CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete	e this form.	Filer ID (Ethics Commis 00086012	sion Filers)	2 Total pages file	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	IRST		MI	OFFICE U	SE ONLY
NAME	Mr. V	Vesley W.			Date Received	
					ELECTRONICA	LLY FILED
	NICKNAME L	 .AST		SUFFIX	 07/11/2024	
		/irdell		SUFFIX	0.711,202	
	vves	/iiueii				
4 CANDIDATE /	ADDRESS / PO BOX; APT / S	SUITE #; CITY	Υ;	ZIP CODE	Date Hand-delivered or I	Date Postmarked
OFFICEHOLDER MAILING	PO Box 147					т
ADDRESS					Receipt #	Amount
Change of Address	Brady, TX 76825				Date Processed	
🖰					Date Processed	
					Date Imaged	
					Date imaged	
5 CAMPAIGN	MS/MRS/MR F	IRST		MI	<u>I</u>	
TREASURER		ack		••••		
NAME		ack				
	ALIO(ALANE					
		AST		SUFFIX		
	L D	uBose				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BO	OX PLEASE);	APT	/ SUITE #; CITY;	STAT	TE; ZIP CODE
ADDRESS	PO Box 178					
(Residence or Business)						
	Leakey, TX 78873					
7 CAMPAICNI	ADEA CODE DUONE	NUMBER E	VTENCION			
7 CAMPAIGN TREASURER		NUMBER E	XTENSION			
PHONE	(830) 279-4603					
8 REPORT						
TYPE	January 15	30th day before	election \square	Runoff	15th day after cam	naign treasurer
		cour day porcio	5.55a.5		appointment (office	
	X July 15	8th day before e		Exceeded modified	Final Report (Attac	h C/OH-FR)
				reporting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	02/29/2024	TH	ROUGH	06/30/202	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	Pri	imary	Runoff	Other	
	11/05/2024	χGe	eneral	Special		
				ш.		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
III OFFICE	OFFICE HELD (II ally)			State Represent		
				State Represent	dive District 33	
		GO T	O PAGE 2			
I						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 74

13 C / OH NAME	Virdell, Wesley W. (M	r.)	14 Filer ID (1 00086012	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditor. These expenditures may have been made without I officeholders are required to report this information.	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION TOTALS				
	5)	\$ 46,000.50		
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$ 0.00	
		\$ 81,277.32		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 22,420.49
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
			Wesley W. Virdell	
		Signature of	f Candidate or Officehold	der
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of offi	cer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH COVER SHEET PG 3 3 of 74 B FILER NAME Virdell, Wesley W. (Mr.) O SCHEDULE SUBTOTALS

CHEDULI	ME esley W. (Mr.) E SUBTOTALS SCHEDULE	19 Filer ID 00086012	(Eth	nics Commission Filers)
CHEDULI	E SUBTOTALS	00086012		
AME OF		•		
	SCHEDULE		I	CURTOTAL AMOUNT
X				SUBTOTAL AMOUNT
	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	46,000.50
	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
	SCHEDULE E: LOANS		\$	
X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	5	\$	81,277.32
	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	
		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE E: LOANS SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS TO SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL EXP	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE E: LOANS SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE E: LOANS SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED

	MONET	ARY POLITICAL CONT		SCHEDULE A1			
	The Instru	ction Guide explains how to cor	mplete this forr	n.	1	Total pages Schedule A1: Sch: 1/19 Rpt: 4/74	
2	FILER NAME Virdell, Wesl	ey W. (Mr.)			3	Filer ID (Ethics Commission 00086012	n Filers)
4	Date 06/17/2024	 5 Full name of contributor out-out-out-out-out-out-out-out-out-out-			7	Amount of Contribution (\$)	\$100.00
		Bandera, TX 78003					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions Self	5)		
	Date 05/17/2024	Full name of contributor out-o Allan, Gratia Contributor address; City; State; Zip 0	of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
		Bandera, TX 78003			_		
	Principal occu Chiropractor	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date O4/17/2024 Full name of contributor out-of-state PAC (ID#:) Allan, Gratia Contributor address; City; State; Zip Code Bandera, TX 78003					Amount of Contribution (\$)	\$100.00
	Principal occu Chiropractor	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
Date 03/17/2024		Allan, Gratia	of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Chiropractor	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 03/08/2024	Bill, Eisel	of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
			·				

	MONEI	ARY POLITICAL (SCHEDULE A1		
	The Instruc	ction Guide explains how	to complete this fo	orm.	1 Total pages Schedule A1: Sch: 2/19 Rpt: 5/74
2	FILER NAME Virdell, Wesl	ey W. (Mr.)			3 Filer ID (Ethics Commission Filers) 00086012
4	Date 02/29/2024	5 Full name of contributorClay IV, George6 Contributor address; City; St	out-of-state PAC (ID#:)	7 Amount of Contribution (\$) \$2,500.00
8	Principal occu	Wichita Falls, TX 76302 pation / Job title (See Instructions	s)	9 Employer (See Instructions	<u> </u> :)
	Health Provi	der		High Plains Health Prov	ider
	Date 03/02/2024	Full name of contributor Clifton, Broughton Contributor address; City; Si	out-of-state PAC (ID#:)	Amount of Contribution (\$) \$1,000.00
		Houston, TX 77269			
	Principal occu Sales	pation / Job title (See Instructions	;)	Employer (See Instructions Bop products	;)
	Date 03/08/2024	Full name of contributor Cody, Vasut Contributor address; City; Si	out-of-state PAC (ID#:_)	Amount of Contribution (\$) \$100.00
		Angleton, TX 77516			
	•	pation / Job title (See Instructions	5)	Employer (See Instructions	s)
	State Repres	sentative		State of Texas	
	Date 06/16/2024	Full name of contributor Curtis, Counts Contributor address; City; Si Brady, TX 76825	out-of-state PAC (ID#:		Amount of Contribution (\$) \$25.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions USDHS	5)
	Date 05/16/2024	Full name of contributor Curtis, Counts Contributor address; City; Si Brady, TX 76825	out-of-state PAC (ID#:_)	Amount of Contribution (\$) \$25.00
	Principal occu Finance/Adm	pation / Job title (See Instructions nin.	s)	Employer (See Instructions USDHS)

	MONEI	ARY POLITICAL CO	MIRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to	complete this for	rm.	1	Total pages Schedule A1: Sch: 3/19 Rpt: 6/74	
2	FILER NAME Virdell, Wesl	ey W. (Mr.)			3	Filer ID (Ethics Commission 00086012	n Filers)
4	Date 04/16/2024	 5 Full name of contributor Curtis, Counts 6 Contributor address; City; State 	out-of-state PAC (ID#: Zip Code		7	Amount of Contribution (\$)	\$25.00
8	Principal occu Finance/Adn	Brady, TX 76825 pation / Job title (See Instructions) nin.	9	Employer (See Instructions USDHS	<u> </u> ;)		
	Date 03/16/2024	Full name of contributor Curtis, Counts Contributor address; City; State Brady, TX 76825	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Finance/Adn	pation / Job title (See Instructions) nin.		Employer (See Instructions USDHS	5)		
	Date 03/01/2024	Full name of contributor Dale, Dittmar Contributor address; City; State	out-of-state PAC (ID#: Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu	Fredericksburg, TX 78624 pation / Job title (See Instructions)		Employer (See Instructions) 5)		
_	Date 02/29/2024	Full name of contributor Dale, Henson Contributor address; City; State League City, TX 77573	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 02/29/2024	Full name of contributor Daniel, Allford Contributor address; City; State Houston, TX 77042	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/19 Rpt: 7/74	
2	FILER NAME Virdell, Wesl			3	Filer ID (Ethics Commission 00086012	n Filers)
4	Date 06/24/2024	 Full name of contributor out-of-state PAC (ID#:_Douglas, Peoples Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00
		Horseshoe Bay, TX 78657				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions retired	5)		
	Date 03/01/2024	Full name of contributor out-of-state PAC (ID#:_ Dyer, Don Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
	Principal occu Entrepreneu	Austin, TX 78731 pation / Job title (See Instructions)	Employer (See Instructions Self	<u> </u> 5)		
	Date 02/29/2024	Full name of contributor out-of-state PAC (ID#:_ George, Clay IV Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	wichita Falls, TX 76302 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Health Provi	der	High Plains Health Prov	ide	r	
	Date 03/04/2024	Full name of contributor out-of-state PAC (ID#:_ Gerald, Dietz Contributor address; City; State; Zip Code Taylor, TX 76574			Amount of Contribution (\$)	\$50.00
	Principal occu Construction	pation / Job title (See Instructions)	Employer (See Instructions Self	5)		
	Date 06/03/2024	Full name of contributor out-of-state PAC (ID#:_ Glenn, Emerson Contributor address; City; State; Zip Code Mason, TX 76856			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions Conference of State Bar		Supervisors	

	MONEI	ONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruc	ction Guide explains how to cor	nplete this for	m.	1	Total pages Schedule A1: Sch: 5/19 Rpt: 8/74		
2	FILER NAME Virdell, Wesl	ey W. (Mr.)			3	Filer ID (Ethics Commission 00086012	on Filers)	
4	Date 05/03/2024	Glenn, Emerson 6 Contributor address; City; State; Zip 0	f-state PAC (ID#:)	7	Amount of Contribution (\$)	\$50.00	
_	Dringing con	Mason, TX 76856	lo.	Employer (Coo Instructions	<u>, </u>			
ŏ		pation / Job title (See Instructions) tegist / Information Architect	l ⁹	Employer (See Instructions Conference of State Bar		Sunanisors		
	Date 04/03/2024		f-state PAC (ID#:)	lik .	Amount of Contribution (\$)	\$50.00	
		Mason, TX 76856						
		pation / Job title (See Instructions)		Employer (See Instructions				
	Content Stra	tegist / Information Architect		Conference of State Bar	nk S	Supervisors		
	Date Full name of contributor out-of-state PAC (ID 03/03/2024 Glenn, Emerson Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00	
	Delegalent	Mason, TX 76856		Facalaria (Octobrativa	<u></u>			
	•	pation / Job title (See Instructions) tegist / Information Architect		Employer (See Instructions Conference of State Bar		Supervisors		
	Date 02/29/2024	Full name of contributor out-o Henson, Dale Contributor address; City; State; Zip C	f-state PAC (ID#: Code			Amount of Contribution (\$)	\$2,500.00	
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)			
	Date 02/29/2024	Full name of contributor out-o Honaski, Maria Contributor address; City; State; Zip C	f-state PAC (ID#:			Amount of Contribution (\$)	\$250.00	
	Principal occu Healthcare	pation / Job title (See Instructions)		Employer (See Instructions Aegis	5)			
			•					

