expenditure to benefit C/OI								
	Date	Payee name							
	02/26/2024	J Alexanders							
	Amount (\$)	Payee address; City;	State; Zip Co	ode					
	\$60.41	1180 Uptown Park Blvd.							
		Houston, TX 77056							
	PURPOSE OF	a) Category (See Categories listed	at the top of this schedule)	(b)	Description				
	EXPENDITURE	Food/Beverage Expense			=		de of Texas. Comp		
							officeholder living	der/ campaign issues	
					wiccing to all	300	33 Officerion	acii campaigii issacs	•
	Complete ONLY if direct	Candidate/Officeholder name	e Office sou	<u>l</u> ıght			Office he	eld	
	expenditure to benefit C/OI								
	Date	Payee name							
	03/22/2024	Jefferson County Repub	lican Party						
	Amount (\$)	Payee address; City;	State; Zip Co	ode					
	\$500.00	3635 Calder Ave							
		Beaumont, TX 77006							
	PURPOSE	a) Category (See Categories listed	at the top of this schedule)	(b)	Description				
	OF EXPENDITURE	Contributions/Donations					de of Texas. Com		
		Candidate/Officeholder/F	Political Committee		Contribution f		officeholder living		
					Continuution	UI	amual CUIIV	GHuUH.	
_	Complete ONLY if direct	Candidate/Officeholder name	e Office sou	laht			Office he	ald	
	expenditure to benefit C/O	Canadato/Oniconoluci name	, Office Suc	-911L			Onice ne	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1	Total pages Schodula F1:				
_	Total pages Schedule F1: Sch: 50/113 Rpt:	Friends of Brandon Creighton 3 Filer ID (Eurics Commission Filers) 00058241			
4	Date	5 Payee name			
	03/22/2024	Jimmy Johns			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$1,548.63	601 W Martin Luther King Jr Blvd			
		Austin , TX 78701			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense			
		Food for Montgomery County Percinct Convention lunch.			
Ļ					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	experiantare to benefit ere				
	Date	Payee name			
	01/29/2024	Kingwood Area Republican Women			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$3,000.00	P.O. Box 431158			
		Houston, TX 77243			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Candidate/Officeholder/Political Committee Contribution for organization event.			
		Continuation for organization events			
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O	v			
	Date	Payee name			
	03/22/2024	Kingwood Taco Shop			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,223.59	2510 Mills Branch Dr.			
		Suite 120			
		Kingwood, TX 77345			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
		Tacos provided for District convention days.			
L					
	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 -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 Salarice Magnet/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: 51/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	04/19/2024	Kingwood Tea Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,000.00	P.O. Box 5478
		Kingwood, TX 77325
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Contribution for organizational event.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/O	
L		
	Date	Payee name
	04/01/2024	Kirbys Steakhouse
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.68	123 N Loop 1604 E
		San Antonio , TX 78232
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
		Meeting to discuss officeriolide, earlipaign issues.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	04/18/2024	Kirbys Steakhouse
	Amount (\$)	Payee address; City; State; Zip Code
	\$173.98	123 N Loop 1604 E
L		San Antonio , TX 78232
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
		ivideting to discuss officendiden campaign issues.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Cor	nmittee	Legal Serv		·		/ages	e /Contract Labor ete this form.			avel Out of E HER (enter		ct tegory not listed above)	
1	Total pages Schedule F1:	2	FII FR NAME							3	Fil	er ID	(Ethics Commission Filers)	
	Sch: 52/113 Rpt:	Ĺ	Friends of E		Creighto	n						058241	`		
4	Date	5	Payee name												
L	03/28/2024		Kiser , Bran	don											
6	Amount (\$)	7	Payee addres	ss; C	City;	State	e; Zip Co	de							
	\$2,500.00		17142 Cove	entry Pa	ırk Dr										
			Houston, TX	× 77084	ļ 										
8	PURPOSE	(a)	Category (Se	e Categori	es listed at the	e top of this sch	hedule)	(b)	Description						
	OF EXPENDITURE		Salaries/Wa	ages/Co	ntract La	bor		l	Check if travel of						
	-							l	Campaign co					kpense	
								I	Campaign co	n ILF	aci	wayes.			
Ļ	Ormalia Striction	<u></u>	S P. 1				01"						L .		
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offi	ceholder	name	(Office sou	ght				Office I	neld	I	
L		_													
	Date		Payee name												1
	04/08/2024		La Grigila												
	Amount (\$)	Г	Payee addres	ss; C	City;	State	e; Zip Co	de							
	\$197.53		2817 W Dal												
		١	Houston , T												
	PURPOSE OF	(a)	Category (Se			e top of this sch	hedule)	(b)	Description						
	EXPENDITURE		Food/Bever	age Ex	oense			l	Check if travel of						
									Check if Austin					er/ campaign issues.	
								l	wiceting to un	300	JJJ	JIIICEIIC	Jiuc	ar campaign issues.	
	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholdor	. name		Office sou	nht				Office I	held	<u> </u>	4
	expenditure to benefit C/O		oanalalato/UIII	SSTIDIUEI	HAIHE	'	JANUE SUU	Aill				Jilice I	. iciU		
	Date	Τ	Payee name												7
	01/29/2024		Lanier Park	ing Aus	tin										
		\vdash	Payee addres			Ctoto	e; Zip Co	de							_
	Amount (\$)		•	•	City;	Siale	∠, ∠ıµ C0	ue							
	\$48.00		201 Lavaca	ાં ગ											
			Austin , TX	78701				_		_					
	PURPOSE	(a)	Category (Se	e Categori	es listed at the	e top of this sch	hedule)	(b)	Description						
	OF EXPENDITURE		Travel Out					ı	Check if travel of				•		
	LA LADITORE								Check if Austin						
								l	Parking for of	ιTIC	enc	olaer me	etir	ıy.	
															_
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offi	ceholder	name	(Office sou	ght				Office I	held	I	
	experiorare to betterit C/OI	_													
													-		1
_	· · · · · · · - · -								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

	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: 53/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
ľ	02/01/2024	Lanier Parking Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$48.00	201 Lavaca St
		Austin , TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ľ	OF	Travel Out of District Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Parking for officeholder meeting.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
١	expenditure to benefit C/OI	
⊨	Data	Davies same
	Date	Payee name
	03/22/2024	Lanier Parking Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$18.00	201 Lavaca St
		Austin , TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Parking for officeholder meeting.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
L	03/25/2024	Lanier Parking Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.00	201 Lavaca St
		Austin , TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	ZA LIDITORE	Check if Austin, TX, officeholder living expense
		Parking for officeholder meeting.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experiulture to beliefit C/OI	1

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	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: 54/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
7		
	05/17/2024	Lanier Parking Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$96.00	201 Lavaca St
		Austin , TX 78701
L		1
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Parking for officeholder meeting.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/23/2024	Lanier Parking Austin
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.00	201 Lavaca St
		Austin , TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Parking for officeholder meeting.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	• · · · · · · · · · · · · · · · · · · ·
H	Data	
	Date	Payee name
L	06/17/2024	Lanier Parking Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.00	201 Lavaca St
		Austin , TX 78701
	DUDDOCE	I
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxos Complete Schedule T
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Parking for officeholder meeting.
		Faiking for officeriolider friedding.
_	0 1. 5	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Superiorder to beliefft 6/01	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		l above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Comm	ission Filers)
	Sch: 55/113 Rpt:	Friends of Brandon Creighton 00058241	,
4	Date	5 Payee name	
	01/29/2024	Liberty Bells Republican Women	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$600.00	29815 S. Legends Chase Circle	
		Spring, TX 77386	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
	2/11/2/10/12	Candidate/Officeholder/Political Committee	
		Contribution for organization event.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
_	Date	Payee name	
	05/14/2024	Liberty Bells Republican Women	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$20.00		
	\$20.00	29815 S. Legends Chase Circle	
		Spring, TX 77386	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
		Candidate/Officeholder/Political Committee	
		Contribution for organization event.	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	01/29/2024	LifeFirst	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	P.O. Box 115	
		Magnolia, TX 77353	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
	EXPENDITURE	Candidate/Officeholder/Political Committee	
		Contribution for organization event.	
L			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
			l l

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
TTHER (output a colorograph and listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:		ilers)
	Sch: 56/113 Rpt:	Friends of Brandon Creighton 00058241	
4	Date	5 Payee name	
	01/08/2024	Lilly & Company	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$5,212.94	1005 Congress Ave.	
		Ste 400	
		Austin , TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consulting Expense	
		Check if Austin, TX, officeholder living expense Political campaign services.	
		Totalda dampaign services.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	Date	Payee name	
	02/02/2024	Lilly & Company	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5,282.35	1005 Congress Ave.	
		Ste 400	
		Austin , TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Political campaign services.	
		To most out in pargin solvings.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	п	
	Date	Payee name	
	03/11/2024	Lilly & Company	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5,135.93	1005 Congress Ave.	
		Ste 400	
		Austin , TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Political campaign services.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	Н	

