

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00020673	2 Total pages filed: 31
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Jane	MI OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/15/2024
	NICKNAME	LAST Nelson	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE P. O. Box 608 Grapevine, TX 76099		Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
	MS / MRS / MR Mr.		FIRST James Michael
	NICKNAME		LAST Nelson
	SUFFIX		SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1109 Buckingham Place Copper Canyon, TX 75077		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 850-0700		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 01/01/2024 06/30/2024		
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any) Secretary of State		12 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2 of 31

13 C / OH NAME Nelson, Jane (The Honorable)	14 Filer ID (Ethics Commission Filers) 00020673
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME <hr/> COMMITTEE ADDRESS <hr/> COMMITTEE CAMPAIGN TREASURER NAME <hr/> COMMITTEE CAMPAIGN TREASURER ADDRESS <hr/>

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 1,450.74
	4. TOTAL POLITICAL EXPENDITURES	\$ 87,491.33
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,299,167.05
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

 The Honorable Jane Nelson
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Nelson, Jane (The Honorable)		19 Filer ID 00020673	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS			SUBTOTAL AMOUNT
NAME OF SCHEDULE			
1.	<input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 67,715.19
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input checked="" type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 28,135.86
8.	<input checked="" type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 19,776.14
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 28,135.86

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/6 Rpt: 4/31	2 FILER NAME Nelson, Jane (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020673
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4 Date 02/10/2024	5 Payee name American Express
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6 Amount (\$) \$1,967.29	7 Payee address; City; State; Zip Code PO Box 650448 Dallas, TX 75265
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Payment
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/07/2024	Payee name American Express
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Amount (\$) \$4,450.93	Payee address; City; State; Zip Code PO Box 650448 Dallas, TX 75265
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Payment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/17/2024	Payee name American Express
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Amount (\$) \$3,456.26	Payee address; City; State; Zip Code PO Box 650448 Dallas, TX 75265
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Payment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/6 Rpt: 5/31	2 FILER NAME Nelson, Jane (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020673
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4 Date 06/18/2024	5 Payee name American Express
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6 Amount (\$) \$5,926.38	7 Payee address; City; State; Zip Code PO Box 650448 Dallas, TX 75265
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Payment
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/10/2024	Payee name American Express
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Amount (\$) \$1,217.21	Payee address; City; State; Zip Code PO Box 650448 Dallas, TX 75265
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Payment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/16/2024	Payee name Fidelity Investments
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Amount (\$) \$2,603.63	Payee address; City; State; Zip Code 1576 E Southlake Blvd Southlake, TX 76092
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advisor fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/6 Rpt: 6/31	2 FILER NAME Nelson, Jane (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020673
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4 Date 04/12/2024	5 Payee name Fidelity Investments
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6 Amount (\$) \$2,642.84	7 Payee address; City; State; Zip Code 1576 E Southlake Blvd Southlake, TX 76092
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advisor fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/01/2024	Payee name Hambrick, Brooke
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Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 10041 Cross Bend Circle Frisco, TX 75033
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Professional services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/01/2024	Payee name Hambrick, Brooke
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Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 10041 Cross Bend Circle Frisco, TX 75033