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE	■ A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/19 Rpt: 9/74	
2	FILER NAME Virdell, Wesl			3	Filer ID (Ethics Commission 00086012	Filers)
4	Date 06/09/2024	 Full name of contributor out-of-state PAC (ID#:_ Hugh, Campbell Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$25.00
_		Kerrville, TX 78028	I			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions Hd)		
	Date 05/06/2024	Full name of contributor out-of-state PAC (ID#:_ Hugh, Campbell Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Kerrville, TX 78028 upation / Job title (See Instructions)	Employer (See Instructions)		
	Paint	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Hd	,		
	Date 04/09/2024	Full name of contributor out-of-state PAC (ID#:_ Hugh, Campbell Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Kerrville, TX 78028				
	Principal occu Paint	pation / Job title (See Instructions)	Employer (See Instructions Hd)		
	Date 03/09/2024	Full name of contributor out-of-state PAC (ID#:_ Hugh, Campbell Contributor address; City; State; Zip Code Kerrville, TX 78028			Amount of Contribution (\$)	\$25.00
	Principal occu Paint	pation / Job title (See Instructions)	Employer (See Instructions Hd)		
	Date 06/19/2024	Full name of contributor out-of-state PAC (ID#:_ Ingrid, Trimm Contributor address; City; State; Zip Code North Richland Hills, TX 76182			Amount of Contribution (\$)	\$5.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions None)		

	MONEI	ARY POLITICAL CONTRIB	SCHEDULE A1	SCHEDULE A1		
	The Instru	ction Guide explains how to complete	e this form.	1 Total pages Schedule A1: Sch: 7/19 Rpt: 10/74		
2	FILER NAME Virdell, Wesl	ey W. (Mr.)		3 Filer ID (Ethics Commission Filers) 00086012	1	
4	Date 05/19/2024	 Full name of contributor	PAC (ID#:)) ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	5.00	
8	Principal occu Disabled	North Richland Hills, TX 76182 pation / Job title (See Instructions)	9 Employer (See Instruction None	tions)		
	Date 04/19/2024	Full name of contributor out-of-state P Ingrid, Trimm Contributor address; City; State; Zip Code North Richland Hills, TX 76182	PAC (ID#:)	Amount of Contribution (\$) \$5	5.00	
	Principal occu Disabled	pation / Job title (See Instructions)	Employer (See Instruction None	tions)		
	Date 03/19/2024	Full name of contributor out-of-state P Ingrid, Trimm Contributor address; City; State; Zip Code	PAC (ID#:)	, and and or gonalization (4)	5.00	
		North Richland Hills, TX 76182				
	Principal occu Disabled	pation / Job title (See Instructions)	Employer (See Instruction None	tions)		
	Date 06/23/2024	Full name of contributor out-of-state P James, Caldwell III Contributor address; City; State; Zip Code Westland Mi, MI 48185	PAC (ID#:)) Amount of Contribution (\$) \$5	5.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction Climate Engineering	tions) g and Operator One HVACR		
	Date 05/23/2024	Full name of contributor out-of-state P James, Caldwell III Contributor address; City; State; Zip Code Westland Mi, MI 48185	PAC (ID#:)) Amount of Contribution (\$) \$5	5.00	
		pation / Job title (See Instructions) Refrigeration	Employer (See Instruction Climate Engineering	ctions) g and Operator One HVACR		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDULE	A1
	The Instru	ction Guide explains how	to complete this fo	rm.		1 Total pages Schedule A1: Sch: 8/19 Rpt: 11/74	
2	FILER NAME Virdell, Wesl					3 Filer ID (Ethics Commission 00086012	Filers)
4	Date 04/23/2024	Full name of contributor James, Caldwell III Contributor address; City; Sta	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	\$5.00
_	D: : 1	Westland Mi, MI 48185	1.				
8		pation / Job title (See Instructions) Refrigeration		Employer (So Climate End) I Operator One HVACR	
	Date 03/23/2024	Full name of contributor James, Caldwell III Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code	Omnate En)	Amount of Contribution (\$)	\$5.00
		Westland Mi, MI 48185					
		pation / Job title (See Instructions)			ee Instructions)		
	Commercial	Refrigeration		Climate En	gineering and	I Operator One HVACR	
	Date Full name of contributor out-of-state PAC (06/18/2024 Jennifer, Sandidge Contributor address; City; State; Zip Code		out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$50.00
		Bandera, TX 78003					
	Principal occu	pation / Job title (See Instructions)		Employer (Se	ee Instructions)		
	Date 05/18/2024	Full name of contributor Jennifer, Sandidge Contributor address; City; Sta Bandera, TX 78003	out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$50.00
	Principal occu life coach	pation / Job title (See Instructions)		Employer (Se	ee Instructions)		
	Date 04/18/2024	Full name of contributor Jennifer, Sandidge Contributor address; City; Sta Bandera, TX 78003	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu life coach	pation / Job title (See Instructions)		Employer (Se	ee Instructions)		

	MONEI	IONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 9/19 Rpt: 12/74	
2	FILER NAME Virdell, Wesl	ey W. (Mr.)				3	Filer ID (Ethics Commission 00086012	ı Filers)
4	Date 03/18/2024	5 Full name of contributor Jennifer, Sandidge6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu life coach	Bandera, TX 78003 pation / Job title (See Instructions	s)	9	Employer (See Instructions self) 5)		
	Date 05/31/2024	Full name of contributor Jerry, Johnson Jr Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	Principal occu Accountant	Austin, TX 78748 pation / Job title (See Instructions	s)		Employer (See Instructions Self Employed	<u> </u> 5)		
	Date 04/03/2024	Full name of contributor Jerry, Zabbia Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
		The Colony, TX 75056						
	Driver	pation / Job title (See Instructions	5)		Employer (See Instructions Star Papa	5)		
	Date 03/03/2024	Full name of contributor Jerry, Zabbia Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	Principal occu Driver	The Colony, TX 75056 pation / Job title (See Instructions	s)		Employer (See Instructions Star Papa	<u> </u> 5)		
	Date 05/06/2024	Full name of contributor John, Stiles Contributor address; City; S DALLAS, TX 75219	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	Principal occu Truck driver	pation / Job title (See Instructions	5)		Employer (See Instructions Crete Carriers	5)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	E A1	
	The Instruc	ction Guide explains how to complete this	s for	m.	1	Total pages Schedule A1: Sch: 10/19 Rpt: 13/74	
2	FILER NAME Virdell, Wesl	ey W. (Mr.)			3	Filer ID (Ethics Commission 00086012	n Filers)
4	Date 04/08/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
8	Principal occu Businessma	Salado, TX 76571 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> s)		
	Date 04/21/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu Economist	Kerrville, TX 78028 pation / Job title (See Instructions)		Employer (See Instructions DoD	<u> </u> s)		
	Date 03/21/2024	Full name of contributor out-of-state PAC (IE Kevin, Buck Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$25.00
		Kerrville, TX 78028 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 06/15/2024	Contributor address; City; State; Zip Code		DoD		Amount of Contribution (\$)	\$25.00
	Principal occu	Hunt, TX 78024 pation / Job title (See Instructions)		Employer (See Instructions retired	<u> </u>		
	Date 06/16/2024	Full name of contributor out-of-state PAC (IE Marina, A Tietjen Contributor address; City; State; Zip Code Houston, TX 77065)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Uspto	<u>L</u> s)		
			•				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruc	ction Guide explains how t	to complete this for	n.	1	Total pages Schedule A1: Sch: 11/19 Rpt: 14/74	
2	FILER NAME Virdell, Wesl	ey W. (Mr.)			3	Filer ID (Ethics Commission 00086012	on Filers)
4	Date 05/16/2024	5 Full name of contributor [Marina, A Tietjen6 Contributor address; City; State	out-of-state PAC (ID#: te; Zip Code)	7	Amount of Contribution (\$)	\$10.00
8	Dringinal occu	Houston, TX 77065 pation / Job title (See Instructions)	0	Employer (See Instructions			
0	Patent Exam		9	Uspto Uspto	')		
	Date 04/16/2024	Full name of contributor [Marina, A Tietjen Contributor address; City; Stat)		Amount of Contribution (\$)	\$10.00
	Principal occu	Houston, TX 77065 pation / Job title (See Instructions)	1	Employer (See Instructions			
	Patent Exam			Uspto	')		
	Date 03/16/2024	Full name of contributor [Marina, A Tietjen Contributor address; City; Stat	out-of-state PAC (ID#:te; Zip Code)		Amount of Contribution (\$)	\$10.00
		Houston, TX 77065					
	Principal occu Patent Exam	pation / Job title (See Instructions) niner		Employer (See Instructions Uspto	i)		
	Date 03/01/2024	Full name of contributor Olcott, Michael Contributor address; City; Stat Ft Worth, TX 76126	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5,000.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired)		
	Date 04/18/2024	Full name of contributor Pat, Hoffman Contributor address; City; Stat Llano, TX 78643-9522	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
			,				

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains hov	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 12/19 Rpt: 15/74	
2	FILER NAME Virdell, Wesl	ey W. (Mr.)				3	Filer ID (Ethics Commission 00086012	n Filers)
4	Date 03/18/2024	5 Full name of contributor Pat, Hoffman6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu Retired	Llano, TX 78643-9522 pation / Job title (See Instructions	5)	9	Employer (See Instructions Retired	<u> </u> s)		
	Date 02/29/2024	Full name of contributor Pat, Young Contributor address; City; S)		Amount of Contribution (\$)	\$100.00
	Principal occu	Kerrville, TX 78028 pation / Job title (See Instructions	s)		Employer (See Instructions	<u> </u> s)		
	Date 05/25/2024	Full name of contributor Patricia, Young Contributor address; City; S)	-	Amount of Contribution (\$)	\$500.00
		Kerrville, TX 78028 pation / Job title (See Instructions	s)		Employer (See Instructions	<u> </u> s)		
	Date 04/04/2024	Full name of contributor Ranch radio Ilc Contributor address; City; S			Retired		Amount of Contribution (\$)	\$25.50
	Principal occu	Kerrville, TX 78028 pation / Job title (See Instructions	5)		Employer (See Instructions	<u> </u> s)		
	Date 06/21/2024	Full name of contributor Raul, Reyes Contributor address; City; S Castroville, TX 78009	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions	\$)		Employer (See Instructions Square	<u>(</u>		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	E A1	
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 13/19 Rpt: 16/74	
2	FILER NAME Virdell, Wesl			3	Filer ID (Ethics Commission 00086012	n Filers)
4	Date 06/22/2024	 Full name of contributor out-of-state PAC (ID#:_Richard, Rinehart Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00
		Pflugerville, TX 78660				
8	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions retired)		
	Date 05/27/2024	Full name of contributor out-of-state PAC (ID#:_ Rick, Rinehart Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Pflugerville, TX 78660 pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 05/10/2024	Full name of contributor out-of-state PAC (ID#:_Ronald, Bartell Contributor address; City; State; Zip Code Havre de Grace, MD 21078-3243			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 06/06/2024	Full name of contributor out-of-state PAC (ID#:_ Ruth, Cremin Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Ingram, TX 78025 spation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 05/03/2024	Full name of contributor out-of-state PAC (ID#:_ Ruth, Cremin Contributor address; City; State; Zip Code Ingram, TX 78025)		Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDUI	E A1	
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 14/19 Rpt: 17/74	
2	FILER NAME Virdell, Wesl			3	Filer ID (Ethics Commission 00086012	on Filers)
4	Date 04/03/2024	 Full name of contributor out-of-state PAC (ID#:_ Ruth, Cremin Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$25.00
_		Ingram, TX 78025	I			
8	Retired	ipation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 03/10/2024	Full name of contributor out-of-state PAC (ID#:_ Ruth, Cremin Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Ingram, TX 78025 upation / Job title (See Instructions)	Employer (See Instructions)		
	Retired		Retired			
	Date 05/16/2024	Full name of contributor out-of-state PAC (ID#:_ Saulsbury, Mark Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$3,333.00
		Odessa, TX 79768				
	Principal occu Senior Vice	pation / Job title (See Instructions) President	Employer (See Instructions Saulsbury)		
	Date 05/16/2024	Full name of contributor out-of-state PAC (ID#:_ Saulsbury, Matthew Contributor address; City; State; Zip Code Odessa, TX 79768			Amount of Contribution (\$)	\$3,334.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 06/20/2024	Full name of contributor out-of-state PAC (ID#:_Scott, Martin Contributor address; City; State; Zip Code Hinckley, MN 55037			Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions retired)		