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:		_
	Sch: 57/113 Rpt:	Friends of Brandon Creighton 7 Filer ID (Ethics Commission Filers) 00058241	
4	Date	5 Payee name	
	04/02/2024	Lilly & Company	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$5,102.37	1005 Congress Ave.	
		Ste 400	
		Austin , TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consulting Expense	
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense	
		Political campaign services.	
<u>_</u>	Occupation Children	Constitute (Office helder name	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	=
	05/03/2024	Lilly & Company	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$6,898.59	1005 Congress Ave.	
		Ste 400	
		Austin , TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Political campaign services	
		Tomos campagn comos	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	_
	06/26/2024	Linda Lee	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$500.00	3243 Discovery Lane	ĺ
		Conroe, TX 77301	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	ſ
		Art purchased for gift at district auction.	ĺ
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	\dashv
	expenditure to benefit C/O		ĺ
			_

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 Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 58/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	05/06/2024	Los Cucos
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$63.02	3730 Highway 59 North
		Kingwood , TX 77339
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	LXI LIIDITORE	Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
		ividenting to discuss officeriolider/ campaign issues.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Davisa nama
	05/14/2024	Payee name Los Cucos
	Amount (\$)	Payee address; City; State; Zip Code
	\$23.72	3730 Highway 59 North
		With the Late of TV 77000
		Kingwood , TX 77339
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	i de la companya de
	Date	Payee name
	02/02/2024	Lou's
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.25	1608 Barton Springs Rd
		Austin , TX 78704
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct 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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	-		/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
1	Total pages Cabadula F1:				2 Filer ID (Ethics Commission Filers)
	Total pages Schedule F1: Sch: 59/113 Rpt:	Friends of Brandon Crei	ghton		3 Filer ID (Ethics Commission Filers) 00058241
4	Date	Payee name			•
	01/01/2024	Magnolia Republican Cl			
6	Amount (\$) \$500.00	Payee address; City; 18640 FM 1488, Suite A Magnolia , TX 77354	State; Zip Ci 3294	code	
8	PURPOSE	a) Category (See Categories liste	d at the top of this schedule)	(b) Description	
	OF EXPENDITURE	Contributions/Donations	Made By		I outside of Texas. Complete Schedule T.
	LALENDITORE	Candidate/Officeholder/	Political Committee	_	n, TX, officeholder living expense for organization event.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder nam	e Office sou	ught	Office held
	Date	Payee name			
	06/20/2024	Mailchimp			
	Amount (\$)	Payee address; City;	State; Zip Co	ode	
	\$671.58	675 Ponce De Leon Ave	e		
		Atlanta, GA 30308			
	PURPOSE OF	a) Category (See Categories liste	d at the top of this schedule)	(b) Description	
	EXPENDITURE	Advertising Expense		1 <u></u>	l outside of Texas. Complete Schedule T.
				, <u> </u>	n, TX, officeholder living expense igital newsletter platform.
				Campaign u	igital newsicitor platform.
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	e Office sou	ught	Office held
	Date	Payee name			
	05/20/2024	Mailchimp			
	Amount (\$)	Payee address; City;	State; Zip C	ode	
	\$671.58	675 Ponce De Leon Ave	9		
		Atlanta, GA 30308			
	PURPOSE OF	a) Category (See Categories liste	d at the top of this schedule)	(b) Description	
	EXPENDITURE	Advertising Expense		I —	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
				_ <u></u>	igital newsletter platform.
				3 pang. 1 u	• · · · · · · · · · · · · · · · · · · ·
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	e Office sou	ught	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	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: 60/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	04/19/2024	Mailchimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$671.58	675 Ponce De Leon Ave
		Atlanta, GA 30308
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign digital newsletter platform.
		Tampanga angam ana asata pamaana
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiorare to benefit C/Or	
	Date	Payee name
	03/19/2024	Mailchimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$671.58	675 Ponce De Leon Ave
		Atlanta, GA 30308
	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
		Campaign digital newsletter platform.
		Tampanga angam ana asata pamaana
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	02/20/2024	Mailchimp
_		Payee address; City; State; Zip Code
	Amount (\$) \$671.58	675 Ponce De Leon Ave
	Φ071.50	675 Police De Leoli Ave
		Atlanta, GA 30308
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign digital newsletter platform.
	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 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 (orders extended that is a content of the content o

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schodula F1:		are)
1	Total pages Schedule F1: Sch: 61/113 Rpt:	Friends of Brandon Creighton 3 Filer ID (Eulius Collimission File) 00058241	15)
4	Date	5 Payee name	
	01/19/2024	Mailchimp	
6	Amount (\$) \$671.58	7 Payee address; City; State; Zip Code 675 Ponce De Leon Ave Atlanta, GA 30308	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
ľ	OF		
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign digital newsletter platform.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	01/22/2024	Margaritaville	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$68.83	600 Margaritaville	
		Conroe , TX 77356	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Meeting to discuss officeholder/ campaign issue:	c
		Weeting to disease officeriolides campaign issue.	J.
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	01/22/2024	Margaritaville	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$229.44	600 Margaritaville	
		Conroe , TX 77356	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
	-	Check if Austin, TX, officeholder living expense	_
		Meeting to discuss officeholder/ campaign issue:	5.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	Complete ONLY if direct expenditure to benefit C/OI		
	•		
			ſ

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/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	ot listed above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics C	Commission Filers)
	Sch: 62/113 Rpt:	Friends of Brandon Creighton 00058241	,
4	Date	5 Payee name	
	02/12/2024	Marriott City Place	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$8.66	1200 Lake Plaza Dr	
		Spring , TX 77389	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Travel In District Check if travel outside of Texas. Complete Sched	dule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Officeholder parking for meeting.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OF	OH .	
F	Date	Payee name	
	05/09/2024	Melo Malfitano, Natalia	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.00	22488 Brass Bell Dr.	
		Porter, TX 77339	
	<u> </u>	1 ofter, 17, 77555	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	dule T.
		(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule) Check if Austin, TX, officeholder living expense	dule T.
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule)	iule T.
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule) Check if Austin, TX, officeholder living expense	tule T.
	OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule) Check if Austin, TX, officeholder living expense Campaign photography Candidate/Officeholder name Office sought Office held	iule T.
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule) Check if Austin, TX, officeholder living expense Campaign photography Candidate/Officeholder name Office sought Office held	tule T.
	OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Campaign photography Candidate/Officeholder name Office sought Office held	tule T.
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Candidate/Officeholder name Office sought Candidate/Officeholder name Office held Payee name	tule T.
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 05/30/2024	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Campaign photography Candidate/Officeholder name Office sought Payee name Melo Malfitano, Natalia	tule T.
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/30/2024 Amount (\$)	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office sought Payee name Melo Malfitano, Natalia Payee address; City; State; Zip Code (b) Description Check if travel outside of Texas. Complete Sched Check if Austin, TX, officeholder living expense Campaign photography Office held Payee address; City; State; Zip Code	tule T.
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 05/30/2024	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office sought Payee name Melo Malfitano, Natalia Payee address; City; State; Zip Code (b) Description Check if travel outside of Texas. Complete Sched Check if Austin, TX, officeholder living expense Campaign photography Office held Payee address; City; State; Zip Code	tule T.
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/30/2024 Amount (\$)	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office sought Payee name Melo Malfitano, Natalia Payee address; City; State; Zip Code (b) Description Check if travel outside of Texas. Complete Sched Check if Austin, TX, officeholder living expense Campaign photography Office held Payee address; City; State; Zip Code	tule T.
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/30/2024 Amount (\$)	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office sought Payee name Melo Malfitano, Natalia Payee address; City; State; Zip Code (b) Description Check if travel outside of Texas. Complete Sched Check if Austin, TX, officeholder living expense Campaign photography Office held Payee address; City; State; Zip Code	tule T.
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 05/30/2024 Amount (\$) \$294.80	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Candidate/Officeholder name Candidate/Officeholder name Office sought Payee name Melo Malfitano, Natalia Payee address; City; State; Zip Code 22488 Brass Bell Dr. Porter, TX 77339	tule T.
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/30/2024 Amount (\$) PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Candidate/Officeholder name Candidate/Officeholder name Office sought Payee name Melo Malfitano, Natalia Payee address; City; State; Zip Code 22488 Brass Bell Dr. Porter, TX 77339	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 05/30/2024 Amount (\$) \$294.80	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Candidate/Officeholder name Office sought Office held Payee name Melo Malfitano, Natalia Payee address; City; State; Zip Code 22488 Brass Bell Dr. Porter, TX 77339 (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule) Check if dustin, TX, officeholder living expense	dule T.
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/30/2024 Amount (\$) PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Check if Tavel outside of Texas. Complete Schedule	dule T. es @ \$.67 per
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/30/2024 Amount (\$) PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Candidate/Officeholder name Office sought Office held Payee name Melo Malfitano, Natalia Payee address; City; State; Zip Code 22488 Brass Bell Dr. Porter, TX 77339 (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule) Check if dustin, TX, officeholder living expense	dule T. es @ \$.67 per
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 05/30/2024 Amount (\$) \$294.80 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Campaign photography	dule T. es @ \$.67 per
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 05/30/2024 Amount (\$) \$294.80 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Campaign photography	dule T. es @ \$.67 per
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 05/30/2024 Amount (\$) \$294.80 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Campaign photography	dule T. es @ \$.67 per
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 05/30/2024 Amount (\$) \$294.80 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense Campaign photography	dule T. es @ \$.67 per