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Professional services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/6 Rpt: 7/31	2 FILER NAME Nelson, Jane (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020673
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4 Date 05/01/2024	5 Payee name Hambrick, Brooke
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6 Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code 10041 Cross Bend Circle Frisco, TX 75033
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Professional services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/01/2024	Payee name Hambrick, Brooke
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Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 10041 Cross Bend Circle Frisco, TX 75033
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Professional services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/15/2024	Payee name Internal Revenue Service
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Amount (\$) \$4,612.39	Payee address; City; State; Zip Code 1100 Commerce Street Dallas, TX 75242-1001
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxes
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/6 Rpt: 8/31	2 FILER NAME Nelson, Jane (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020673
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4 Date 01/01/2024	5 Payee name Nelson, Dave
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6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 3008 Pincrest Drive Austin, TX 78757
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Professional services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/01/2024	Payee name Nelson, Dave
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Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 3008 Pincrest Drive Austin, TX 78757
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Professional services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/01/2024	Payee name Nelson, Dave
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Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 3008 Pincrest Drive Austin, TX 78757
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Professional services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/6 Rpt: 9/31	2 FILER NAME Nelson, Jane (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020673
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4 Date 04/17/2024	5 Payee name Nelson, Dave
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6 Amount (\$) \$10,000.00	7 Payee address; City; State; Zip Code 3008 Pincrest Drive Austin, TX 78757
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Professional services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/04/2024	Payee name Texas Economic Development Corporation
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Amount (\$) \$7,371.34	Payee address; City; State; Zip Code 1005 Congress Ave. Ste. 600 Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Trade mission to India
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F3: Sch: 1/3 Rpt: 10/31
2 FILER NAME Nelson, Jane (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020673
4 Date 01/03/2024	5 Name of person from whom investment is purchased Fidelity Investments	
	6 Address of person from whom investment is purchased; City; State; Zip Code 1576 E Southlake Blvd Southlake, TX 76092	
	7 Description of investment Reinvested cash income	
	8 Amount of investment (\$) 4,713.17	
Date 01/31/2024	Name of person from whom investment is purchased Fidelity Investments	
	Address of person from whom investment is purchased; City; State; Zip Code 1576 E Southlake Blvd Southlake, TX 76092	
	Description of investment Reinvested cash income	
	Amount of investment (\$) 212.16	
Date 02/06/2024	Name of person from whom investment is purchased Fidelity Investments	
	Address of person from whom investment is purchased; City; State; Zip Code 1576 E Southlake Blvd Southlake, TX 76092	
	Description of investment Reinvested cash income	
	Amount of investment (\$) 4,353.16	
Date 02/29/2024	Name of person from whom investment is purchased Fidelity Investments	
	Address of person from whom investment is purchased; City; State; Zip Code 1576 E Southlake Blvd Southlake, TX 76092	
	Description of investment Reinvested cash income	
	Amount of investment (\$) 208.75	

PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F3: Sch: 2/3 Rpt: 11/31
2 FILER NAME Nelson, Jane (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020673
4 Date 03/06/2024	5 Name of person from whom investment is purchased Fidelity Investments	
	6 Address of person from whom investment is purchased; City; State; Zip Code 1576 E Southlake Blvd Southlake, TX 76092	
	7 Description of investment Reinvested cash income	
	8 Amount of investment (\$) 4,260.37	
Date 03/28/2024	Name of person from whom investment is purchased Fidelity Investments	
	Address of person from whom investment is purchased; City; State; Zip Code 1576 E Southlake Blvd Southlake, TX 76092	