	MONET	ARY POLITICAL CONTRIBUT	ION	IS		SCHEDULE A1
	The Instru	ction Guide explains how to complete thi	s for	m.	1	Total pages Schedule A1: Sch: 15/19 Rpt: 18/74
2	FILER NAME Virdell, Wesl	ey W. (Mr.)			3	Filer ID (Ethics Commission Filers) 00086012
4	Date 03/23/2024	 5 Full name of contributor out-of-state PAC (II Shane, Mills 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$) \$50.00
_	Deire die et e e e	Georgetown, TX 78628	-10	Faralaga (Caralaga tagata at	$\overline{\Gamma}$	
8	Principal occu Physician	pation / Job title (See Instructions)	9	Employer (See Instructions Baylor Scott and White	5)	
	Date 03/05/2024	Full name of contributor out-of-state PAC (II Susan, Bell Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)	
	Retired			Retired		
	Date 04/03/2024	Full name of contributor out-of-state PAC (II Texas for Lawsuit Reform PAC Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$) \$10,000.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Date 03/06/2024	Full name of contributor out-of-state PAC (II Tracey, Kiesling Contributor address; City; State; Zip Code Brady, TX 76825)		Amount of Contribution (\$) \$1,000.00
	Principal occu Farm/ranch/l	pation / Job title (See Instructions) nunting		Employer (See Instructions Self	5)	
	Date 03/19/2024	Full name of contributor out-of-state PAC (II Virginia, Hallford Contributor address; City; State; Zip Code Georgetown, TX 78633				Amount of Contribution (\$) \$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
			1			

MONETARY POLITICAL CONTRIBUTIONS				SCHEDUI	LE A1	
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 16/19 Rpt: 19/74	
2	FILER NAME Virdell, Wesl			3	Filer ID (Ethics Commission 00086012	on Filers)
4	Date 06/11/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
		Mountain Home, TX 78058				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions Retired)		
	Date 05/11/2024	Full name of contributor out-of-state PAC (ID#:_ Wayne & Betty, Musgrove Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Mountain Home, TX 78058 spation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 04/11/2024	Full name of contributor out-of-state PAC (ID#:_ Wayne & Betty, Musgrove Contributor address; City; State; Zip Code Mountain Home, TX 78058			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 03/11/2024	Full name of contributor out-of-state PAC (ID#:_ Wayne & Betty, Musgrove Contributor address; City; State; Zip Code Mountain Home, TX 78058			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	ipation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 05/16/2024	Full name of contributor out-of-state PAC (ID#:_ Zugg, Cavin Contributor address; City; State; Zip Code Odessa, TX 79768			Amount of Contribution (\$)	\$3,333.00
	Principal occu Retired	ipation / Job title (See Instructions)	Employer (See Instructions Retired)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE	A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/19 Rpt: 20/74	
2	FILER NAME Virdell, Wesl			3	Filer ID (Ethics Commission 00086012	Filers)
4	Date 05/10/2024	 Full name of contributor out-of-state PAC (ID#:_dave, hesterman Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$5.00
_	Deignaignal	Buford, GA 30519	D. Frankrika (Co. Jacksonia na			
8	Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 06/19/2024	Full name of contributor out-of-state PAC (ID#:_glenda, stephens Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Pace, FL 32571 pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation / Job title (See Instructions)	retired)		
	Date 06/03/2024	Full name of contributor out-of-state PAC (ID#:_ glenda, stephens Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
		Pace, FL 32571				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 05/10/2024	Full name of contributor out-of-state PAC (ID#:_glenda, stephens Contributor address; City; State; Zip Code Pace, FL 32571			Amount of Contribution (\$)	\$5.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 06/06/2024	Full name of contributor out-of-state PAC (ID#:_karen, henderly Contributor address; City; State; Zip Code Immokalee, FL 34142			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions Retired)		

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 18/19 Rpt: 21/74	
2	FILER NAME Virdell, Wesl			3	Filer ID (Ethics Commission 00086012	Filers)
4	Date 06/19/2024	5 Full name of contributor out-of-state PAC (ID#:_kathy, craig 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$5.00
_		wolfforth, TX 29382	I			
8	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions retired)		
	Date 06/06/2024	Full name of contributor out-of-state PAC (ID#:_ matt, woolbright Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Deireitade	Colorado Springs, CO 80920	Faralassa (Ossalastassiisas			
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions self)		
	Date 06/04/2024	Full name of contributor out-of-state PAC (ID#:_michael, wayslik Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5.00
		tampa, FL 33618				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_susanna, wendlerr Contributor address; City; State; Zip Code West Des Moines, IA 50266			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_susanna, wendlerr Contributor address; City; State; Zip Code West Des Moines, IA 50266			Amount of Contribution (\$)	\$5.00
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions Retired)		

FARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
uction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 19/19 Rpt: 22/74
E sley W. (Mr.)		3 Filer ID (Ethics Commission Filers) 00086012
 Full name of contributor		7 Amount of Contribution (\$) \$5.00
West Des Moines, IA 50266	Employer (See Instructions	
upation / Job title (See Instructions)	Retired	5)
	sley W. (Mr.) 5 Full name of contributor out-of-state PAC (ID#: susanna, wendlerr 6 Contributor address; City; State; Zip Code	Sley W. (Mr.) 5 Full name of contributor out-of-state PAC (ID#:) susanna, wendlerr 6 Contributor address; City; State; Zip Code West Des Moines, IA 50266 upation / Job title (See Instructions) 9 Employer (See Instructions)

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/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: 1/52 Rpt: 23/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	02/29/2024	1-Stop Advertising & Printing
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$142.89	404 Junction Highway
		Kerrville, TX 78028
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
		Stickers - Endorsed by Trump.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	H · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	03/06/2024	5D Steakhouse
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.34	2132 Sidney Baker N
	!	
		Kerrville, TX 78028
	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
	!	Meal for campaign
	!	mod for outspany.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
_	Date	Payee name
	04/15/2024	7 Eleven
		1.2000
	Amount (\$) \$54.55	Payee address; City; State; Zip Code 16707 Nacogdoches St
	Φ04.00	10707 Nacoguoches St
	l	Vormille TV 70020
		Kerrville, TX 78028
	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
		Fuel
	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
Contributions/ Donations Made By Candidate/Officeholder/Political Con

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

	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: 2/52 Rpt: 24/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	06/12/2024	7 Eleven
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$64.91	16707 Nacogdoches St
		Kerrville, TX 78028
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
		Fuel
		1 401
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
	•	
	Date	Payee name
	06/18/2024	AT&T Cellular
	Amount (\$)	Payee address; City; State; Zip Code
	\$163.07	208 S. Akard St
		Dallas, TX 75202
	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
		Phone bill for campaign
		Thore bill for earripaign
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/29/2024	AX Media
	Amount (\$)	Payee address; City; State; Zip Code
	\$25,000.00	800 W 47th t
		Suite 200
		Kansas City, MO 64112
	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
		Medias placement in San antonio and districtwide
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 -Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials 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: 3/52 Rpt: 25/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	03/05/2024	Acapulco Mexican Restaurant
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$55.35	1718 Sidney Baker Street
		Kerrville, TX 78028
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
		Meal for campaign
		mear or earnpaign
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Dayso name
	03/02/2024	Payee name Airbnb
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$629.54	888 Brannan St
		San Francisco, CA 94103
	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
		Airbnb stay for campaign event
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	
	Date	Payee name
	04/23/2024	Allsups #102084
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.03	3480 Hwy 377 S
		Brownwood, TX 76801
	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 Fuel
		ruci
\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

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	/ - Il Committee	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services	Pollir xpense Printi	ng Expens ing Expens			Travel in District Travel Out of Di	
	Credit Card Payment		The Instruction Guid	de explains how t	o compl	ete this form.			
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 4/52 Rpt: 26/74	Virdell, We	esley W. (Mr.)					00086012	
4	Date	5 Payee name					<u> </u>		
	04/06/2024	Allsups #1							
_				Ot-t-: 7:-	01 -				
6	Amount (\$)	7 Payee addr	. ,	State; Zip	Code				
	\$74.75	910 Early I	BIVa						
		Early, TX 7	76802						
8	PURPOSE	(a) Category	See Categories listed at the	top of this schedule)	(b)	Description			
	OF EXPENDITURE	Travel Out		.,		Check if travel	outsi	ide of Texas. Com	plete Schedule T.
	EXPENDITORE					ш.	ı, TX	, officeholder living	g expense
						Fuel			
9	Complete ONLY if direct expenditure to benefit C/OH		ficeholder name	Office	sought			Office h	eld
	experialture to benefit C/Or	7							
	Date	Payee name	e						
	03/15/2024	Allsups #1	02332						
	Amount (\$)	Payee addr	ess; City;	State; Zip	Code				
	\$61.09	4002 Ridge		Otate, Zip	Oouc				
	Φ01.09	4002 Klug	emont Di						
		Abliene , T	X 79606						
	PURPOSE	(a) Category (See Categories listed at the	top of this schedule)	(b)	Description			
	OF EXPENDITURE	Travel Out	of District						plete Schedule T.
						Fuel Check if Austin	ı, TX,	, officeholder livin	g expense
						ruei			
				0.00				000 1	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ficeholder name	Office	sought			Office h	eld
	Date	Payee name	Э						
	04/06/2024	Allsups #1	02358						
	Amount (\$)	Payee addr	ess; City;	State; Zip	Code				
	\$48.32	9533 US F							
			•						
		Wall TV 7	6057						
		Wall, TX 7			-				
	PURPOSE OF		See Categories listed at the	top of this schedule)	(b)	Description			
	EXPENDITURE	Travel In D	District					, officeholder living	plete Schedule T.
						Fuel	, 17,	, omeenoider iiviii	у ехрепас
_	Complete ONLY if direct	Candidata/Of	ficoholdor nama	Office	cought			Office b	old
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						c iu		
F 0.1	me provided by Teyas E	thioc Commics	ion	M othice state	tv. 110				Version V// 1.0 d278aha0