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		xpens Vages	e /Contract Labor		Travel in District Travel Out of Dist OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers)
L	Sch: 63/113 Rpt:		Friends of E	Brandon Creighto	on					00058241	
4	Date	5	Payee name								
L	05/30/2024		Melo Malfita	no, Natalia							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de				
	\$450.00		22488 Bras	s Bell Dr.							
			Porter, TX 7	77339							
8	PURPOSE	(a)	Category (Se	ee Categories listed at th	ne top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Advertising					=		de of Texas. Comp	
	-							Campaign ph		officeholder living	expense
								Campaign pin		giapily	
9	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name		Office sou	aht aht			Office he	ld
Ĺ	expenditure to benefit C/Oh						9'''				·~
	Date		Payee name								
	03/20/2024		Meta								
	Amount (\$)	_	Payee addre		State;	Zip Co	de				
	\$165.00		1 Hacker W	ay							
			Menlo Park	CA 94025							
	PURPOSE	(a)	Category (Se	ee Categories listed at th	ne top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Advertising	Expense				—		de of Texas. Comp officeholder living	
								Campaign ad			слреное
								_ apaigii dd			
	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ght			Office he	ld
	expenditure to benefit C/O						-				
H	Date	Г	Payee name								
	03/20/2024		Meta								
	Amount (\$)		Payee addres	ss; City;	State:	Zip Co	de				
	\$125.00		1 Hacker W		0,	, 30					
	, — — — — — — — — — — — — — — — — — — —			,							
			Menlo Park	CA 94025					_		
	PURPOSE OF	(a)		ee Categories listed at th	ne top of this sche	edule)	(b)	Description			
	EXPENDITURE		Advertising	Expense				ш		de of Texas. Comp officeholder living	
								Campaign ad			олронос
										. 3	
	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ght			Office he	ld
	expenditure to benefit C/O						-				

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 64/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	03/20/2024	Meta
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$125.00	1 Hacker Way
		Menlo Park, CA 94025
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign advertising.
		Sampaigh advertising.
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
L	04/19/2024	Meta
	Amount (\$)	Payee address; City; State; Zip Code
	\$166.93	1 Hacker Way
		Menlo Park, CA 94025
	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
		Campaign advertising.
		Sampaigh advertising.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	
L		
	Date	Payee name
	04/19/2024	Meta
	Amount (\$)	Payee address; City; State; Zip Code
	\$175.00	1 Hacker Way
		Menlo Park, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	-	Campaign advertising
		Campaign advertising.
	Commission ONE V. C. P.	Condidate/Officeholder name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/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 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 (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to c	-	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 65/113 Rpt:	Friends of Brandon Creighton		00058241
4	Date	5 Payee name		•
	04/19/2024	Meta		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$125.00	1 Hacker Way		
		Menlo Park, CA 94025		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Campaign advertising.
				campaign advoiceing.
9	Complete ONLY if direct	Candidate/Officeholder name Office so	<u>l</u> uaht	Office held
ľ	expenditure to benefit C/O		g	Cines new
H	Date	Payee name		
	01/18/2024	Mi Rancho		
┝	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$109.97	19189 I-45	oue	
	Ψ109.91	13103 1-43		
		Chanandach TV 7720F		
L		Shenandoah, TX 77385	T	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense
				Meeting to discuss officeholder/ campaign issues.
	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/O	1		
	Date	Payee name		
	03/05/2024	Mi Rancho		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$100.37	19189 I-45		
		Shenandoah, TX 77385		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORE			Check if Austin, TX, officeholder living expense
				Meeting to discuss officeholder/ campaign issues.
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office so	liapt	Office held
	expenditure to benefit C/O		ugni	Onice field
\vdash				

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/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: 66/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	04/22/2024	Mi Rancho
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$183.96	19189 I-45
		Shenandoah, TX 77385
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/20/2024	Mi Rancho
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.13	19189 I-45
		Shenandoah, TX 77385
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
		modality to discuss simplifying the sample of the sample o
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/13/2024	Michael's Craft Supplies
	Amount (\$)	Payee address; City; State; Zip Code
	\$626.77	10225 Research Blvd
		Suite 2000
		Austin, TX 78759
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITORL	Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
	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		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
_	Sch: 67/113 Rpt:	Friends of Brandon Creighton 00058241	
4	Date	5 Payee name	
	03/12/2024	Montgomery County Association of Business Women	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	13921 Hwy 105 W	
		Suite 130	
		Conroe, TX 77304	
8	PURPOSE		_
١	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Contributions/Donations indue by Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
		Contribution for organizational event.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
_	Date	Payee name	=
	01/17/2024	North Italia	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$173.60	500 W 2nd St.	
	Ψ173.00		
		#120	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Meeting to discuss officeholder/ campaign issues.	
		Weeting to disouss emechation sampaign issues.	
	Complete ONLY if direct expenditure to benefit C/OI	L Candidate/Officeholder name Office sought Office held H	
			_
	Date	Payee name	
	01/17/2024	North Italia	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$58.17	500 W 2nd St.	
		#120	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Meeting to discuss officeholder/ campaign issues.	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Superiorder to belieff 0/01		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers	3)
	Sch: 68/113 Rpt:	Friends of Brandon Creighton 00058241	,
4	Date	5 Payee name	
	05/14/2024	North Italia	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$48.32	500 W 2nd St.	
		#120	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense	
	EXPENDITORE	Check if Austin, TX, officeholder living expense	
		Meeting to discuss officeholder/ campaign issues	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	_
	01/12/2024	North Shore Republican Women	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.00	Po Box 524	
		Willis, TX 77378	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder/Political Committee Contribution for organization event.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	
L	05/06/2024	Omni Houston	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$234.99	4 Riverway	
		Houston, TX 77056	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Officeholder hotel for LRD 2024	
		Officeriolder floter for END 2024	
_	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

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

Candidate/Officeholder/Political Committee Credit Card Payment			mittee	Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 F	ILER NAME						3	Filer ID	(Ethics	Commission Filers)
L	Sch: 69/113 Rpt:	F	Friends of E	Brandon Cr	eighton					00058241		
4	Date	5 F	Payee name									
	02/12/2024	F	Pacific Yard	d House								
6	Amount (\$)	7 F	Payee addre	ss; City;	(State; Zip C	ode					
	\$127.69	1	L01 Metcalf	St.								
		(Conroe, TX	77301			_					
8	PURPOSE OF				ted at the top of t	his schedule)	(b)	Description				
	EXPENDITURE	F	Food/Bever	age Expen	se			<u>—</u>		ide of Texas. Cor , officeholder livin		edule T.
								_				mpaign issues.
								3				13
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offi	ceholder nar	me	Office so	ught			Office h	eld	
	Date	F	Payee name									
	05/23/2024	F	Paesanos									
H	Amount (\$)	F	Payee addre	ss; City;		State; Zip C	ode					
	\$223.20	1	L11 W Croc	kett St #10	1							
		5	San Antonio	o , TX 7820	5		_					
	PURPOSE OF	ı			ted at the top of t	his schedule)	(b)	Description				
	EXPENDITURE	F	Food/Bever	age Expen	se					ide of Texas. Cor , officeholder livin		edule T.
								—				mpaign issues.
								3				13
	Complete ONLY if direct expenditure to benefit C/Ol		andidate/Offi	ceholder nar	ne	Office so	ught			Office h	eld	
	Date	F	Payee name									
	02/21/2024	ı	Pappasito's	Cantina								
H	Amount (\$)	_	Payee addre			State; Zip C	ode					
	\$139.92	l	L8101 Inter		·	o						
	4100.02		10101 11101	otato 1011								
		5	Shenandoa	h, TX 7738	5							
	PURPOSE	ı			ted at the top of t	his schedule)	(b)	Description	_			
	OF EXPENDITURE	F	ood/Bever	age Expen	se					ide of Texas. Cor		edule T.
										, officeholder livin		mpaign issues.
								weeting to dis	SUL	iss uniceno	iuei/ cai	mpaign issues.
\vdash	Complete ONLY if direct	<u> </u>	andidata/Off:	ceholder nar		Office	ught			Office	old	
	Complete ONLY if direct expenditure to benefit C/OI		zi iuiuale/OIII	cenoluel nai	iie	Office so	uynı			Office h	ciu	
L	•											
L												

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/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: 70/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	04/25/2024	Pappasito's Cantina
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$108.98	18101 Interstate 45 N
		Shenandoah, TX 77385
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	_	
	Date	Payee name
	01/31/2024	Perla's Seafood
	Amount (\$)	Payee address; City; State; Zip Code
	\$292.39	1400 S Congress Ave
		Austin, TX 78704
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/13/2024	Perla's Seafood
_		Payee address; City; State; Zip Code
	Amount (\$) \$281.67	1400 S Congress Ave
	Φ201.07	1400 S Congress Ave
		Austin, TX 78704
-	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