	Description of investment Reinvested cash income	
	Amount of investment (\$) 242.37	
Date 04/04/2024	Name of person from whom investment is purchased Fidelity Investments	
	Address of person from whom investment is purchased; City; State; Zip Code 1576 E Southlake Blvd Southlake, TX 76092	
	Description of investment Reinvested cash income	
	Amount of investment (\$) 4,391.39	
Date 04/30/2024	Name of person from whom investment is purchased Fidelity Investments	
	Address of person from whom investment is purchased; City; State; Zip Code 1576 E Southlake Blvd Southlake, TX 76092	
	Description of investment Reinvested cash income	
	Amount of investment (\$) 247.98	

PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F3: Sch: 3/3 Rpt: 12/31
2 FILER NAME Nelson, Jane (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020673
4 Date 05/06/2024	5 Name of person from whom investment is purchased Fidelity Investments	
	6 Address of person from whom investment is purchased; City; State; Zip Code 1576 E Southlake Blvd Southlake, TX 76092	
	7 Description of investment Reinvested cash income	
	8 Amount of investment (\$) 4,510.86	
Date 05/31/2024	Name of person from whom investment is purchased Fidelity Investments	
	Address of person from whom investment is purchased; City; State; Zip Code 1576 E Southlake Blvd Southlake, TX 76092	
	Description of investment Reinvested cash income	
	Amount of investment (\$) 269.98	
Date 06/05/2024	Name of person from whom investment is purchased Fidelity Investments	
	Address of person from whom investment is purchased; City; State; Zip Code 1576 E Southlake Blvd Southlake, TX 76092	
	Description of investment Reinvested cash income	
	Amount of investment (\$) 4,444.36	
Date 06/28/2024	Name of person from whom investment is purchased Fidelity Investments	
	Address of person from whom investment is purchased; City; State; Zip Code 1576 E Southlake Blvd Southlake, TX 76092	
	Description of investment Reinvested cash income	
	Amount of investment (\$) 281.31	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 1/15 Rpt: 13/31	2	FILER NAME Nelson, Jane (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020673
4	CREDIT CARD ISSUER	Name of financial institution American Express		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 983.82
6	PAYMENT	(a) Amount Charged \$302.00	(b) Date of Charge 01/02/2024	(c) Date(s) Credit Card Issuer Paid 02/10/2024	
7	PAYEE	(a) Payee name Advantage Storage		(b) Payee address; City, State, Zip Code 850 Gerault Road Flower Mound, TX 75028	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Storage	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 01/02/2024	(c) Date(s) Credit Card Issuer Paid 02/10/2024	
7	PAYEE	(a) Payee name Go Creative Group		(b) Payee address; City, State, Zip Code 5511 Parkcrest Drive Ste. 103 Austin, TX 78731	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Online Outreach	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$74.27	(b) Date of Charge 01/02/2024	(c) Date(s) Credit Card Issuer Paid 02/10/2024	
7	PAYEE	(a) Payee name Hill Country Springs		(b) Payee address; City, State, Zip Code 10019 S I-35 Frontage Road Austin, TX 78747	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Supplies	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 2/15 Rpt: 14/31	2	FILER NAME Nelson, Jane (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020673
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 983.82
6	PAYMENT	(a) Amount Charged \$80.72	(b) Date of Charge 01/10/2024	(c) Date(s) Credit Card Issuer Paid 02/10/2024	
7	PAYEE	(a) Payee name AT&T Uverse		(b) Payee address; City, State, Zip Code 208 S. Akard St. Dallas, TX 75202	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Communication	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$10.83	(b) Date of Charge 01/13/2024	(c) Date(s) Credit Card Issuer Paid 02/10/2024		
PAYEE	(a) Payee name AT&T Mobility		(b) Payee address; City, State, Zip Code PO Box 6463 Carol Stream, IL 60197		
PURPOSE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Communication	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
PAYMENT	(a) Amount Charged \$151.67	(b) Date of Charge 01/23/2024	(c) Date(s) Credit Card Issuer Paid 02/10/2024		
PAYEE	(a) Payee name AT&T Mobility		(b) Payee address; City, State, Zip Code PO Box 6463 Carol Stream, IL 60197		
PURPOSE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Communication	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 3/15 Rpt: 15/31	2	FILER NAME Nelson, Jane (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020673
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 983.82
6	PAYMENT	(a) Amount Charged \$695.00	(b) Date of Charge 01/26/2024	(c) Date(s) Credit Card Issuer Paid 02/10/2024	
7	PAYEE	(a) Payee name American Express		(b) Payee address; City, State, Zip Code PO Box 650448 Dallas, TX 75265	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Annual Membership Fee	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 01/30/2024	(c) Date(s) Credit Card Issuer Paid 03/07/2024	