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to com	nplete t	this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 5/52 Rpt: 27/74	Virdell, Wesley W. (Mr.)		00086012
4	Date	5 Payee name		
L	04/23/2024	Allsups 102207		
6	Amount (\$)	7 Payee address; City; State; Zip Code	le	
	\$62.05	501 e central		
		comanche, TX 76442		
8	PURPOSE OF	· · · · · · · · · · · · · · · · · · ·	(b) De	escription 7 Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel Out of District		Check if Austin, TX, officeholder living expense
			Fu	uel
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	ıht	Office held
L	experientare to benefit Great	'		
	Date	Payee name		
L	04/05/2024	Allsups 84		
	Amount (\$)	Payee address; City; State; Zip Code	le	
	\$59.82	3480 Hwy 377 S		
L		Brownwood, TX 76801		
	PURPOSE OF	2 (()) () () () () () () () ((b) De	escription
	EXPENDITURE	Travel Out of District	⊢	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Fu	uel
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
L	expenditure to benefit C/OI	1		
	Date	Payee name		
L	04/09/2024	Allsups		
	Amount (\$)	Payee address; City; State; Zip Code	le	
	\$58.71	3480 Hwy 377 S		
L		Brownwood, TX 76801		
	PURPOSE OF	, ,	(b) De	escription
	EXPENDITURE	Travel Out of District	H	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Fu	uel
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI	1		

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - I Committee	Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services	Polling E nse Printing E	xpense Expens			Travel in District Travel Out of Di	
	Credit Card Payment		The Instruction Guide	explains how to co	omple	ete this form.			
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 6/52 Rpt: 28/74	Virdell, We	sley W. (Mr.)					00086012	
4	Date	5 Payee name	<u>,</u>						
	03/30/2024	Alon - Brad							
_			<u> </u>	State: Zin C	odo				
6	Amount (\$) \$46.50	7 Payee addre		State; Zip C	oue				
	\$40.50	1800 Souti	n Bridge St						
		Brady, TX	76825						
8	PURPOSE	(a) Category (S	See Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Travel In D				=			plete Schedule T.
	ZA ZADITORZ					—	, TX,	, officeholder living	g expense
						Fuel			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ficeholder name	Office so	ught			Office h	eld
	experientare to benefit of or								
	Date	Payee name	9						
	03/30/2024	Amazon							
	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode				
	\$30.26	410 Terry	Ave N						
		Seattle, W	Δ 98109						
_	DUDDOGE				(1-)				
	PURPOSE OF		See Categories listed at the top		(a)	Description Check if travel	outci	ido of Toyas Com	nplete Schedule T.
	EXPENDITURE	Office Ove	rhead/Rental Expens	se				, officeholder livin	
						Book for 10th			
	Complete ONLY if direct	LCandidate/Of	ficeholder name	Office so	<u>l</u> uaht			Office h	eld
	expenditure to benefit C/O			000	g			000	o.u
_	Dete								
	Date	Payee name							
	03/30/2024	Amazon							
	Amount (\$)	Payee addre		State; Zip C	ode				
	\$32.46	410 Terry	Ave N						
		Seattle, W	A 98109						
	PURPOSE	(a) Category (s	See Categories listed at the top	of this schedule)	(b)	Description			
	OF		rhead/Rental Expens		` `		outsi	ide of Texas. Con	plete Schedule T.
	EXPENDITURE		•			_		, officeholder livin	g expense
						Tripod for vid	leo	filming	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held						eld			
	expenditure to benefit C/O	1							
Ec:	rms provided by Tayas F	thios Commiss	ion wasaw	ethics state ty	110				Version V// 1 0 d278aha0

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	/ - ıl Coı	mmittee	Gift/Awards/Memorial Legal Services	•		ages.	/Contract Labor		Travel Out of I OTHER (enter	District a category not listed ab	ove)
Ļ		-		The Instruction G	ulue explains	HOW TO COL	npie	ae uns iviili.	_		/=u · - ·	
1	Total pages Schedule F1:	2							3		(Ethics Commiss	ion ⊢ilers)
	Sch: 7/52 Rpt: 29/74		Virdell, Wes	sley W. (Mr.)						00086012	!	
4	Date	5	Payee name									
	06/30/2024		Anedot Inc									
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de					
	\$452.30		1340 Poydr	as Street								
			Suite 1770									
			New Orlean	s, LA 70112								
8	PURPOSE	(2)				1	(h)	Description				
١	OF	۱۳۶		ee Categories listed at Fundraising Ex		nedule)	(6)		outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE		Julicitation/	i unuraising Ex	pense			Check if Austin,				
								Payment prod	ces	sing fees		
9	Complete ONLY if direct		Candidate/Offi	ceholder name	(Office sou	ght			Office	held	
	expenditure to benefit C/O	 										
	Date		Payee name									
	03/16/2024		Austin Marr	iott North								
	Amount (\$)		Payee addre	ss; City;	State;	; Zip Co	de					
	\$175.93		2600 La Fro	ntera Blvd								
			Round Roc									
	PURPOSE OF	(a)		ee Categories listed at	the top of this sch	nedule)	(b)	Description				
	EXPENDITURE		Travel Out	of District				Check if travel of Check if Austin,			mplete Schedule T.	
								Hotel for cam			ng expense	
									.pu	.9,.,		
\vdash	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name	(Office sou	aht			Office	held	
	expenditure to benefit C/OI					50 504(٠.٠٠			2.1100		
H	Date		Payee name									
	02/29/2024		Axiom Strat	eaies								
_		\vdash			Ctoto	· Zin Ca	do					
	Amount (\$)		Payee addres		State	; Zip Co	ue					
	\$6,446.44		800 W 47th	St Ste 200								
			:									
			Kansas City	, MO 64112								
	PURPOSE OF	(a)		ee Categories listed at	the top of this sch	nedule)	(b)	Description				
	EXPENDITURE		Consulting	Expense				ш			omplete Schedule T.	
								Consulting ex				
								Consuming ex	,he	noc ioi cai	πραιζιτ	
	Complete ONLY if direct	Ц,	Candidate/Offi	ceholder name	(Office soug	aht			Office	held	
	expenditure to benefit C/O		Janualu/OIII	continuon nume		omoo sou(9111			Onice		

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 t	this form.
1	Total pages Schedule F1: Sch: 8/52 Rpt: 30/74	2 FILER NAME Virdell, Wesley W. (Mr.)	3 Filer ID (Ethics Commission Filers) 00086012
4	Date 03/01/2024	5 Payee name Axiom Strategies	
6	Amount (\$) \$14,844.55	7 Payee address; City; State; Zip Code 800 W 47th St Ste 200	
8	PURPOSE OF EXPENDITURE	Consulting Expense	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting for campaign.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 03/03/2024 Amount (\$)	Payee name Axiom Strategies Payee address; City; State; Zip Code	
	\$3,000.00	800 W 47th St Ste 200 Kansas City, MO 64112	
	PURPOSE OF EXPENDITURE	Consulting Expense	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 03/06/2024	Payee name Axiom Strategies	
	Amount (\$) \$1,680.00	Payee address; City; State; Zip Code 800 W 47th St Ste 200	
		Kansas City, MO 64112	
	PURPOSE OF EXPENDITURE	Consulting Expense	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living 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

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	The Instruction Guide explains how to complete	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 9/52 Rpt: 31/74	Virdell, Wesley W. (Mr.)	00086012
4	Date	5 Payee name	
	04/21/2024	Axiom Strategies	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$4,002.85	800 W 47th St Ste 200	
		Kansas City, MO 64112	
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. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Consulting for campaign
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Н	
	Date	Payee name	
	06/10/2024	Backporch Drafthouse	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$64.50	4214 Kell W Blvd	
		Whiticha Falls, TX 76309	
	PURPOSE OF	(considered and top or and considered)	Description
	EXPENDITURE	Food/Beverage Expense L	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			☐
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Н	
	Date	Payee name	
	06/12/2024	Backwoods BBQ	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$31.23	320 FM 2093	
		Fredericksburg, TX 78624	
	PURPOSE OF	·	Description
	EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Meal for campaign.
			. 0
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Н	

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)
_	Tatal manage Calculula E4.		C Files ID (Fabine Commission Filess)
1	Total pages Schedule F1: Sch: 10/52 Rpt: 32/74	Virdell, Wesley W. (Mr.)	3 Filer ID (Ethics Commission Filers) 00086012
4	Date	5 Payee name	
	03/29/2024	Bigs 102W	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$58.66	528 West Main Street	
		Fredericksburg, TX 78624	
Ļ			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Traver out of District	outside of Texas. Complete Schedule T.
			, TX, officeholder living expense
		Fuel	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	03/05/2024	Bills BBQ LLC	
	Amount (\$)		
	` '		
	\$30.85	1909 Junction Hwy	
		Kerrville, TX 78028	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE		, TX, officeholder living expense
		Travel meal f	or campaign
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
\vdash	D :		
	Date	Payee name	
	02/29/2024	Billy Gene's Restaurant	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$77.64	1489 Junction Hwy	
		Kerrville, TX 78028	
		In.	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	autoide of Taura Countries Co. 1.1. T
	EXPENDITURE	1 000/Develage Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense
		Fuel	, 1X, officerrolder living expense
		ruei	
			-
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L		1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services	Salaries/	Wages	/Contract Labor		OTHER (enter a	category not listed a	bove)
			The Instruction Guide e	explains how to co	omple	ete this form.	_			
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 11/52 Rpt: 33/74	Virdell, Wes	ley W. (Mr.)					00086012		
4	Date	5 Payee name								
	04/24/2024	Billy Gene's	Restaurant							
6	Amount (\$)	7 Payee addres	ss; City;	State; Zip C	ode					
	\$38.94	1489 Junctio	on Hwy							
		Kerrville, TX	78028							
8	PURPOSE	(a) Category (Se	ee Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE		age Expense			=		de of Texas. Com		
						—		officeholder living	j expense	
						Meal for cam	μαι	gii.		
_	Complete ONLY if direct	Candidata/Offi	ashaldar nama	Office co	uabt			Office he	-ld	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	cendider name	Office so	ugni			Office he	eiu	
	Data									
	Date	Payee name	o House							
	03/20/2024	Boerne Tac								
	Amount (\$)	Payee addres	•	State; Zip C	ode					
	\$15.97	470 S Main	St							
		#200								
		Fair Oaks, 1	TX 78006							
	PURPOSE	(a) Category (Se	ee Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Food/Bever	age Expense			=		de of Texas. Com		
						Meal for cam		officeholder living	j expense	
						wear for carri	μαι	gii		
	Complete ONLY if direct	Candidate/Offic	ceholder name	Office so	llaht			Office he	əld	
	expenditure to benefit C/O			200	ag			000 1		
	Date	Payee name								
	06/07/2024	Boerne Tac	n House							
	Amount (\$)	Payee addres		State; Zip C	odo					
	\$15.96	470 S Main	•	State, Zip C	oue					
	Ψ13.90		31							
		#200								
		Fair Oaks, 1	X 78006							
	PURPOSE OF		ee Categories listed at the top	of this schedule)	(b)	Description				
	EXPENDITURE	Food/Bever	age Expense					de of Texas. Com , officeholder living		
						Meal for cam			Схренос	
								3		
	Complete ONLY if direct	Candidate/Offic	ceholder name	Office so	<u>I</u> ught			Office he	eld	
	expenditure to benefit C/O				-					
Eol	rms provided by Tayas F	thics Commission	an Massara	othics state ty	IIC.				Version V// 1	0 d278aba0