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

l	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: 71/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	04/03/2024	Perla's Seafood
6	Amount (\$) \$243.03	7 Payee address; City; State; Zip Code 1400 S Congress Ave
		Austin, TX 78704
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
ſ	Date	Payee name
	05/02/2024	Perla's Seafood
	Amount (\$) \$347.12	Payee address; City; State; Zip Code 1400 S Congress Ave
		Austin, TX 78704
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 01/11/2024	Payee name Polvo's
	Amount (\$) \$242.39	Payee address; City; State; Zip Code 2004 S 1st St
		Austin, TX 78704
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	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: 72/113 Rpt:	Friends of Brandon Creighton 00058241	
4	Date	5 Payee name	
	05/24/2024	Polvo's	
6	Amount (\$) \$240.16	7 Payee address; City; State; Zip Code 2004 S 1st St	
		Austin, TX 78704	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	01/31/2024	Premium Parking	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.34	1407 Eva St	
		Austin , TX 78704	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Officeholder parking for meeting.	
		Officeriolider parking for meeting.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
	Date	Payee name	
L	01/12/2024	Ramirez, Carolina	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$250.00	113 Quail Ridge Dr.	
		Kyle, TX 78640	
H	PURPOSE	To a	_
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	X Check if Austin, TX, officeholder living expense	
		Officeholder Austin apartment cleaning services.	
	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 Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
-	Sch: 73/113 Rpt:	Friends of Brandon Creighton O0058241
4	Date	5 Payee name
	01/12/2024	Ramirez, Carolina
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 113 Quail Ridge Dr.
_	BUBBOOK	Kyle, TX 78640
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Check if Austin, TX, officeholder living expense Officeholder Austin apartment cleaning services.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/02/2024	Ramirez, Carolina
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	113 Quail Ridge Dr.
		Kyle, TX 78640
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Officeholder Austin apartment cleaning services.
		Cincential Additional Additional Services.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/13/2024	Ramirez, Carolina
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	113 Quail Ridge Dr.
		Kyle, TX 78640
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	X Check if Austin, TX, officeholder living expense
		Officeholder Austin apartment cleaning services.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (orbits a extension not listed above)

	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: 74/113 Rpt:	Friends of Brandon Creighton 00058241	
4	Date	5 Payee name	
	03/20/2024	Ramirez, Carolina	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$250.00	113 Quail Ridge Dr.	
		Kyle, TX 78640	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	X Check if Austin, TX, officeholder living expense	
		Officeholder Austin apartment cleaning services.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	_
	05/29/2024	Ramirez, Carolina	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$250.00	113 Quail Ridge Dr.	
		Kyle, TX 78640	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Officeholder Austin apartment cleaning services	
		Officeriolider Austin apartment cleaning services	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
	Date	Payee name	=
	05/29/2024	Ramirez, Carolina	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$125.00	113 Quail Ridge Dr.	
	Ψ125.00	TIO Quali Maye DI.	
		Kyle, TX 78640	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	X Check if Austin, TX, officeholder living expense	
		Officeholder Austin apartment cleaning services	
	0 1 0 0 0 0 0		_
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
			_

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

Contributions Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment				Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Cabadula F4:	2 .			onpiuiio				١-	Filor ID	(Ethics Commission Filers)	
	Total pages Schedule F1: Sch: 75/113 Rpt:	l		randon Creighte	on				3	Filer ID 00058241	(Ethics Commission Filers)	
Ļ		┡		Tandon Creight	J11					00000241		
4	Date	l	Payee name									
L	06/13/2024	L	Ramirez, Ca	ırolina			_		_			
6	Amount (\$)	7	Payee addres	s; City;	State;	; Zip Co	de					
	\$125.00] :	113 Quail R	dge Dr.								
		1	Kyle, TX 78	640								
8	PURPOSE	(a) (Category (Se	e Categories listed at th	ne top of this sch	edule)	(b)	Description				
	OF EXPENDITURE			nead/Rental Exp			-		outsi	de of Texas. Cor	mplete Schedule T.	
	EXPENDITURE							_		officeholder livin		
								Officeholder A	Aus	stin apartme	ent cleaning services.	
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	eholder name	C	Office sou	ght			Office h	neld	
L	experientare to benefit C/OI											
	Date	F	Payee name									
	05/13/2024		Readyrefres	h								
	Amount (\$)	F	Payee addres	s; City;	State;	Zip Co	de					
	\$65.61	#	#215 6661 [Dixie HWY								
		;	Suite 4									
			Louisville, K	Y 40258								
_	PURPOSE	 		e Categories listed at th	no ton of this a -t-	odulo)	(b)	Description				
	OF			e Categories listed at tr nead/Rental Exp		euule)	·~ <i>,</i>		outsi	de of Texas. Cor	mplete Schedule T.	
	EXPENDITURE	`	C.1100 O VOII	.oaa, .comar EA				Check if Austin,	, TX,	officeholder livir	ng expense	
								Water for The	e W	oodlands o	office.	
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	eholder name		Office sou	ght			Office h	neld	
	experientare to benefit 6/01											
	Date	F	Payee name									
L	05/06/2024	L	Readyrefres	h								
	Amount (\$)	F	Payee addres	s; City;	State;	; Zip Co	de					
	\$21.64	#	#215 6661 [Dixie HWY								
		:	Suite 4									
			Louisville, K	Y 40258								
	PURPOSE	(a) (Category (Se	e Categories listed at th	ne top of this sch	edule)	(b)	Description				
	OF EXPENDITURE			nead/Rental Exp		/	-	Check if travel			mplete Schedule T.	
	LAFEINDITURE									officeholder livir		
								Water for The	e W	oodlands d	office.	
						2.00						
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	eholder name	C	Office sou	ght			Office h	neld	
	Orange to bonom of or	•										

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Fil	ers)
_	Sch: 76/113 Rpt:	Friends of Brandon Creighton 00058241	010)
4	Date	5 Payee name	
	03/18/2024	Readyrefresh	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$65.61	#215 6661 Dixie HWY	
		Suite 4	
		Louisville, KY 40258	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		Check if Austin, TX, officeholder living expense	
		Water for The Woodlands office.	
_	Complete ONLY if direct	Condidate/Officeholder name Office sought Office hold	
9	expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	02/12/2024	Readyrefresh	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$65.61	#215 6661 Dixie HWY	
		Suite 4	
		Louisville, KY 40258	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Water for The Woodlands office.	
		Trace for the vectoral and since.	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
-	Date	Payee name	
	02/05/2024	Readyrefresh	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$21.64	#215 6661 Dixie HWY	
	Ψ21.04	Suite 4	
	BUDE CO-	Louisville, KY 40258	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Water for The Woodlands office.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	DH	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Cor	The Instruction Guide explains how to co	Expen /Wage	nse es/Contract Labor		Travel Out of District OTHER (enter a category not listed abo	ove)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Sch: 77/113 Rpt:		Friends of Brandon Creighton				00058241	
4	Date	5	Payee name					
	01/05/2024	L	Readyrefresh					
6	Amount (\$)	7	Payee address; City; State; Zip C	ode				
	\$21.64		#215 6661 Dixie HWY					
			Suite 4					
			Louisville, KY 40258					
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF	``	Office Overhead/Rental Expense	``		outsid	le of Texas. Complete Schedule T.	
	EXPENDITURE				—		officeholder living expense	
					Water for The	e We	oodlands office.	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office so	ught			Office held	
	Date		Payee name					
	04/23/2024		Republican Party of Texas					
	Amount (\$)	\vdash	Payee address; City; State; Zip C	ode				
	\$10,000.00		P.O. Box 2206					
	, 3,525.30							
			Austin, TX 78768					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description			
	EXPENDITURE		Event Expense		<u> </u>		le of Texas. Complete Schedule T. officeholder living expense	
					Convention s			
					2001111011 0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Complete ONLY if direct		Candidate/Officeholder name Office so	l ught	:		Office held	
	expenditure to benefit C/OI	_						
	Date		Payee name					
	05/29/2024		Republican Party of Texas					
	Amount (\$)		Payee address; City; State; Zip C	ode				
	\$79.00		P.O. Box 2206					
			Austin, TX 78768					
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE		Event Expense				le of Texas. Complete Schedule T.	
							officeholder living expense 24 convention.	
					Stati ticket 101	ı 2U	Z-+ CONVENIUM.	
_	Complete ONLY if direct	Ц	Candidate/Officeholder name Office so	ught			Office held	
	expenditure to benefit C/O		Office sol	ugrit			Office field	
_								
	rms provided by Texas F	tla:	es Commission www.athics.state.tv				Version V// 1.0	4070-10
$-\alpha$	THE DECLERATION BY LOVAC L	inic	THE CHARGE CODE MANAY OTDICE CTOTO TV	110			Vorcion V/I 1 ()	112/Vana()

SCHEDULE F1

Advertising Expense Event Expert Accounting/Banking Fees Consulting Expense Food/Beve Contributions/ Donations Made By - Gift/Awards Candidate/Officeholder/Political Committee Legal Serv

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 78/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
L	05/23/2024	Republican Party of Texas
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$79.00	P.O. Box 2206
		Austin, TX 78768
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Ticket for GOP convention.
		Heket for Got convention.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	05/23/2024	Republican Party of Texas
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.00	P.O. Box 2206
		Austin, TX 78768
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Ticket for GOP convention.
		Heket for Got convention.
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
┝	Date	Davida marra
	05/23/2024	Payee name Popublican Party of Toyas
L		Republican Party of Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$304.00	P.O. Box 2206
		Austin, TX 78768
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Ticket for GOP convention.
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