7	PAYEE	(a) Payee name Go Creative Group		(b) Payee address; City, State, Zip Code 5511 Parkcrest Drive Ste. 103 Austin, TX 78731	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Online Outreach	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$302.00	(b) Date of Charge 02/01/2024	(c) Date(s) Credit Card Issuer Paid 03/07/2024	
7	PAYEE	(a) Payee name Advantage Storage		(b) Payee address; City, State, Zip Code 850 Gerault Road Flower Mound, TX 75028	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Storage	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 4/15 Rpt: 16/31	2	FILER NAME Nelson, Jane (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020673
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 983.82
6	PAYMENT	(a) Amount Charged \$26.27	(b) Date of Charge 02/01/2024	(c) Date(s) Credit Card Issuer Paid 03/07/2024	
7	PAYEE	(a) Payee name Hill Country Springs		(b) Payee address; City, State, Zip Code 10019 S I-35 Frontage Road Austin, TX 78747	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Supplies	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$80.72	(b) Date of Charge 02/11/2024	(c) Date(s) Credit Card Issuer Paid 03/07/2024		
PAYEE	(a) Payee name AT&T Uverse	(b) Payee address; City, State, Zip Code 208 S. Akard St. Dallas, TX 75202			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Description Communication			
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$134.20	(b) Date of Charge 02/25/2024	(c) Date(s) Credit Card Issuer Paid 03/07/2024		
PAYEE	(a) Payee name HEB	(b) Payee address; City, State, Zip Code 1000 East 41 Street Austin, TX 78751			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Description Supplies			
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 5/15 Rpt: 17/31	2	FILER NAME Nelson, Jane (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020673
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 983.82
6	PAYMENT	(a) Amount Charged \$202.43	(b) Date of Charge 02/26/2024	(c) Date(s) Credit Card Issuer Paid 03/07/2024	
7	PAYEE	(a) Payee name Central Market		(b) Payee address; City, State, Zip Code 4001 N Lamar Blvd Austin, TX 78756	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Supplies	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$2,500.00	(b) Date of Charge 02/29/2024	(c) Date(s) Credit Card Issuer Paid 04/17/2024	
7	PAYEE	(a) Payee name PediPlace		(b) Payee address; City, State, Zip Code 502 S. Old Orchard Ln. Ste. 126 Lewisville, TX 75067	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Event Sponsorship	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$302.00	(b) Date of Charge 03/01/2024	(c) Date(s) Credit Card Issuer Paid 04/17/2024	
7	PAYEE	(a) Payee name Advantage Storage		(b) Payee address; City, State, Zip Code 850 Gerault Road Flower Mound, TX 75028	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Storage	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 6/15 Rpt: 18/31	2	FILER NAME Nelson, Jane (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020673
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 983.82
6	PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 03/01/2024	(c) Date(s) Credit Card Issuer Paid 04/17/2024	
7	PAYEE	(a) Payee name Go Creative Group		(b) Payee address; City, State, Zip Code 5511 Parkcrest Drive Ste. 103 Austin, TX 78731	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Online Outreach	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$59.02	(b) Date of Charge 03/01/2024	(c) Date(s) Credit Card Issuer Paid 04/17/2024	
7	PAYEE	(a) Payee name Hill Country Springs		(b) Payee address; City, State, Zip Code 10019 S I-35 Frontage Road Austin, TX 78747	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Supplies	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$61.81	(b) Date of Charge 03/05/2024	(c) Date(s) Credit Card Issuer Paid 04/17/2024	
7	PAYEE	(a) Payee name HEB		(b) Payee address; City, State, Zip Code 1000 East 41 Street Austin, TX 78751	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Supplies	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 7/15 Rpt: 19/31	2	FILER NAME Nelson, Jane (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020673
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 983.82
6	PAYMENT	(a) Amount Charged \$468.28	(b) Date of Charge 03/05/2024	(c) Date(s) Credit Card Issuer Paid 04/17/2024	
7	PAYEE	(a) Payee name iFratelli		(b) Payee address; City, State, Zip Code 501 W. 15th Street Austin, TX 78707	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Meals for Staff	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$80.72	(b) Date of Charge 03/10/2024	(c) Date(s) Credit Card Issuer Paid 04/17/2024		
PAYEE	(a) Payee name AT&T Uverse		(b) Payee address; City, State, Zip Code 208 S. Akard St. Dallas, TX 75202		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Communication		
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$429.14	(b) Date of Charge 03/10/2024	(c) Date(s) Credit Card Issuer Paid 04/17/2024		