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	Il 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: 12/52 Rpt: 34/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	03/26/2024	Boon Docks
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$27.06	2027 S Bridge St
		Brady, TX 76825
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 Meal for campaign.
		Wear of earlpaign.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Payee name
	03/09/2024	Cathy Scott & Co LLC
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$6,538.40	2830 South Hulen St
		Suite 373
		Fort Worth, TX 76109
	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 Fundraising consulting
		T dildidishing consulting
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	06/03/2024	Cattleman's BBQ
H	Amount (\$)	Payee address; City; State; Zip Code
	\$17.99	2010 S. Bridge St
	Ψ11.55	2010 3. Bridge 3t
		Brady, TX 76825
L	DUDD005	
	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
		Meal for campaign.
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H		
1		
ĺ		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complet	te this form.
1	Total pages Schedule F1: Sch: 13/52 Rpt: 35/74	2 FILER NAME Virdell, Wesley W. (Mr.)	3 Filer ID (Ethics Commission Filers) 00086012
4		5 Payee name Cattleman's BBQ	
6	Amount (\$) \$20.84	7 Payee address; City; State; Zip Code 2010 S. Bridge St Brady, TX 76825	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meal for campaign.
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 03/05/2024	Payee name Chick-Fil-A Kerrvillle	
	Amount (\$) \$19.27	Payee address; City; State; Zip Code 1060 Junction Hwy Kerrville, TX 78028	
	PURPOSE OF EXPENDITURE	Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel meal for campaign
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 04/19/2024	Payee name Chick-Fil-A Kerrvillle	
	Amount (\$) \$18.37	Payee address; City; State; Zip Code 1060 Junction Hwy	
		Kerrville, TX 78028	
	PURPOSE OF EXPENDITURE	Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meal for campaign.
	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 Filers)
	Sch: 14/52 Rpt: 36/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	04/19/2024	Chili's Bar and Grill
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$36.58	1185 Junction Highway
		Kerrville, TX 78028
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
		Meal for campaign.
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experional to benefit C/Or	
	Date	Payee name
	03/20/2024	Chipotle
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.28	801 Congress Ave
		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
		Meal for campaign
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit of or	
	Date	Payee name
	05/03/2024	Citizens Insurance
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,354.00	625 S Washington
		Fradoriokahura TV 70624
	DUDD005	Fredericksburg, TX 78624
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
		Campaign vehicle insurance
	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 -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: 15/52 Rpt: 37/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	06/12/2024	Contract with Texas va WinRed
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$260.25	1776 Wilson Blvd
		Arlington, VA 22209
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Donation to Contract with Texas via Willixed
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
H	Date	Payee name
	02/29/2024	Cooper's Old Time BBQ
H	Amount (\$)	Payee address; City; State; Zip Code
	\$14.93	604 West Young Street
	Ψ14.95	004 West Touring Street
		Llano, TX 78643
	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
		Travel meal for campaign.
		Traver mear or earnpaign.
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	03/24/2024	Cooper's Old Time BBO
H	Amount (\$)	Payee address; City; State; Zip Code
	\$20.76	604 West Young Street
	Ψ20.70	oo4 West Touring Street
		Hana TV 70642
	DUDD005	Llano, TX 78643
	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
		Meal for campaign.
一	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
T		
1		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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			mmittee	Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAM	Ē					3	Filer ID	(Ethics Comn	nission Filers)	
	Sch: 16/52 Rpt: 38/74			sley W. (Mr.)						00086012			
4	Date	5	Payee name										
	03/30/2024		Cooper's C	old Time BBQ									
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Co	de						
	\$47.98		604 West \	oung Street									
			Llano, TX 7	78643									
8	PURPOSE	(a)	Category (S	See Categories listed	at the top of this sch	edule)	(b)	Description					
	OF EXPENDITURE		Food/Beve	rage Expense						ide of Texas. Com			
								Check if Austin, TX, officeholder living expense Meal for campaign.					
										3			
9	Complete ONLY if direct		Candidate/Off	iceholder name	C	Office sou	ght			Office he	eld		
	expenditure to benefit C/O	Н											
	Date		Payee name										
	04/28/2024		Cooper's C	old Time BBQ									
	Amount (\$)		Payee addre	ess; City;	State;	Zip Co	de						
	\$12.16		604 West \	oung Street									
			Llano, TX 7	78643									
	PURPOSE	(a)	Category (S	See Categories listed	at the top of this sch	edule)	(b)	Description					
	OF EXPENDITURE		Food/Beve	rage Expense				=		ide of Texas. Com , officeholder living			
								Meal for cam			у схрензе		
								'	•	3			
	Complete ONLY if direct		Candidate/Off	iceholder name	C	Office sou	ght			Office he	eld		
	expenditure to benefit C/Ol	H											
	Date		Payee name	,									
	03/08/2024		Courtyard I	oy Marriott Sa	n Marcos								
	Amount (\$)		Payee addre	ess; City;	State;	Zip Co	de						
	\$163.97		625 Comm	ercial Lp									
			San Marco	s, TX 78666									
	PURPOSE	(a)	Category (S	See Categories listed	at the top of this sch	edule)	(b)	Description					
	OF EXPENDITURE		Travel Out	of District				ш		ide of Texas. Com	•		
								Hotel for ever		, officeholder living	g expense		
\vdash	Complete ONLY if direct		Candidate/Off	iceholder name	C	Office sou	<u>l</u> ght			Office h	eld		
	expenditure to benefit C/O	Н											
H													

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

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

Printing Expense Salaries/Wages/Contract Labor Travel Out of District 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) Virdell, Wesley W. (Mr.) Sch: 17/52 Rpt: 39/74 00086012 4 Date Payee name 05/14/2024 Courtyard by Marriott San Marcos 6 Amount (\$) Payee address; City; State; Zip Code \$46.22 625 Commercial Lp San Marcos, TX 78666 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. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meal for campaign. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/13/2024 Courtyard by Marriott San Marcos Amount (\$) Payee address; City; State; Zip Code \$104.97 625 Commercial Lp San Marcos, TX 78666 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Hotel for campaign Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/09/2024 Cracker Barrel Amount (\$) Payee address: City: State; Zip Code \$29.29 2110 Sidney Baker St Kerrville, TX 78028 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meal for campaign 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 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: 18/52 Rpt: 40/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	03/26/2024	Cracker Barrel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$13.53	2110 Sidney Baker St
		Kerrville, TX 78028
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
		Meal for campaign.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	04/08/2024	Cracker Barrel
_	Amount (\$)	Payee address; City; State; Zip Code
	\$38.82	2110 Sidney Baker St
	Ψ30.02	2110 Sidney Baker St
		Kerrville, TX 78028
	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
	!	Meal for campaign.
	!	oa ioi oanpagii
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Davida nama
	04/20/2024	Payee name Cracker Barrel
	Amount (\$) \$20.96	Payee address; City; State; Zip Code 2110 Sidney Baker St
	\$20.90	2110 Siuriey Baker St
	l	Vormille TV 70020
		Kerrville, TX 78028
	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 travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meal for campaign.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	Н

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 19/52 Rpt: 41/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	03/04/2024	Cracker Barrell
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$62.54	2110 Sidney Baker St
		Kerrville, TX 78028
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 Travel meal for campaign
		Traver mear for campaign
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Davies same
		Payee name
	03/06/2024	Cracker Barrell
	Amount (\$)	Payee address; City; State; Zip Code
	\$45.12	2110 Sidney Baker St
		Kerrville, TX 78028
	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 Meal for campaign
		Medi for Campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
	5 .	
	Date	Payee name
	03/02/2024	Defiant Projects LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	206a S Loop 336 W
		#309
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense Website maintenance
		website maintenance
_	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 -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: 20/52 Rpt: 42/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	04/09/2024	Defiant Projects LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	206a S Loop 336 W
		#309
		Conroe, TX 77304
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 Website Maintenance
		Website Maintenance
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-1
	Date	Payee name
	04/01/2024	Element Dallas Los Colinas
	Amount (\$)	Payee address; City; State; Zip Code
	\$135.97	606 W John Carpenter Fwy
		Irving, TX 75039
	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 stay for campaign
		The state of the s
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/08/2024	ExxonMobil
	Amount (\$)	Payee address; City; State; Zip Code
	\$52.46	516 S Adams St
		Fredericksburg, TX 78624
	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 Fuel
		Fuei
_	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 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 com	plet	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 21/52 Rpt: 43/74	Virdell, Wesley W. (Mr.)		00086012
4	Date	5 Payee name		
	03/01/2024	Facebook		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$200.00	1 hacker way		
		menlo park , CA 94025		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
l	OF EXPENDITURE	Advertising Expense	ļ	Check if travel outside of Texas. Complete Schedule T.
l			١	Check if Austin, TX, officeholder living expense Facebook ads
				i deebook dus
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
ľ	expenditure to benefit C/OI			Cindo nola
⊨	Date	Payee name		
	03/05/2024	Facebook		
⊢	Amount (\$)	Payee address; City; State; Zip Code		
l	\$200.00	1 hacker way	C	
	Ψ200.00	Thacker way		
l		menlo park , CA 94025		
┝	PURPOSE		h)	Do controller
l	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	u) 	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Advertising Expense	j	Check if Austin, TX, officeholder living expense
				facebook campaign ads
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	ht	Office held
L				
	Date	Payee name		
	03/15/2024	Fazoli's #5242		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$19.24	4066 South Danville St		
l				
		Abilene, TX 79605		
l	PURPOSE OF	, ,	b)	Description
l	EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l				Meal for campaign.
Г	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI	1		
ı				