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/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: 79/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	01/22/2024	Romanos Macaroni Grill
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$199.95	1155 Lake Woodlands Dr
		The Woodlands , TX 77380
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
		Moderny to disouse officeriolider, our pargrillisades.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	06/13/2024	San Luis
	Amount (\$)	Payee address; City; State; Zip Code
	\$667.74	5222 Seawall Blvd
		Galveston, TX 77551
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	!	Hotel for staff during campaign event.
	!	riotorior stair during sampaign event.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y
L		
	Date	Payee name
	06/13/2024	San Luis
	Amount (\$)	Payee address; City; State; Zip Code
	\$884.56	5222 Seawall Blvd
		Galveston, TX 77551
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Hotel for staff during campaign event.
	Operation ONLY if allowed	Our Hidde (Office helder grown
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H

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 Travel in District Travel Out of District OTHER (enter a category not listed above)

l	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: 80/113 Rpt:	Friends of Brandon Creighton		00058241
4	Date	5 Payee name		'
	06/13/2024	San Luis		
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode	
l	\$454.53	5222 Seawall Blvd		
l		Galveston, TX 77551		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Hotel for staff during campaign event.
				Tioter for stair during earnpaign event.
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	l ıaht	Office held
	expenditure to benefit C/O		·9···	S. Med Med
⊨	Date	Payee name		
	05/23/2024	San Luis		
┝	Amount (\$)	Payee address; City; State; Zip Co	nde	
l	\$49.14	5222 Seawall Blvd	Juc	
	Ψ+0.1+	3222 Scawaii Biva		
		Galveston, TX 77551		
L	DUDDOCE		/h\	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(D)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel Out of District		Check if Austin, TX, officeholder living expense
				Parking for officeholder meeting.
L				
l	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ight	Office held
L	experialitate to beliefit C/O	1		
l	Date	Payee name		
	06/12/2024	San Luis		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
l	\$376.05	5222 Seawall Blvd		
l				
l		Galveston, TX 77551		
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.
l				Check if Austin, TX, officeholder living expense Hotel for campaign event.
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sou	L ight	Office held
	expenditure to benefit C/O		J. /•	
\vdash				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense 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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 81/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	06/12/2024	San Luis
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$410.69	5222 Seawall Blvd
		Galveston, TX 77551
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Hotel for campaign event.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/13/2024	San Luis
	Amount (\$)	Payee address; City; State; Zip Code
	\$454.53	5222 Seawall Blvd
		Galveston, TX 77551
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Hotel for campaign event.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/06/2024	Sawyer Park Icehouse
	Amount (\$)	Payee address; City; State; Zip Code
	\$53.05	314 Pruitt Rd
		Spring , TX 77380
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·

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		nmittee	Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		xpens Vages	e /Contract Labor		Travel in Distric Travel Out of Di OTHER (enter a		
1	Total pages Schedule F1:	2								Filer ID	(Ethics Commission File	ers)
L	Sch: 82/113 Rpt:	L	Friends of E	Brandon Creighto	on					00058241		
4	Date	5	Payee name									
L	03/01/2024		Sephora									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$594.69		2901 S N C	apital of Texas H	ال Suite ا	/102A						
			Austin , TX	78746								
8	PURPOSE	(a)	Category (Se	ee Categories listed at th	e top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Gift/Awards	/Memorials Expe	ense			=			nplete Schedule T.	
	-							Staff gifts.	, 1X,	officeholder livin	g expense	
								Cian giits.				
9	Complete ONLY if direct	<u> </u>	Candidate/Offic	ceholder name		Office sou	aht aht			Office h	eld	
	expenditure to benefit C/O					55 564	3.11			Coc 11		
	Date		Payee name									
	06/28/2024		Spectrum									
	Amount (\$)	\vdash	Payee addres	ss; City;	State;	Zip Co	de					
	\$291.79		400 Atlantic	St.								
			Stamford, C	T 06901								
	PURPOSE	(a)	Category (Se	ee Categories listed at th	e top of this sch	edule)	(b)	Description				
	OF EXPENDITURE			head/Rental Exp		-		=			nplete Schedule T.	
								—		officeholder livin		
								Officeholder A	⊣uS	ын арагипе	in cable.	
\vdash	Complete ONLY if direct	<u> </u>	Candidate/Offic	ceholder name		Office sou	aht			Office h	eld	
	expenditure to benefit C/O		Januluale/OIII	conduct Haine		mice sou	grit			Onice II	Ciu	
\vdash	Data	Ι	Davisa rarra									
	Date 05/28/2024		Payee name Spectrum									
_		_		City:	Ctata	Zin O	de					
	Amount (\$)		Payee addres		State;	Zip Co	ae					
	\$291.79		400 Atlantic	. St.								
			Stamford, C	T 06901								
	PURPOSE	(a)	Category (Se	ee Categories listed at th	e top of this sch	edule)	(b)	Description				
	OF EXPENDITURE			head/Rental Exp		•		Check if travel of			nplete Schedule T.	
								—		officeholder livin		
								Officeholder A	⊣uS	ын арагипе	in cable.	
	Complete ONLY if direct	Ц	Pandidato/Offic	ceholder name		Office cou	aht			Office h	ald	
	expenditure to benefit C/O		zariuluale/UIII	cenoidei Haille	C	Office sou	ynı			Onice II	Giu	

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
	·	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 83/113 Rpt:	2 FILER NAME Friends of Brandon Creighton	3 Filer ID (Ethics Commission Filers) 00058241
1	Date	<u>-</u>	
4		5 Payee name	
	04/29/2024	Spectrum	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$291.79	400 Atlantic St.	
		Stamford CT 06001	
		Stamford, CT 06901	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overficacin tental Expense	outside of Texas. Complete Schedule T.
	LAI ENDITORE		TX, officeholder living expense
		Officeholder A	Austin apartment cable.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	l	
	Date	Payee name	
	03/28/2024	Spectrum	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$291.79	400 Atlantic St.	
	*		
		Stamford, CT 06901	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		outside of Texas. Complete Schedule T.
	EXPENDITURE	X Check if Austin,	TX, officeholder living expense
		Officeholder A	Austin apartment cable.
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	H	
	Data	Davisa warea	
	Date	Payee name	
	02/28/2024	Spectrum	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$291.79	400 Atlantic St.	
		Stamford, CT 06901	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overficad/Nertial Expense	outside of Texas. Complete Schedule T.
			TX, officeholder living expense
		Officeholder A	Austin apartment cable.
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	I	

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

	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: 84/113 Rpt:	Friends of Brandon Creighton 00058241	
4	Date	5 Payee name	
	01/29/2024	Spectrum	
6	Amount (\$) \$271.57	7 Payee address; City; State; Zip Code 400 Atlantic St. Stamford, CT 06901	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Officeholder Austin apartment cable.	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	02/02/2024	Starbucks	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$29.34	501 W 15th St	
	2022	Austin , TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Meeting to discuss officeholder/ campaign issues.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	06/17/2024	Sunny Creek Ranch Horses for Heroes	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$500.00	7718 Bryan Ln	
		Montgomery , TX 77316	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee	
		Candidate/Officeholder/Political Committee	
		Contribution to organization.	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

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

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

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

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

Travel in District
Travel Out of District
OTHER (enter a cated

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 85/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	03/13/2024	Target
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$28.49	5621 N Interstate 35 frontage Rd
		Austin, TX 78723
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Supplies for Austin office.
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	- CAPCHARLATO TO BOTTONIC GFO	'
	Date	Payee name
	03/13/2024	Target
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.13	5621 N Interstate 35 frontage Rd
		Austin, TX 78723
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Supplies for Austin office.
		Supplies for Austra office.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/17/2024	Tatango
		-
	Amount (\$) \$540.00	Payee address; City; State; Zip Code 2211 Elliott Ave.
	Ψ040.00	Ste. 200
		Seattle, WA 98121
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel queside of Taylor Camplete Schedule T
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Texting service for campaign.
	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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

xpense Travel in Dis Expense Travel Out of Wages/Contract Labor OTHER (ent

	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: 86/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	02/20/2024	Tatango
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$540.00	2211 Elliott Ave.
		Ste. 200
		Seattle, WA 98121
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		Texting service for campaign.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
	Date	Payee name
	03/18/2024	Tatango
	Amount (\$)	Payee address; City; State; Zip Code
	\$540.00	2211 Elliott Ave.
		Ste. 200
		Seattle, WA 98121
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Texting service for campaign.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Data	
	Date 06/06/2024	Payee name Tatango
	Amount (\$)	Payee address; City; State; Zip Code
	\$532.00	2211 Elliott Ave.
		Ste. 200
		Seattle, WA 98121
	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
		Texting service for campaign.
	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 Salaries/Mages/Contract Labor