PAYEE	(a) Payee name Eddie V's		(b) Payee address; City, State, Zip Code 301 E. 5th Street Austin, TX 78701		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Meals for Officeholder Meeting		
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 8/15 Rpt: 20/31	2	FILER NAME Nelson, Jane (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020673
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 983.82
6	PAYMENT	(a) Amount Charged \$302.00	(b) Date of Charge 04/01/2024	(c) Date(s) Credit Card Issuer Paid 05/10/2024	
7	PAYEE	(a) Payee name Advantage Storage		(b) Payee address; City, State, Zip Code 850 Gerault Road Flower Mound, TX 75028	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Storage	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$60.27	(b) Date of Charge 04/01/2024	(c) Date(s) Credit Card Issuer Paid 05/10/2024	
7	PAYEE	(a) Payee name Hill Country Springs		(b) Payee address; City, State, Zip Code 10019 S I-35 Frontage Road Austin, TX 78747	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Supplies	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$80.72	(b) Date of Charge 04/10/2024	(c) Date(s) Credit Card Issuer Paid 05/10/2024	
7	PAYEE	(a) Payee name AT&T Uverse		(b) Payee address; City, State, Zip Code 208 S. Akard St. Dallas, TX 75202	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Communication	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 9/15 Rpt: 21/31	2	FILER NAME Nelson, Jane (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020673
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 983.82
6	PAYMENT	(a) Amount Charged \$339.42	(b) Date of Charge 04/12/2024	(c) Date(s) Credit Card Issuer Paid 05/10/2024	
7	PAYEE	(a) Payee name iFratelli		(b) Payee address; City, State, Zip Code 501 W. 15th Street Austin, TX 78707	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Meals for Staff	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$340.33	(b) Date of Charge 04/26/2024	(c) Date(s) Credit Card Issuer Paid 05/10/2024		
PAYEE	(a) Payee name Fully Promoted		(b) Payee address; City, State, Zip Code 3419 Cross Timbers Road Flower Mound, TX 75028		
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Napkins for Reception Event		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
PAYMENT	(a) Amount Charged \$2,098.72	(b) Date of Charge 04/26/2024	(c) Date(s) Credit Card Issuer Paid 05/10/2024		
PAYEE	(a) Payee name Fully Promoted		(b) Payee address; City, State, Zip Code 3419 Cross Timbers Road Flower Mound, TX 75028		
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Lapel pins		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 10/15 Rpt: 22/31	2	FILER NAME Nelson, Jane (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020673
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 983.82
6	PAYMENT	(a) Amount Charged \$176.40	(b) Date of Charge 04/29/2024	(c) Date(s) Credit Card Issuer Paid 06/18/2024	
7	PAYEE	(a) Payee name American Express		(b) Payee address; City, State, Zip Code PO Box 650448 Dallas, TX 75265	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Annual Membership Fee	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$302.00	(b) Date of Charge 05/01/2024	(c) Date(s) Credit Card Issuer Paid 06/18/2024		
PAYEE	(a) Payee name Advantage Storage		(b) Payee address; City, State, Zip Code 850 Gerault Road Flower Mound, TX 75028		
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Storage		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
PAYMENT	(a) Amount Charged \$361.73	(b) Date of Charge 05/01/2024	(c) Date(s) Credit Card Issuer Paid 06/18/2024		
PAYEE	(a) Payee name Food Heads		(b) Payee address; City, State, Zip Code 616 W. 34th Street Austin, TX 78705		
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meals for Staff		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	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 F4: Sch: 11/15 Rpt: 23/31	2	FILER NAME Nelson, Jane (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020673
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 983.82
6	PAYMENT	(a) Amount Charged \$137.26	(b) Date of Charge 05/01/2024	(c) Date(s) Credit Card Issuer Paid 06/18/2024	
7	PAYEE	(a) Payee name Hill Country Springs		(b) Payee address; City, State, Zip Code 10019 S I-35 Frontage Road Austin, TX 78747	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Supplies	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$672.72	(b) Date of Charge 05/03/2024	(c) Date(s) Credit Card Issuer Paid 06/18/2024		
PAYEE	(a) Payee name Brewtorium	(b) Payee address; City, State, Zip Code 6015 Dillard Circle Austin, TX 78752			
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Staff Development		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
PAYMENT	(a) Amount Charged \$80.72	(b) Date of Charge 05/11/2024	(c) Date(s) Credit Card Issuer Paid 06/18/2024		
PAYEE	(a) Payee name AT&T Uverse	(b) Payee address; City, State, Zip Code 208 S. Akard St. Dallas, TX 75202			
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Communication		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 12/15 Rpt: 24/31		2 FILER NAME Nelson, Jane (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020673	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 983.82	