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica			Legal Services	s Expense	Salaries/W		e /Contract Labor		OTHER (enter a	strict a category not listed	above)
	Credit Card Payment		,	The Instruction G	uide explains h	now to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	ssion Filers)
	Sch: 22/52 Rpt: 44/74		Virdell, Wesl	ley W. (Mr.)						00086012		
4	Date	5	Payee name									
	03/27/2024		Fuel Coffee	House								
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Co	de					
	\$7.00		106 e main s	st								
			llano, TX 780	643								
8	PURPOSE	(a)		e Categories listed at	4h - 4 6 4h i h -	-1-1-1	(b)	Description				
	OF	(-,	Food/Bevera		tne top of this sche	eaule)	(~)		outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		. 000,2010.0	.gc =/\psec				Check if Austin,	, TX,	officeholder livin	g expense	
								Meal for camp	pai	gn.		
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	eholder name	0	ffice sou	ght			Office h	eld	
	experiditure to beliefit C/OI											
	Date		Payee name									
	05/30/2024		Fuel Coffee	House								
	Amount (\$)		Payee addres	s; City;	State;	Zip Co	de					
	\$7.00		106 e main s	st								
			Ilano, TX 780	643								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Food/Bevera		·			=			nplete Schedule T.	
								ш		officeholder livin	g expense	
								Meal for cam	μai	gn.		
_	Complete ONLY if direct	<u> </u>	Candidate/Offic	oholdor namo		ffice sou	aht			Office h	old	
	expenditure to benefit C/O		zanuluale/Onic	enoluei name	O	ilice sou	ynı			Office II	eiu	
_	D :	1										
	Date		Payee name	N.								
	04/08/2024		GM FInancia									
	Amount (\$)		Payee addres		State;	Zip Co	de					
	\$902.69		P.O. Box 99	605								
			Arlington, TX	< 76096 								
	PURPOSE OF	(a)		e Categories listed at			(b)	Description				
	EXPENDITURE		Transportation Expense	on Equipment	And Related					officeholder livin	nplete Schedule T. g expense	
			Ехрепзе					Campaign ve			9	
	Complete ONLY if direct		Candidate/Offic	eholder name	0	ffice sou	ght			Office h	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 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: 23/52 Rpt: 45/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	05/08/2024	GM FInancial
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$902.69	P.O. Box 99605
		Arlington, TX 76096
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T. Expense Check if Austin, TX, officeholder living expense
		Expense
		Campaigh veriles leads
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
١	expenditure to benefit C/O	
\vdash	Date	Dougo nama
		Payee name CM Chapaigl
	06/10/2024	GM FInancial
	Amount (\$)	Payee address; City; State; Zip Code
	\$902.69	P.O. Box 99605
		Arlington, TX 76096
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Compaign vehicle lease
		Campaign vehicle lease
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/03/2024	Gatti's Pizza
	Amount (\$)	Payee address; City; State; Zip Code
	\$29.83	2931 State Hwy 16
		Fredericksburg, TX 78624
	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
		Travel meal for campaign
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contribution/ Officeholds/(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	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: 24/52 Rpt: 46/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	04/08/2024	Gatti's Pizza
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$43.67	2931 State Hwy 16
		Fredericksburg, TX 78624
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 Meal for campaign.
		Mea for Campaign.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	06/09/2024	Gatti's Pizza
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.46	2931 State Hwy 16
		Fredericksburg, TX 78624
	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 Meal for campaign.
		Medi for campaign.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	David and the second se
	Date 06/11/2024	Payee name H-E-B Fuel
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.54	300 W Main
		Kerrville, TX 78028
	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 Fuel
		i uci
_	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		nmittee Legal Services	morials Expense ion Guide explains		/ages	s/Contract Labor		Travel Out of Dis OTHER (enter a	trict category not listed al	oove)
1	Total pages Schedule F1:	2	FILER NAME				T ₂	3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 25/52 Rpt: 47/74	Ĺ	Virdell, Wesley W. (Mı	.)					00086012		,
4	Date	5	Payee name								
	03/05/2024		HEB								
6	Amount (\$) \$59.98	7	Payee address; City 300 W Main	State	e; Zip Co	de					
	, , , , ,										
			Kerrville, TX 78028								
8	PURPOSE	(a)	Category (See Categories lis	ted at the top of this sc	chedule)	(b)	Description				
	OF EXPENDITURE		Food/Beverage Exper	se					de of Texas. Com		
							ш	IX,	officeholder living	expense	
							Victory Cake				
_	Complete ONU V if alice	Ļ	Novadialata / Offi I I-I -		O#:	a. le 4			Off: 1	اما	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder na	me 	Office sou	gnt			Office he	eia	
	Date		Payee name								
	06/11/2024		Hampton Inn by Hilton	& Suites Boern	ne						
	Amount (\$)	Г	Payee address; City	State	e; Zip Co	de					
	\$122.97		34935 IH-10 W								
			Boerne, TX 78006			ac.					
	PURPOSE OF	(a)	Category (See Categories lis	ted at the top of this sc	chedule)	(b)	Description		14 T O	alaka Oaka III T	
	EXPENDITURE		Travel Out of District						de of Texas. Composition officeholder living		
							Hotel stay for			олронов	
								امد			
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder na	me	Office sou	ght			Office he	eld	
	pod.taro to boriont 0/01										
	Date		Payee name								
	06/09/2024		Hampton Inn by Hilton	& Suites Boern	ne						
	Amount (\$)		Payee address; City	State	e; Zip Co	de					
	\$202.72		34935 IH-10 W								
			Boerne, TX 78006								
	PURPOSE OF	(a)	Category (See Categories lis	ted at the top of this sc	chedule)	(b)	Description				
	EXPENDITURE		Travel Out of District						de of Texas. Comp officeholder living		
							Hotel stay for			evhense	
							. Total stay for t	Jui	paigii		
	Complete ONLY if direct	Щ	Candidate/Officeholder na	me	Office sou	aht			Office he	ald.	
	expenditure to benefit C/O		andidate/Onlectioned Ha	THE STATE OF THE S	Office 30th	grit			Office He	,iu	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Polit 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	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: 26/52 Rpt: 48/74	Virdell, Wesley W. (Mr.) 00086012	
4	Date	5 Payee name	
	03/09/2024	Hat Creek Burger Company	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
١	\$24.41	3700 E Palm Valley Blvd	
	Ψ24.41	3700 E Faiiii Valley bivu	
		Round Rock, TX 78665	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense	
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense	
		Meal for campaign.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	,	
	Date	Payee name	
	03/27/2024	Hat Creek Burger Company	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$35.72	5902 bee caves rd	
	Ψ00.12	0002 BCC 04VC3 14	
		west lake hills, TX 78746	
	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 Meal for campaign.	
		Wicarior campaign.	
	Complete ONLY if direct	Candidate/Officeholder name Office county Office hold	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	04/24/2024	Hill and Vine	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$7.58	210 S Adams	
		Fredericksburg, TX 78624	
	PURPOSE	To.	
	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	
		Meal for campaign.	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
_			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officenoider/Politic	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 27/52 Rpt: 49/74	Virdell, Wesley W. (Mr.) 00086012
4 Date	5 Payee name
06/12/2024	Hilton Inn Dallas
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$157.25	1615 Camous Dr
	Hurst, TX 76054
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 Hotel stay for event
	Thotal day for overing
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/C	
5-4-	<u> </u>
Date	Payee name
03/09/2024	Holiday Inn Express Round Rock
Amount (\$)	Payee address; City; State; Zip Code
\$183.97	2340 N Interstate Hwy 35
	Round Rock, TX 78681
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 Campaign.
Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/C	
Date	Payee name
03/20/2024	Hyatt Centric Congress Ave Austin
Amount (\$)	Payee address; City; State; Zip Code
\$440.44	721 Congress Ave
	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.
E/II EIIDI. G.I.E	Check if Austin, TX, officeholder living expense
	Travel for campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held
experience to belief ere	···

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

	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: 28/52 Rpt: 50/74	Virdell, Wesley W. (Mr.) 00086012	
4	Date	5 Payee name	
	03/15/2024	Hyatt Centric Congress Ave Austin	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$440.44	721 Congress 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 stay for campaign	
		The state of the s	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
F	Date	Payee name	_
	03/22/2024	Inman's Kitchen	
┢	Amount (\$)	Payee address; City; State; Zip Code	_
	\$15.43	809 West Young Street	
	Ψ10.40	500 West Fourig Subst	
		Llano, TX 78643	
	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 Meal for campaign	
		Wedi for campaign	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
L			
	Date	Payee name	
	03/01/2024	Inn of the Hills	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$271.34	1001 Junction Hwy	
		Kerrville, TX 78028	
	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 event	
		Thoteliol event	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
\vdash			_
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/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: 29/52 Rpt: 51/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	04/20/2024	Inn of the Hills
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$193.23	1001 Junction Hwy
		Kerrville, TX 78028
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
		Hotel stay for campaign event.
		Tiotol otay for campaign event.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-
	Date	Payee name
	03/04/2024	Inn of the Hills
	Amount (\$)	Payee address; City; State; Zip Code
	\$246.34	1001 Junction Hwy
		Kerrville, TX 78028
	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
		Hotel stay for campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/01/2024	Jacoby's Cafe
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.54	201 Noyes St
	,	
		Melvin, TX 76858
	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
		Meal for campaign.
_	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 -

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

Printing Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

	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: 30/52 Rpt: 52/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	06/06/2024	Jacoby's Cafe
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$34.76	201 Noyes St
		Melvin, TX 76858
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 Meal for campaign.
		Wicarior campaign.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
⊨	Date	Payee name
	03/29/2024	Jason's Deli
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.74	1819 Knickerbocker Rd
		San Angelo, TX 76904
	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 Meal for campaign.
		Wear of Campaign.
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
⊨	Data	Davida nama
	Date 03/05/2024	Payee name
L		Justin, Causey
	Amount (\$)	Payee address; City; State; Zip Code
	\$525.00	809 Gray Oak Ct
		Fredericksburg, TX 78624
	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 Bookkeeping
1		σουκεεριία
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/Ol	
\vdash		

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 Cabadula F1:	
1	Total pages Schedule F1:	
	Sch: 31/52 Rpt: 53/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	02/29/2024	KNEL Multimedia
6	Amount (\$)	7 Payee address; City; State; Zip Code
١	\$385.00	117 S Blackburn St
	Ψ000.00	11. O Diagnostiii Ot
L		Mason, TX 76825
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	LAFEINDITUKE	Check if Austin, TX, officeholder living expense
		Radio Ads in mason KNEL
L		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Payee name
	03/01/2024	Kerrville Times
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,743.98	429 Jefferson St
		Kerrville, TX 78028
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Online Ads
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	1
H	Date	Payee name
	04/18/2024	King Burgers
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.09	102 N State
		Rocksprings, TX 78880
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Meal for campaign.
	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)
tising Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 32/52 Rpt: 54/74		Filers)
4	Date 04/03/2024	5 Payee name Lonestar Polo Club Shell	
6	Amount (\$) \$48.00	7 Payee address; City; State; Zip Code 13542 West Hwy 290 Austin, TX 78737	
8	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 Meal for campaign.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
	Date 06/12/2024	Payee name Mail Chimp	
	Amount (\$) \$330.46	Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308	
	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 Mailchimp ads plan	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date 03/12/2024	Payee name Mamacitas	
	Amount (\$) \$105.39	Payee address; City; State; Zip Code 215 Junction Hwy	
		Kerrville, TX 78028	
	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 Meal for campaign	
	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 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	/ - al Cor		Legal Ser		•		ages.	/Contract Labor		Travel Ou OTHER (strict category not listed above)	
L		_			uucuon Gul	ue expiains	110W (0 CO	пріе	te this form.	_				
1	Total pages Schedule F1:	2								3			(Ethics Commission Filers)
	Sch: 33/52 Rpt: 55/74	L	Virdell, Wes	ley W.	(Mr.)						00086	012		
4	Date	5	Payee name											
	05/30/2024		Matt's El Ra	ıncho										
6	Amount (\$)	7	Payee addres	ss; (City;	State	; Zip Co	de						
	\$70.98		2613 S Lam	ıar										
			Austin, TX 7	8704										
8	PURPOSE	(a)						(b)	Description					
ľ	OF	(۳)	Category (Se			top of this sch	edule)	(5)	_ `	outsi	de of Texa	s. Com	plete Schedule T.	
	EXPENDITURE		Food/Bever	aye EX	hense				Check if Austin				•	
									Meal for cam					
									'					
9	Complete ONLY if direct		Candidate/Offic	ceholde	r name	(Office sou	ght			Off	ice he	eld	
	expenditure to benefit C/O							-						
_	Date		Payee name											
	03/20/2024		Murphy USA	Δ.										
	Amount (\$)	\vdash	Payee address		City:	Ctoto	: Zip Co	de						
	` '		,		City;	State	, ∠ıµ C0	ue						
	\$83.99		1379 s mair	I										
L		L	boerne, TX	78006										
	PURPOSE	(a)	Category (Se	e Categor	ies listed at the	top of this sch	edule)	(b)	Description					
	OF EXPENDITURE		Travel Out of						-				plete Schedule T.	
									Check if Austin	, TX,	officeholde	er living	expense	
									Fuel					
_	0 1 0 0 0 0 0 0	<u> </u>		,										
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offic	cenolde	r name	(Office sou	ght			Off	ice he	eia	
	Date		Payee name											
L	03/11/2024		Napoli's Itali	ian Gril	<u> </u>									
	Amount (\$)		Payee addres	ss; (City;	State	; Zip Co	de						
	\$56.41		210 E Comr	nerce S	St									
			San Saba, 1	ΓX 768	77									
	PURPOSE	(a)	Category (Se	e Categor	ies listed at the	top of this sch	edule)	(b)	Description					
	OF	^	Food/Bever			,	/	-		outsi	de of Texa	s. Com	plete Schedule T.	
	EXPENDITURE			J	•				Check if Austin			er living	expense	
									Meal for cam	pai	gn.			
L		L												
	Complete ONLY if direct		Candidate/Offic	ceholde	r name	(Office sou	ght			Off	ice he	eld	
	expenditure to benefit C/OI	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 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: 34/52 Rpt: 56/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	03/05/2024	Original Rita's Tacos
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.60	209 Earl Garrett St
		W TV 7000
		Kerrville, TX 78028
8	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
		Travel meal for campaign
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	03/07/2024	Outback Steakhouse #4473
	Amount (\$) \$51.92	Payee address; City; State; Zip Code
	Ф51.92	4505 Sherwood Way
		San Angelo, TX 76901
	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	Check if Austin, TX, officeholder living expense
		Meal for campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	03/09/2024	Outback Steakhouse 4429
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.02	4205 IH-35 S
		San Marcos, TX 78666
	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 Meal for campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	4