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total names Schodule F1:		_
	Total pages Schedule F1: Sch: 87/113 Rpt:	Friends of Brandon Creighton 3 Filer ID (Ethics Commission Filers) 00058241	
4	Date	5 Payee name	
	04/23/2024	Tatango	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$540.00	2211 Elliott Ave.	
		Ste. 200	
		Seattle, WA 98121	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Texting service for campaign.	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
_	Date	Payon namo	_
	01/29/2024	Payee name Texas Department of Criminal Justice	
		·	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,039.20	P.O. Box 4013	
		Huntsville, TX 77342	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.	
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense	
		Constituent gifts.	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	=
	03/08/2024	Texas Department of Criminal Justice	
	Amount (\$)	Payee address; City; State; Zip Code	\neg
	\$170.50	P.O. Box 4013	
		Huntsville, TX 77342	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.	
		Constituent gifts.	
		Constituent gills.	
	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 Committe 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 Filers)
_	Sch: 88/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	05/08/2024	Texas Department of Criminal Justice
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,299.00	P.O. Box 4013
		Huntsville, TX 77342
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Constituent gifts
		Constituent gifts.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
	Date	Payee name
	02/25/2024	Texas Patriots PAC
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	1544 Sawdust Rd.
		#402
		Spring, TX 77380
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXI ENDITORE	Candidate/Officeholder/Political Committee
		Contribution for organization event.
	Complete ONLY if direct	Condidate/Officeholder name Office county
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/18/2024	Texas Prison Museum
	Amount (\$)	Payee address; City; State; Zip Code
	\$676.56	491 Highway 75 N.
		Huntsville, TX 77320
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Constituent gifts.
		Sonsulating gine.
\vdash	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 Committ

Event Expense 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	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: 89/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	03/08/2024	Texas Prison Museum
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$676.56	491 Highway 75 N.
		Huntsville, TX 77320
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
		Check if Austin, TX, officeholder living expense Constituent gifts.
		Constituent gitts.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
,	expenditure to benefit C/O	
	Date	David and the second se
	02/01/2024	Payee name Texas Senate
	Amount (\$)	Payee address; City; State; Zip Code
	\$207.00	1400 Congress
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense Gifts for constituents.
		Sits for constituents.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/08/2024	Texas Senate
	Amount (\$) \$175.00	Payee address; City; State; Zip Code
	Φ175.00	1400 Congress
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gifts for constituents.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Event
Accounting/Banking Fees
Consulting Expense Food/
Contribution/ Onations Made By - Gift/An

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 90/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	02/26/2024	Texas Senate
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$178.00	1400 Congress
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gifts for constituents.
		Citie for concentration.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	04/15/2024	Texas Senate
	Amount (\$)	Payee address; City; State; Zip Code
	\$133.50	1400 Congress
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gifts for constituents.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/28/2024	Texas Youth Foundation
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	PO box 8150
		Spring , TX 77387
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Contribution for annual summit fundraiser.
	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	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
ļ -	Sch: 91/113 Rpt:	Friends of Brandon Creighton 00058241
Ļ	<u> </u>	
4	Date	5 Payee name
	03/26/2024	The Butcher Shop
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$48.06	1814 Washington Ave
		Houston, TV 77007
		Houston, TX 77007
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1
	Date	Payee name
	03/12/2024	The Fix by PR
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$15.69	316 MadeleySt
	Ψ10.09	ozo madoloyot
		- TV 77004
		Conroe , TX 77301
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/campaign issues.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1
	Date	Payee name
	05/14/2024	The Heights Social
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.00	1213 W 20th St
	Φ44.00	1210 AA 50(1) 2(
L		Houston, TX 77008
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EVDENDITUDE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Parking for officeholder meeting
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/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: 92/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	01/12/2024	The Houston District
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$21.00	5002 Washington Ave
		Houston, TX 77007
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Officeholder parking for meeting.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/11/2024	The Post Oak Hotel
	Amount (\$)	Payee address; City; State; Zip Code
	\$29.15	1600 W Loop S
		Houston, TX 77027
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food while attending GHP Houston events.
		Took write alteriality of it Troublest events.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	03/12/2024	The Post Oak Hotel
	Amount (\$)	Payee address; City; State; Zip Code 1600 W Loop S
	\$27.00	1600 W Loop S
		Houston, TX 77027
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense parking for officeholder meeting.
		parking for officeriolder friedling.
_	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 Commit

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 93/113 Rpt:	Friends of Brandon Creighton 00058241						
4	Date	5 Payee name						
	03/12/2024	The Post Oak Hotel						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$27.00	1600 W Loop S						
		Houston, TX 77027						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		parking for officeholder meeting.						
		parting for onlocations.						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
,	expenditure to benefit C/O							
_	Data							
	Date	Payee name The Post Ook Hotel						
	03/11/2024	The Post Oak Hotel						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$180.22	1600 W Loop S						
		Houston, TX 77027						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.						
		Wieeting to discuss officeriolide// campaign issues.						
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O	y						
	Date	Payee name						
	03/11/2024	The Post Oak Hotel						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$972.82	1600 W Loop S						
		Houston, TX 77027						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense						
		Hotel for Greater Houston Partnership event.						
	Complete ONLY if direct	Condidate/Officeholder neme						
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
	<u> </u>							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	Sala		iges	/Contract Labor		OTHER (enter	a category not listed a	bove)
					uide explains how t	o com	ріє	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 94/113 Rpt:		Friends of B	randon Creight	on					00058241		
4	Date	5	Payee name									
	03/22/2024		The Post Oa	ak Hotel								
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip	Cod	le					
	\$81.91		1600 W Loo	p S								
				•								
			Houston, TX	/ 77027								
Ļ		_				- 1.						
8	PURPOSE OF	(a)		ee Categories listed at th	ne top of this schedule)	10	b)	Description				
	EXPENDITURE		Food/Bevera	age Expense				=		officeholder livi	mplete Schedule T.	
								_			older/ campaigi	n issues
								wooding to a		300 01110011	olaoi, oampaigi	1100000.
Ļ	Commission ONII V if disposi	<u> </u>	Condidate/Offic		Office		la 4			Office	a a l al	
9	Complete ONLY if direct expenditure to benefit C/O		Jandidate/Offic	ceholder name	Office	soug	nt			Office h	1eia	
	<u> </u>	_										
	Date		Payee name									
	05/08/2024		The Woodla	ınds Republicar	n Women							
	Amount (\$)		Payee addres	ss; City;	State; Zip	Cod	le					
	\$500.00		P.O. Box 72	94								
			The Woodla	ınds, TX 77387								
_	DUDDOCE	(0)				1,	'h\	<u> </u>				
	PURPOSE OF	(a)		ee Categories listed at the		١	(U)	Description Check if travel (nutei	de of Tevas Co	mplete Schedule T.	
	EXPENDITURE			s/Donations Ma Officeholder/Poli	ide By tical Committee	.		=		officeholder livi		
			our laidato, c	oniocholacim on	tiodi Committee			Contribution f				
										J		
	Complete ONLY if direct		 Candidate/Offic	ceholder name	Office	soua	ht			Office I	neld	
	expenditure to benefit C/O					9						
	Date	ı										
	Date		Payee name									
	03/12/2024		Tin Roof BB	SQ								
	Amount (\$)		Payee addres	ss; City;	State; Zip	Cod	le					
	\$20.02		18918 Town	n Center Blvd								
			Atascocita,	TX 77346								
	PURPOSE	(a)	Category (%)	ee Categories listed at t	ne ton of this schedulo)	1	b)	Description				
	OF	l`		age Expense	ie top of this schedule)	`	•		outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE			gp				Check if Austin,	, TX,	officeholder livi	ng expense	
								Meeting to dis	scu	ss officeho	lder/campaign	issues.
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office	soug	ht			Office I	neld	
	expenditure to benefit C/O	Н										
l												