6 PAYMENT		(a) Amount Charged \$321.97	(b) Date of Charge 05/15/2024	(c) Date(s) Credit Card Issuer Paid 06/18/2024	
7 PAYEE		(a) Payee name Eddie V's		(b) Payee address; City, State, Zip Code 301 E. 5th Street Austin, TX 78701	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meals for Officeholder Meeting	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$303.13	(b) Date of Charge 05/21/2024	(c) Date(s) Credit Card Issuer Paid 06/18/2024	
PAYEE		(a) Payee name iFratelli		(b) Payee address; City, State, Zip Code 501 W. 15th Street Austin, TX 78707	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meals for Staff	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$500.00	(b) Date of Charge 06/13/2024	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Go Creative Group		(b) Payee address; City, State, Zip Code 5511 Parkcrest Drive Ste. 103 Austin, TX 78731	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Online Outreach	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 13/15 Rpt: 25/31	2	FILER NAME Nelson, Jane (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020673
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 983.82
6	PAYMENT	(a) Amount Charged \$80.72	(b) Date of Charge 06/10/2024	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name AT&T Uverse		(b) Payee address; City, State, Zip Code 208 S. Akard St. Dallas, TX 75202	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Communication	
		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$302.00	(b) Date of Charge 06/01/2024	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Advantage Storage		(b) Payee address; City, State, Zip Code 850 Gerault Road Flower Mound, TX 75028	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Storage	
		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$49.91	(b) Date of Charge 06/12/2024	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name HEB		(b) Payee address; City, State, Zip Code 1000 East 41 Street Austin, TX 78751	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Supplies	
		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 14/15 Rpt: 26/31	2	FILER NAME Nelson, Jane (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020673
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 983.82
6	PAYMENT	(a) Amount Charged \$946.74	(b) Date of Charge 05/02/2024	(c) Date(s) Credit Card Issuer Paid 06/18/2024	
7	PAYEE	(a) Payee name Rosewood Mansion at Turtle		(b) Payee address; City, State, Zip Code 2821 Turtle Creek Blvd Dallas, TX 75219	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meals for Officeholder Meeting	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$314.21	(b) Date of Charge 05/01/2024	(c) Date(s) Credit Card Issuer Paid 06/18/2024		
PAYEE	(a) Payee name Four Seasons Hotel	(b) Payee address; City, State, Zip Code 98 San Jacinto Blvd Austin, TX 78701			
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meals for Officeholder Meeting		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
PAYMENT	(a) Amount Charged \$60.27	(b) Date of Charge 06/01/2024	(c) Date(s) Credit Card Issuer Paid		
PAYEE	(a) Payee name Hill Country Springs	(b) Payee address; City, State, Zip Code 10019 S I-35 Frontage Road Austin, TX 78747			
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Supplies		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | 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 F4: Sch: 15/15 Rpt: 27/31	2 FILER NAME Nelson, Jane (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020673
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 983.82
6 PAYMENT	(a) Amount Charged \$3,500.00	(b) Date of Charge 02/11/2024	(c) Date(s) Credit Card Issuer Paid 03/07/2024
7 PAYEE	(a) Payee name Denton County Republican		(b) Payee address; City, State, Zip Code PO BOX 50748 Denton, TX 76206
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/3 Rpt: 28/31
2 FILER NAME Nelson, Jane (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020673
4 Date 01/03/2024	5 Name of person from whom amount is received Fidelity Investments	8 Amount (\$) \$4,713.17
	6 Address of person from whom amount is received; City; State; Zip Code Southlake, TX 76092	
	7 Purpose for which amount is received cash dividend received <input type="checkbox"/> Check if political contribution returned to filer	
Date 01/31/2024	Name of person from whom amount is received Fidelity Investments	Amount (\$) \$212.16
	Address of person from whom amount is received; City; State; Zip Code Southlake, TX 76092	
	Purpose for which amount is received cash dividend received <input type="checkbox"/> Check if political contribution returned to filer	
Date 02/06/2024	Name of person from whom amount is received Fidelity Investments	Amount (\$) \$4,353.16
	Address of person from whom amount is received; City; State; Zip Code Southlake, TX 76092	
	Purpose for which amount is received cash dividend received <input type="checkbox"/> Check if political contribution returned to filer	