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		
Ļ	Tatalana Oliver		_
1	Total pages Schedule F1:		
L	Sch: 35/52 Rpt: 57/74	Virdell, Wesley W. (Mr.) 00086012	
4	Date	5 Payee name	
	03/15/2024	Outback Steakhouse 4474	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$37.37	4542 Ridgemont Dr	
		Abliene, TX 79606	
Ļ			_
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	
		Meal for campaign.	
		mod for earlywigh.	
_	Complete ONLY if direct	Candidata/Officeholder name Office cought Office hold	_
9	expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
			_
	Date	Payee name	
	04/09/2024	Outback Steakhouse 4474	
	Amount (\$)	Payee address; City; State; Zip Code	П
	\$38.95	4542 Ridgemont Dr	
		Abliene, TX 79606	
_	DUDDOSE		_
	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	
		Meal for campaign.	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
\vdash	Data		_
	Date	Payee name	ſ
	06/11/2024	Outback Steakhouse 4474	_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$52.00	4542 Ridgemont Dr	
			ſ
		Abliene, TX 79606	ĺ
	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	
		Meal for campaign.	ſ
L			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	ĺ
			7

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 36/52 Rpt: 58/74	Virdell, Wesley W. (Mr.) 00086012
4 Date	5 Payee name
03/04/2024	Outback Steakhouse
6 Amount (\$) \$38.30	7 Payee address; City; State; Zip Code 12511 I-10 W San Antonio, TX 78230
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 Travel meal for campaign
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/08/2024	Parking.com
Amount (\$) \$24.20	Payee address; City; State; Zip Code 226 Ave E
	San Antonio, TX 78205
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 Parking
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/29/2024	Petro Mart #4
Amount (\$) \$65.48	Payee address; City; State; Zip Code 23401 US 290
	Harper, TX 78631
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 Fuel
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 Ma 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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee I	Legal Services	Si		ages	/Contract Labor		OTHER (enter a	a category not listed abo	ve)
				The Instruction G	uide explains hov	w to con	nple	te this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission	n Filers)
	Sch: 37/52 Rpt: 59/74		Virdell, Wes	ley W. (Mr.)						00086012		
4	Date	5	Payee name									
	05/07/2024		QDoba									
6	Amount (\$)	7	Payee addres	s; City;	State; Z	Zip Cod	de					
	\$14.28		2105 Sidney	Baker St								
			Unt 4									
			kerrville, TX	78208								
8	PURPOSE	(2)				17	(h)	Description				
ľ	OF	(۵)		e Categories listed at t age Expense	he top of this schedu	ile)	(1)	:	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		FOOd/Dever	age Expense				=		officeholder livin		
								Meal for cam	pai	gn.		
9	Complete ONLY if direct		Candidate/Offic	eholder name	Offic	ce soug	jht			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	03/26/2024		Quicktrip FW	V								
	Amount (\$)	Г	Payee addres	s; City;	State; Z	Zip Coc	de					
	\$60.16		10200 West	Fwy								
			Fort Worth,	TX 76108								
	PURPOSE	(a)		e Categories listed at t		1	(h)	Description				
	OF	``	Travel Out o		rie top of trils scriedu	iie)	(,	_ `	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		maver out o	District				Check if Austin,	, TX,	officeholder livin	g expense	
								Fuel				
	Complete ONLY if direct		Candidate/Offic	eholder name	Offic	ce soug	jht			Office h	eld	
	expenditure to benefit C/OI	П										
	Date		Payee name									
	04/18/2024		Republican \	Women of Kerr	County							
	Amount (\$)		Payee addres	s; City;	State; Z	Zip Cod	de					
	\$23.00		PO Box 294	492								
			Kerrville, TX	78029								
	PURPOSE	(a)	Category (Se	e Categories listed at t	the top of this schedu	ıle)	(b)	Description				
	OF EXPENDITURE		Event Exper					ш			nplete Schedule T.	
	LAFENDITORE							_		officeholder livin	g expense	
								April General	me	eeting		
	0 1 0 0 0 0 0	L	0 11 : 10 ***									
	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 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: 38/52 Rpt: 60/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	03/08/2024	Saltgrass Steakhouse
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$138.15	60 NE Loop 410
		San Antonio, TX 78216
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 Meal for campaign
		moar or ourspang!
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	d v
	Date	Payee name
	03/25/2024	Saltgrass Steakhouse
	Amount (\$)	Payee address; City; State; Zip Code
	\$43.22	60 NE Loop 410
		·
		San Antonio, TX 78216
	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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Meal for campaign.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	y
	Date	Payee name
	03/27/2024	Saltgrass Steakhouse
	Amount (\$)	Payee address; City; State; Zip Code
	\$66.02	60 NE Loop 410
	700.02	33 NE 233P 123
		San Antonio, TX 78216
	PURPOSE	I
	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	Check if Austin, TX, officeholder living expense
		Meal for campaign.
	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 -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: 39/52 Rpt: 61/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	06/08/2024	Saltgrass Steakhouse
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$36.72	60 NE Loop 410
		San Antonio, TX 78216
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 Meal for campaign.
		ivieai ioi campaign.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	03/13/2024	Santos
	Amount (\$)	Payee address; City; State; Zip Code
	\$33.78	205 San Antonio St
		Mason, TX 76856
	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 Meal for campaign.
		Medi for dampaign.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	04/18/2024	Santos
	Amount (\$)	
	\$14.08	205 San Antonio St
		TV 70070
		Mason, TX 76856
	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
		Fuel
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	4
L		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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: 40/52 Rpt: 62/74	Virdell, Wesl	ey W. (Mr.)					00086012	
4	Date	5 Payee name							
	04/25/2024	Santos			_				
6	Amount (\$)	7 Payee address		State; Zip Co	ode				
	\$18.35	205 San Ant	onio St						
		Mason, TX 7	6856						
8	PURPOSE OF		Categories listed at the top	of this schedule)	(b)	Description			
	EXPENDITURE	Food/Bevera	ge Expense			_		de of Texas. Com officeholder living	plete Schedule T.
						Meal for cam			,
						•		=	
9	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ught			Office he	eld
L	expenditure to benefit C/OI								
	Date	Payee name				_			
	02/29/2024	Shell							
	Amount (\$)	Payee addres	s; City;	State; Zip Co	ode				
	\$67.30	2342 S Bridg	e St						
		Brady, TX 76	825						
	PURPOSE OF		Categories listed at the top	of this schedule)	(b)	Description			
	EXPENDITURE	Travel In Dis	trict			=		de of Texas. Com officeholder living	plete Schedule T. gexpense
						Fuel	,		•
	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ught			Office he	eld
	expenditure to benefit C/OI								
	Date	Payee name							
	03/01/2024	Shell							
	Amount (\$)	Payee address	s; City;	State; Zip Co	ode				
	\$74.00	2342 S Bridg	e St						
		Brady, TX 76	825						
	PURPOSE	(a) Category (See	Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Travel In Dis	trict			브			plete Schedule T.
	-					Check if Austin,	, TX,	officeholder living	g expense
						. 301			
_	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	<u>l</u> ught			Office he	eld
	expenditure to benefit C/O				J -				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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 cor	mplet	e this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 41/52 Rpt: 63/74	Virdell, Wesley W. (Mr.)		00086012
4	Date	5 Payee name		<u> </u>
	03/08/2024	Shell		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	de	
	\$53.46	2342 S Bridge St		
		Brady, TX 76825		
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.
	EXI ENDITORE		Ļ	Check if Austin, TX, officeholder living expense Fuel
			, r	ruei
9	Complete ONLY if direct	Candidate/Officeholder name Office souc	aht	Office held
	expenditure to benefit C/O		grit	Office field
┝	Date	Dayaa nama		
	03/22/2024	Payee name Shell		
			do	
	Amount (\$) \$49.03	Payee address; City; State; Zip Coo 2342 S Bridge St	ue	
	Φ49.03	2342 3 bliuge 3t		
		Dun dia TV 70005		
		Brady, TX 76825		
	PURPOSE OF	2 ((b) [Description Check if travel outside of Taylor Complete Schoolule T
	EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			F	Fuel
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/O	1		
	Date	Payee name		
	03/24/2024	Shell		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$63.24	2342 S Bridge St		
		Brady, TX 76825		
	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.
			Ļ	Check if Austin, TX, officeholder living expense Fuel
				i uci
_	Complete ONLY if direct	Candidate/Officeholder name Office soug	aht	Office held
	expenditure to benefit C/O		grit	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

l	Credit Card Payment	The Instruction Guide explains how to c	ompl	ete this form.
1	Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
L	Sch: 42/52 Rpt: 64/74	Virdell, Wesley W. (Mr.)		00086012
4	Date	5 Payee name		
L	04/19/2024	Shell		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$38.43	2342 S Bridge St		
		Brady, TX 76825		
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
				Fuel
9	Complete ONLY if direct	Candidate/Officeholder name Office so	<u> </u>	Office held
	expenditure to benefit C/O	1		
F	Date	Payee name		
	04/22/2024	Shell		
Н	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$34.02	2342 S Bridge St		
		Brady, TX 76825		
	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.
				Check if Austin, TX, officeholder living expense Fuel
				. 46.
H	Complete ONLY if direct	Candidate/Officeholder name Office so	<u> </u>	Office held
	expenditure to benefit C/O	1		
F	Date	Payee name		
	04/27/2024	Shell		
Н	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$68.79	2342 S Bridge St		
		Brady, TX 76825		
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				Check if Austin, TX, officeholder living expense Fuel
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office so	<u>l</u> ught	Office held
	expenditure to benefit C/O		•	
H				
L				