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/Political Committee Credit Card Payment		Committee Legal Servi		-	s/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 95/113 Rpt:	Friends of Brandon	Creighton				00058241	
4	Date	5 Payee name						
	01/12/2024	Tiny Boxwoods						
6	Amount (\$)	7 Payee address; C	tity; State; Zip	Code				
	\$111.00	Tiny Boxwood's						
		1503 W 35th St						
		Austin, TX 78703						
8	PURPOSE OF	(a) Category (See Categorie	es listed at the top of this schedule)	(b)	Description			
	EXPENDITURE	Food/Beverage Exp	ense		_		de of Texas. Com , officeholder living	plete Schedule T.
					_			der/ campaign issues.
					mooning to an	000		doi/ dampaign locado.
9	Complete ONLY if direct	Candidate/Officeholder	name Office	sought			Office he	eld
	expenditure to benefit C/OI							
	Date	Payee name			<u></u>			
	06/03/2024	Tiny Boxwoods						
	Amount (\$)	Payee address; C	ity; State; Zip	Code				
	\$169.58	Tiny Boxwood's						
		1503 W 35th St						
		Austin, TX 78703						
	PURPOSE	(a) Category (See Categorie	es listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Food/Beverage Exp	ense					plete Schedule T.
					ш		officeholder living	der/ campaign issues.
					wiceting to dis	300	iss officerior	ucii campaigii issues.
	Complete ONLY if direct	Candidate/Officeholder	name Office	sought			Office he	eld
	expenditure to benefit C/O							
	Date	Payee name						
L	03/11/2024	Uber						
	Amount (\$)	Payee address; C	ity; State; Zip	Code				
	\$9.64	1725 Third Street						
L		San Francisco , CA	94111					
	PURPOSE	(a) Category (See Categorie	es listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Travel In District			ш		de of Texas. Com officeholder living	plete Schedule T.
					ш			IP Houston events.
					SSS: Willio at		and of	
	Complete ONLY if direct	Candidate/Officeholder	name Office	sought			Office he	eld
	expenditure to benefit C/OI	I						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/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: 96/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	03/11/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$19.96	1725 Third Street
		San Francisco , CA 94111
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Uber while attending GHP Houston events.
		Ober while alterialing of it Production events.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
\vdash	Data	<u> </u>
	Date	Payee name
	03/11/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.99	1725 Third Street
		San Francisco , CA 94111
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Uber while attending GHP Houston events.
		Ober While attending GHF Houston events.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	
	Date 03/11/2024	Payee name Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$7.75	1725 Third Street
		San Francisco , CA 94111
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense Uber while attending GHP Houston events.
		Ober while attending GHP Houston events.
_	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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 97/113 Rpt:	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Friends of Brandon Creighton 00058241
4 Date 03/18/2024	5 Payee name Uber
6 Amount (\$) \$66.05	7 Payee address; City; State; Zip Code 1725 Third Street San Francisco , CA 94111
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Uber while attending the GHP Houston event.
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 03/18/2024	Payee name Uber
Amount (\$) \$79.78	Payee address; City; State; Zip Code 1725 Third Street San Francisco , CA 94111
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Uber while attending the GHP Houston events.
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 03/18/2024	Payee name Uber
Amount (\$) \$63.61	Payee address; City; State; Zip Code 1725 Third Street
	San Francisco , CA 94111
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Uber while attending the GHP Houston events.
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political 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/Political Credit Card Payment	- Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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:	
Sch: 98/113 Rpt:	Friends of Brandon Creighton 00058241
4 Date	5 Payee name
03/11/2024	Uber
6 Amount (\$) \$14.30	7 Payee address; City; State; Zip Code 1725 Third Street San Francisco , CA 94111
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Uber while attending GHP Houston events.
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/05/2024	Uber
Amount (\$) \$12.00	Payee address; City; State; Zip Code 1725 Third Street San Francisco , CA 94111
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Uber in San Antonio for GOP convention.
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/05/2024	Uber
Amount (\$)	Payee address; City; State; Zip Code
\$15.05	1725 Third Street
	San Francisco , CA 94111
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Uber in San Antonio for GOP convention.
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)		
	Sch: 99/113 Rpt:	Friends of B	randon Creighton					00058241			
4	Date	5 Payee name									
	06/05/2024	Uber									
6	Amount (\$)	7 Payee address	s; City;	State; Zip C	ode						
	\$9.40	1725 Third	Street								
		San Francis	co , CA 94111								
8	PURPOSE OF		e Categories listed at the top	o of this schedule)	(b)	Description					
	EXPENDITURE	Travel Out o	f District			ш		de of Texas. Com officeholder living			
						Uber in San A					
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Offic	eholder name	Office so	ught			Office he	eld		
	experialture to belieff C/Or	1									
	Date	Payee name									
	03/18/2024	Uber									
	Amount (\$)	Payee addres	s; City;	State; Zip C	ode						
	\$133.91	1725 Third	Street								
		San Francis	co , CA 94111								
	PURPOSE OF		e Categories listed at the top	o of this schedule)	(b)	Description					
	EXPENDITURE	Travel Out o	f District					de of Texas. Com officeholder living			
						Expense for e			CAPONISC		
\vdash	Complete ONLY if direct	Candidate/Offic	eholder name	Office so	ught			Office he	eld		
	expenditure to benefit C/OI	1									
	Date	Payee name									
	04/12/2024	Uber									
	Amount (\$)	Payee addres	s; City;	State; Zip C	ode						
	\$24.58	1725 Third	Street								
		San Francis	co , CA 94111								
	PURPOSE	(a) Category (Se	e Categories listed at the top	of this schedule)	(b)	Description					
	OF EXPENDITURE	Travel Out o	f District					de of Texas. Com			
						Expense for e		officeholder living	g expense		
						Evherise in (.ve	iii uavel.			
_	Complete ONLY if direct	Candidate/Offic	eholder name	Office so	<u>l</u> ught			Office he	eld		
	expenditure to benefit C/O			J.1100 30	g' ''			211100 110			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 100/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	05/07/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$43.19	1725 Third Street
		San Francisco , CA 94111
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Expense for event travel.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/07/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.47	1725 Third Street
		San Francisco , CA 94111
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Expense for event travel.
		· ·
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/20/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$81.39	1725 Third Street
		San Francisco , CA 94111
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Expense for event travel.
		Expense for event travel.
	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

	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: 101/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	05/31/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$31.77	1725 Third Street
		San Francisco , CA 94111
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Expense for event travel.
		Expense for event travel.
_	0 1: 0 11 1 1	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/31/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.27	1725 Third Street
		San Francisco , CA 94111
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Expense for event travel.
_	Operation ONLY if allowed	On did to 10 ff as hald a grant Off as south
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	•	
	Date	Payee name
	06/12/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$7.94	1725 Third Street
		San Francisco , CA 94111
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Expense for event travel.
	Complete ONLY if allowers	Condidate/Officeholder name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	al Committee Legal Services The Instruction Guide 6		ges/Contract Labor plete this form.	OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 102/113 Rpt:	Friends of Brandon Creighton			00058241	
4	Date	5 Payee name		I		
	06/13/2024	Uber				
6	Amount (\$)	7 Payee address; City;	State; Zip Code			
	\$39.84	1725 Third Street	otato, z.p cout			
		San Francisco , CA 94111				
8	PURPOSE	(a) Category (See Categories listed at the top	of this schedule) (k	Description		
	OF EXPENDITURE	Travel Out of District		<u>—</u>	side of Texas. Comp X, officeholder living ent travel.	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sough	nt	Office he	ld
	Date	Payee name				
	06/12/2024	Uber				
	Amount (\$)	Payee address; City;	State; Zip Code	e		
	\$28.67	1725 Third Street				
		San Francisco , CA 94111				
	PURPOSE	(a) Category (See Categories listed at the top	of this schedule) (k	Description		
	OF EXPENDITURE	Travel Out of District			side of Texas. Comp	
				ш	X, officeholder living	expense
				Expense for ev	eni iravei.	
	Complete ONLY if direct	Candidate/Officeholder name	Office sough	nt .	Office he	Id
	expenditure to benefit C/Ol		Office Sough	п	Office fie	lu
	Date	Payee name				
	06/20/2024	Uber				
	Amount (\$)	Payee address; City;	State; Zip Code	е		
	\$44.05	1725 Third Street				
		San Francisco , CA 94111				
	PURPOSE	(a) Category (See Categories listed at the top	of this schedule) (k	Description		
	OF EXPENDITURE	Travel Out of District			side of Texas. Comp	
					X, officeholder living	expense
				Expense for ev	eni liävel.	
	Complete ONLY if direct	Condidate/Officeholder sema	Office sourch	<u></u>	Office he	Id
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name H	Office sough	IL	Office he	iu

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	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: 103/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	06/20/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$7.96	1725 Third Street
		San Francisco , CA 94111
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Expense for event travel.
		Expense for event travel.
Ļ	Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held I
⊨	Date	Payee name
	06/20/2024	Uber
┝		
	Amount (\$)	
	\$31.79	1725 Third Street
		San Francisco , CA 94111
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Expense for event travel.
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/20/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$6.35	1725 Third Street
		San Francisco , CA 94111
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Expense for event travel.
L	Complete ONII V if alias -t	Condidate/Officeholder name Office county
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
ldash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense 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	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: 104/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	06/24/2024	United Airlines
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$348.48	233 S. Wacker Dr.
		Chicago, IL 60606
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Officeholder airline fee.
		Cincertoladi all'ille leci.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
\vdash	Date	Dougo nama
	01/25/2024	Payee name
		Vince Young Steakhouse
	Amount (\$)	Payee address; City; State; Zip Code
	\$378.93	301 San Jacinto Blvd
		Austin , TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
		Meeting to discuss officerioliden campaign issues.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date 02/28/2024	Payee name
		Vince Young Steakhouse
	Amount (\$)	Payee address; City; State; Zip Code
	\$172.89	301 San Jacinto Blvd
		Austin , TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
		Meeting to discuss officerioliden campaign issues.
\vdash	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 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		
_	Total pages Cab - dul - E4	<u> </u>	oro)
1	Total pages Schedule F1: Sch: 105/113 Rpt:	2 FILER NAME Friends of Brandon Creighton 3 Filer ID (Ethics Commission File 00058241	erS)
4	Date	5 Payee name	
	03/01/2024	Vonlane	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$260.00	208 Barton Springs Rd.	
	Ψ200.00		
		Austin, TX 78703	
8	PURPOSE		
١	OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Transportation for staff to district.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
L	expenditure to benefit C/OI	H	
	Date	Payee name	
	01/10/2024	Wall Street Journal	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$8.66	1211 Avenue of the Americas	
		New York , NY 10036	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Online newspaper subscription.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	П	
	Date	Payee name	
	02/07/2024	Wall Street Journal	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$42.21	1211 Avenue of the Americas	
		New York , NY 10036	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Online newspaper subscription.	
	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