Date 02/29/2024	Name of person from whom amount is received Fidelity Investments	Amount (\$) \$208.75
	Address of person from whom amount is received; City; State; Zip Code Southlake, TX 76092	
	Purpose for which amount is received cash dividend received <input type="checkbox"/> Check if political contribution returned to filer	
Date 03/06/2024	Name of person from whom amount is received Fidelity Investments	Amount (\$) \$4,260.37
	Address of person from whom amount is received; City; State; Zip Code Southlake, TX 76092	
	Purpose for which amount is received cash dividend received <input type="checkbox"/> Check if political contribution returned to filer	

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 2/3 Rpt: 29/31
2 FILER NAME Nelson, Jane (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020673
4 Date 03/28/2024	5 Name of person from whom amount is received Fidelity Investments	8 Amount (\$) \$242.37
	6 Address of person from whom amount is received; City; State; Zip Code Southlake, TX 76092	
	7 Purpose for which amount is received cash dividend received <input type="checkbox"/> Check if political contribution returned to filer	
Date 04/04/2024	Name of person from whom amount is received Fidelity Investments	Amount (\$) \$4,391.39
	Address of person from whom amount is received; City; State; Zip Code Southlake, TX 76092	
	Purpose for which amount is received cash dividend received <input type="checkbox"/> Check if political contribution returned to filer	
Date 04/30/2024	Name of person from whom amount is received Fidelity Investments	Amount (\$) \$247.98
	Address of person from whom amount is received; City; State; Zip Code Southlake, TX 76092	
	Purpose for which amount is received cash dividend received <input type="checkbox"/> Check if political contribution returned to filer	
Date 05/06/2024	Name of person from whom amount is received Fidelity Investments	Amount (\$) \$4,510.86
	Address of person from whom amount is received; City; State; Zip Code Southlake, TX 76092	
	Purpose for which amount is received cash dividend received <input type="checkbox"/> Check if political contribution returned to filer	
Date 05/31/2024	Name of person from whom amount is received Fidelity Investments	Amount (\$) \$269.98
	Address of person from whom amount is received; City; State; Zip Code Southlake, TX 76092	
	Purpose for which amount is received cash dividend received <input type="checkbox"/> Check if political contribution returned to filer	

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 3/3 Rpt: 30/31
2 FILER NAME Nelson, Jane (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020673
4 Date 06/05/2024	5 Name of person from whom amount is received Fidelity Investments	8 Amount (\$) \$4,444.36
6 Address of person from whom amount is received; City; State; Zip Code Southlake, TX 76092		
7 Purpose for which amount is received cash dividend received <input type="checkbox"/> Check if political contribution returned to filer		
Date 06/28/2024	5 Name of person from whom amount is received Fidelity Investments	8 Amount (\$) \$281.31
6 Address of person from whom amount is received; City; State; Zip Code Southlake, TX 76092		
Purpose for which amount is received cash dividend received <input type="checkbox"/> Check if political contribution returned to filer		

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: Sch: 1/1 Rpt: 31/31
2 FILER NAME Nelson, Jane (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020673
4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Texas Economic Development Corporation		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
6 Dates of Travel 01/18/2024 01/29/2024	7 Name of person(s) traveling Hanley, Beau	
	8 Departure city or name of departure location Austin	
	9 Destination city or name of destination location Mumbai, India	
10 Means of transportation Commercial Airplane	11 Purpose of travel (including name of conference, seminar, or other event) Travel for trade mission to India	
Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Texas Economic Development Corporation		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
Dates of Travel 01/17/2024 02/01/2024	Name of person(s) traveling Nelson, James Michael	
	Departure city or name of departure location Dallas	
	Destination city or name of destination location Mumbai, India	
Means of transportation Commercial Airplane	Purpose of travel (including name of conference, seminar, or other event) Travel for trade mission to India	
Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Texas Economic Development Corporation		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
Dates of Travel 01/17/2024 02/01/2024	Name of person(s) traveling Nelson, Jane (The Honorable)	
	Departure city or name of departure location Dallas	
	Destination city or name of destination location Mumbai, India	
Means of transportation Commercial Airplane	Purpose of travel (including name of conference, seminar, or other event) Travel for trade mission to India	