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	e this form.
1	Total pages Schedule F1: Sch: 43/52 Rpt: 65/74	2 FILER NAME Virdell, Wesley W. (Mr.)	3 Filer ID (Ethics Commission Filers) 00086012
4	Date 05/06/2024	5 Payee name Shell	
6	Amount (\$) \$67.79	7 Payee address; City; State; Zip Code 2342 S Bridge St Brady, TX 76825	
8	PURPOSE OF EXPENDITURE	Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 06/01/2024	Payee name Shell	
	Amount (\$) \$69.84	Payee address; City; State; Zip Code 2342 S Bridge St Brady, TX 76825	
	PURPOSE OF EXPENDITURE	Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 06/26/2024	Payee name Shell	
	Amount (\$) \$71.25	Payee address; City; State; Zip Code 2342 S Bridge St Brady, TX 76825	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

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

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

	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: 44/52 Rpt: 66/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	03/10/2024	Southside Market
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.23	106 Co-Op Blvd
		Hutto, TX 78634
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
		Meal for campaign.
		mod for campaign.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	02/29/2024	Star point Broadcasting
H	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	1101 Austin St
		Mason, TX 76826
	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 Radio ads
		Tadio ads
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	03/01/2024	Starbucks
H	Amount (\$)	Payee address; City; State; Zip Code
	\$21.11	1355 Junction Hwy
	·	
		Kerrville, TX 78028
	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
		Travel meal for campaign.
\vdash	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 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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 45/52 Rpt: 67/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	03/05/2024	Starbucks
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$32.69	1355 Junction Hwy
		Kerrville, TX 78028
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 Travel meal for campaign
		Travel mear for earlipsign
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
۱	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	04/06/2024	Starbucks
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.42	1355 Junction Hwy
		Kerrville, TX 78028
	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
		Meal for campaign.
		most for our pargin
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	•
-	Date	Dayso name
	04/23/2024	Payee name Starbucks
	Amount (\$)	Payee address; City; State; Zip Code
	\$11.00	1355 Junction Hwy
		Kerrville, TX 78028
	PURPOSE	and the second s
	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	Check if Austin, TX, officeholder living expense
		Meal for campaign.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	1

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 comp	lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 46/52 Rpt: 68/74	Virdell, Wesley W. (Mr.)	00086012
4	Date	5 Payee name	
l	06/08/2024	Starbucks	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$9.63	1355 Junction Hwy	
l			
		Kerrville, TX 78028	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l			Meal for campaign.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
F	Date	Payee name	
l	06/12/2024	Starbucks	
H	Amount (\$)	Payee address; City; State; Zip Code	
l	\$14.23	1355 Junction Hwy	
l		Kerrville, TX 78028	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
l			Check if Austin, TX, officeholder living expense Meal for campaign.
			Medi for campaign.
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	•	
F	Date	Payee name	
	03/07/2024	Stripes 5024	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.07	701 Hwy 87	
		Brady, TX 76825	
H	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.
	EXPENDITORE		Check if Austin, TX, officeholder living expense
			Fuel
L	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office field
H			

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/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: 47/52 Rpt: 69/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	03/11/2024	Stripes Brady
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$112.53	2013 S. Bridge St
	!	
		Brady, TX 76825
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
	!	Fuel
	!	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
_	expenditure to benefit C/Oh	
H	Date	Payee name
	04/10/2024	Stripes Brady
_	Amount (\$)	Payee address; City; State; Zip Code
	\$52.68	2013 S. Bridge St
	ΨJ∠.00	2013 S. Bridge St
		Brady, TX 76825
	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 Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
	!	Fuel
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experience to some size	
	Date	Payee name
	04/22/2024	Stripes Brady
	Amount (\$)	Payee address; City; State; Zip Code
	\$56.77	2013 S. Bridge St
	!	
	!	Brady, TX 76825
	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 Fuel
	!	Fuci
	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 -

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	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: 48/52 Rpt: 70/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	05/08/2024	Stripes Brady
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$72.54	2013 S. Bridge St
		Brady, TX 76825
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 Fuel
		rue:
_		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/12/2024	Stripes Brady
	Amount (\$)	Payee address; City; State; Zip Code
	\$98.89	2013 S. Bridge St
		Brady, TX 76825
	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
		Fuel
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	_	
	Date	Payee name
	03/13/2024	Stripes
	Amount (\$)	Payee address; City; State; Zip Code
	\$65.48	616 Ft McKavitt St
		Mason, TX 76856
	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
		Fuel
_	Complete ONLY if direct	Condidate/Officeholder name Office cought
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	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 Expens
Legal Services

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	ı - I Cor	nmittee	Gift/Awards/Memorials Legal Services The Instruction G	·		/ages/	/Contract Labor		Travel Out of Dis OTHER (enter a	strict a category not listed above)
1	Total pages Schedule F1:	2	FII FR NAME						2	Filer ID	(Ethics Commission Filers)
•	Sch: 49/52 Rpt: 71/74	ı		sley W. (Mr.)						00086012	(=2,100 0011111013)
L		⊢		——————————————————————————————————————							
4	Date	5	Payee name								
	04/16/2024		Stripes								
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Co	de				
	\$34.00		616 Ft McK	avitt St							
			Mason, TX	76856							
Ļ	DUDDOS-	⊢					<i>,</i> .				
8	PURPOSE OF	(a)		ee Categories listed at	the top of this sch	nedule)	(a)	Description	o	do of T-	anloto Cohodul - T
	EXPENDITURE		Travel In Di	strict				=		ide of Texas. Com , officeholder living	nplete Schedule T. g expense
								Fuel	, . A,		. r-
						l		- '			
9	Complete ONLY if direct	ب	`andidate/O#:	ceholder name		Office soud				Office he	eld
ا ا	expenditure to benefit C/O		Januluale/UITI	cendide Halfie	(onice SOU(gril			Onice N	uiu
L		_									
	Date		Payee name								
	04/28/2024	1	Stripes								
	Amount (\$)	Г	Payee addres	ss; City;	State	; Zip Co	de				
	\$72.83		616 Ft McK	avitt St							
		1	Mason, TX	76856							
<u> </u>	DUDDOG	⊢					/I- `				
	PURPOSE OF	(a)		ee Categories listed at	the top of this sch	nedule)	(a)	Description	O1.4	de of Toylor C	nnlete Schodule T
	EXPENDITURE		Travel In Di	strict		l		_		ide of Texas. Com , officeholder living	nplete Schedule T. g expense
						l		Fuel	, . A,		- r-
	Complete ONLY if direct	ب	`andidate/O#	ceholder name		Office sou				Office he	eld
	expenditure to benefit C/O		ou iuiuale/UIII	ocholaci ilalile	(ome sou(Aill			Onice II	oid
		_									
	Date		Payee name								
L	04/11/2024	Ĺ	Tacocat me	dia		_	_		_		
	Amount (\$)	Г	Payee addres	ss; City;	State	; Zip Co	de				
	\$250.00	ı	901 s bowie								
			Fredericksh	urg, TX 78624							
	DUDDOG	 				 ,	<u>,, , , , , , , , , , , , , , , , , , ,</u>				
	PURPOSE OF			ee Categories listed at	the top of this sch	nedule)	(a)	Description	Oi 14~.	de of Toyon O-	nnlete Schodulo T
	EXPENDITURE		Advertising	∟xpense						ide of Texas. Com , officeholder living	nplete Schedule T. g expense
								Advertising a		,sonoluci liviri(
								.s. srasnig a	-		
_	Complete ONLY if alice at	ب	Pandidate (Off.	ceholder name		Office co	ah+			Office	old.
	Complete ONLY if direct expenditure to benefit C/OH		Januluate/Offi	cenoider name	(Office sou	grit			Office h	eiu
_	· · · · · · - · -										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer	rs)		
	Sch: 50/52 Rpt: 72/74	Virdell, Wesley W. (Mr.) 00086012			
4	Date	5 Payee name			
	04/03/2024	The Capitol Grill			
6	Amount (\$) \$14.60	7 Payee address; City; State; Zip Code 1400 Congress Ave 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 Meal for campaign.			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H			
	Date	Payee name			
	04/07/2024	Timewise 183			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$51.15	2128 Sidney Baker			
		Kerrville, TX 78028			
	PURPOSE 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	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel			
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H			
	Date	Payee name			
	06/07/2024	VRBO			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,414.81	11920 Alterra Pkwy			
		Austin, TX 78758			
	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 stay for campaign			
	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 Committe

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: 51/52 Rpt: 73/74	Virdell, Wesley W. (Mr.) 00086012
4	Date	5 Payee name
	03/04/2024	Valero
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.00	6480 Northwest Loop 410
		San Antonio, TX 78238
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 Fuel
		Fuel
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
_		
	Date	Payee name
	04/03/2024	Veracruz All Natural - The LINE Hotel
	Amount (\$)	Payee address; City; State; Zip Code
	\$29.79	111 E Cesar Chavez St
		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
		Meal for campaign.
		mod for campaign.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	Davis same
	Date 03/05/2024	Payee name Wing Stop 1670
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.49	1304 Junction Hwy
		Ste 550
		Kerrville, TX 78028
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	ZA ZABITORZ	Check if Austin, TX, officeholder living expense
		Meal for campaign
_	Complete ONLY if alice at	Candidate/Officeholder name Office sought
	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

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

Credit Card Payment The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 52/52 Rpt: 74/74	Virdell, Wesley W. (Mr.)	00086012
4	Date	5 Payee name	•
	04/20/2024	burger king	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$6.38	1001 N Main St	
		Bandera, TX 78003	
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.
	EXI ENDITORE		ı, TX, officeholder living expense
		Meal for cam	paigii.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OH		
_	Date Pavee name		
	02/29/2024	Payee name margarita's city	
		<u> </u>	
	Amount (\$) \$55.02	Payee address; City; State; Zip Code 3360 memorial Blvd	
	\$33.02 Soot Memorial Bivu		
		kom illo TV 70000	
	kerrville, TX 78028		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Texas. Complete Schedule T.
	EXPENDITURE	1 00d/Develage Expense	I, TX, officeholder living expense
		Travel meal f	
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OH			
	Date	Payee name	
	03/08/2024	shake shack	
	Amount (\$) Payee address; City; State; Zip Code		
	\$21.08 4025 S IH 35		
		San Marcos, TX 78666	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense	outside of Texas. Complete Schedule T.
	-	Check if Austin Meal for cam	ı, TX, officeholder living expense
		wear or earn	paigi
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OH		