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
_	Sch: 106/113 Rpt:	Friends of Brandon Creighton	00058241
4	Date	5 Payee name	
	03/06/2024	Wall Street Journal	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$42.21	1211 Avenue of the Americas	
		New York , NY 10036	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	emice everneda/remai Expense	outside of Texas. Complete Schedule T.
	2/11/2/10/11/2/12		TX, officeholder living expense
		Online newsp	aper subscription.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	04/03/2024	Wall Street Journal	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$42.21	1211 Avenue of the Americas	
	Φ42.21	1211 Avenue of the Americas	
		New York , NY 10036	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overficad/Nertial Experise	outside of Texas. Complete Schedule T.
			TX, officeholder living expense
		Online newsp	aper subscription.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/01/2024	Wall Street Journal	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$42.21	1211 Avenue of the Americas	
	Ψ-2.21	IZII / Worldo of the / whorload	
		New York , NY 10036	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overficad/Nertial Experise	outside of Texas. Complete Schedule T.
	LXI LINDITORL		TX, officeholder living expense
		Online newsp	aper subscription.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experiorale to beliefft C/OI	1	
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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 Cabadula E4	<u> </u>	rc)
_	Total pages Schedule F1: Sch: 107/113 Rpt:	2 FILER NAME Friends of Brandon Creighton 3 Filer ID (Ethics Commission File 00058241	15)
4	Date	5 Payee name	
	05/29/2024	Wall Street Journal	
6	Amount (\$) \$42.21	7 Payee address; City; State; Zip Code 1211 Avenue of the Americas	
		New York , NY 10036	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Online newspaper subscription.	
		Ss iistopapoi susseiipiisiii	
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
Г	Date	Payee name	
	06/26/2024	Wall Street Journal	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$42.21	1211 Avenue of the Americas	
	DUDD00-	New York , NY 10036	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Online newspaper subscription.	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	06/24/2024	Walmart	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$900.00	1407 N Loop 336 W	
		Conroe, TX 77304	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Supplies for The Woodlands office.	
		Supplies for the woodiands office.	
	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 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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
Ļ	=:. =		I
1	Total pages Schedule F1: Sch: 108/113 Rpt:	2 FILER NAME Friends of Brandon Creighton	3 Filer ID (Ethics Commission Filers) 00058241
4	Date	5 Payee name	
	01/30/2024	Walmart	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$121.89	1407 N Loop 336 W	
		Conroe, TX 77304	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		outside of Texas. Complete Schedule T.
	LAFLINDITORE		, TX, officeholder living expense
		Supplies for A	Austin office.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experience to benefit 6/01		
	Date	Payee name	
	03/26/2024	Walmart	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$120.07	1407 N Loop 336 W	
		Conroe, TX 77304	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	
	EXPENDITURE	Onice Overnedd/Nerital Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense
		Supplies for A	
		Cupplies for /	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	•	
H	Date	Payee name	
	05/15/2024	Walmart	
-	Amount (\$)	Payee address; City; State; Zip Code	
	\$147.24	1407 N Loop 336 W	
	φ±41.24	7401 14 Foob 220 M	
		Conroe, TX 77304	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	· · · · · · · · · · · · · · · · · · ·	outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin	, TX, officeholder living expense
		Supplies for ¹	The Woodlands office.
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
L	expenditure to benefit C/OI	1 	

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		ages/Contract Labor	Travel Out of Dis OTHER (enter a	trict category not listed above)
<u> </u>	Tatalana Oliver			·	S 511 15	(Fabina Carrosteria Ett.)
1	1 0			3	3 Filer ID	(Ethics Commission Filers)
	Sch: 109/113 Rpt:	Friends of Brandon Creighton			00058241	
4	Date	Payee name				
L	05/30/2024	Walmart				
6	Amount (\$)	Payee address; City; State;	; Zip Cod	le		
	\$35.22	1407 N Loop 336 W				
		Conroe, TX 77304				
8	PURPOSE	Category (See Categories listed at the top of this sch	edule)	(b) Description		
	OF	Office Overhead/Rental Expense	Julia		ıtside of Texas. Com	plete Schedule T.
	EXPENDITURE	•		Check if Austin, T	TX, officeholder living	expense
				Supplies for Th	ne Woodlands	office.
L						
9	Complete ONLY if direct	andidate/Officeholder name C	Office soug	ht	Office he	eld
	expenditure to benefit C/O					
	Date	Payee name				
	06/11/2024	Walmart				
	Amount (\$)	Payee address; City; State;	; Zip Cod	le		
	\$32.42	1407 N Loop 336 W				
		Conroe, TX 77304				
	PURPOSE	Category (See Categories listed at the top of this scho	edule)	(b) Description		
	OF EXPENDITURE	Office Overhead/Rental Expense		ш	itside of Texas. Com	
					TX, officeholder living	
				Supplies for Th	ie woodiands	onice.
_	Complete ONLY if direct	andidate/Officeholder name	Office cours	ıht	Office he	ald
	Complete ONLY if direct expenditure to benefit C/OH	andidate/Officeholder name C	Office soug	Ji it	Onice ne	au
_	Data					
	Date	Payee name				
	05/14/2024	Waterway Square Garage				
	Amount (\$)		; Zip Coo	le		
	\$6.00	1505 lake robbins dr				
L		the woodlands , TX 77380				
	PURPOSE	Category (See Categories listed at the top of this sch	edule)	(b) Description		
	OF EXPENDITURE	Travel In District			itside of Texas. Com	
					TX, officeholder living	•
				Parking for offi	cenoluer mee	ung.
	Complete ONLY if direct	andidate/Officeholder name	Office cours	ıht	Office he	ald
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name C	Office soug	JI IL	Office ne	au
	•					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense 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	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: 110/113 Rpt:	Friends of Brandon Creighton 00058241
4	Date	5 Payee name
	01/17/2024	Willie G's
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$161.31	1640 W Loop S
		Houston, TX 77027
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.
		wiceting to discuss officeriolaen campaign issues.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/08/2024	Willie G's
	Amount (\$)	Payee address; City; State; Zip Code
	\$117.43	1640 W Loop S
	Ψ111.40	1040 W 200p 0
		Houston, TX 77027
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Pouso namo
	03/11/2024	Payee name Willie G's
	Amount (\$) \$52.76	Payee address; City; State; Zip Code 1640 W Loop S
	φ52.70	1040 W Loop 3
		Harrison TV 77007
		Houston, TX 77027
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Reverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting to discuss officeholder/ campaign issues.
		, and the second
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		above)
1	Total nagge Schodule F1:		ssion Filare
Ľ	Total pages Schedule F1: Sch: 111/113 Rpt:	Friends of Brandon Creighton 3 Filer ID (Ethics Continue) 00058241	פפוטוו רוופוט)
4	Date	5 Payee name	
	03/13/2024	Wilson, Erin	
6	Amount (\$) \$203.68	7 Payee address; City; State; Zip Code 2611 Westover Lane	
		Austin , TX 78703	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Mileage reimbursement for 304 miles @ 9 mile not reimbursed by the state.	\$0.67 per
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
9	expenditure to benefit C/OI		
	Date	Payee name	
	05/29/2024	Wilson, Erin	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$111.22	2611 Westover Lane	
		Austin , TX 78703	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Mileage reimbursement for 166 miles @ 9	\$ 67 ner
		mile not reimbursed at state expense.	φ.σ7 pci
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	06/13/2024	Wilson, Erin	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$289.44	2611 Westover Lane	
		Austin , TX 78703	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Mileage reimbursement for 432 miles @ 3	\$ 67 ner
		mile not reimbursed at state expense.	ψ.01 μ c i
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)								
	Sch: 112/113 Rpt:	Friends of Brandon Creighton 00058241								
4	Date	5 Payee name								
	02/12/2024	Woodforest Harvest Market								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$12.99	791 Fish Creek Throughfare								
		Montgomery , TX 77316								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.								
		Check if Austin, TX, officeholder living expense Meeting to discuss officeholder/ campaign issues.								
		meeting to discuss officerioties, campaign issues.								
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OH									
	Date	Payee name								
	03/26/2024	Woodlands Marriott								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$25.01	1601 Lake Robbins Dr								
		The Woodlands , TX 77380								
PURPOSE		(a) Category (See Categories listed at the top of this schedule) (b) Description								
OF EXPENDITURE		Travel In District Check if travel outside of Texas. Complete Schedule T.								
		Check if Austin, TX, officeholder living expense Parking for officeholder meeting.								
		r arking for officerrolaer meeting.								
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OI									
	Date	Payee name								
	03/26/2024	Woodlands Marriott								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$58.00	1601 Lake Robbins Dr								
	Ψ30.00	1001 Lake Nobbins Di								
		The Woodlands , TX 77380								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.								
		Check if Austin, TX, officeholder living expense staff meal while attending Montgomery County's food								
		bank gala.								
_	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

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		nittee	Food/Beverage E Gift/Awards/Mem Legal Services The Instruction			Expense Wages/	Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed abov	re)		
1	Total pages Schedule F1: Sch: 113/113 Rpt:	ı	2 FILER NAME Friends of Brandon Creighton							Filer ID 00058241	(Ethics Commission	n Filers)		
Ļ	Date									00030241				
"	05/06/2024	5 Payee name Woodson Local Tap												
6	Amount (\$)	7 Payee address; City; State; Zip Code												
	\$195.65	l	2330 Farm to Market rd 1488											
		С	Conroe, TX 77384											
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description												
	EXPENDITURE	F	1 dod/Beverage Expense							outside of Texas. Complete Schedule T. TX, officeholder living expense				
								_			der/ campaign is	sues.		
9	Complete ONLY if direct expenditure to benefit C/O		ndidate/Offi	ceholder nam	ie	Office sou	ught			Office he	eld			