CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple	ete this form.	1 Filer ID (Ethics Commiss 00020673	sion Filers)	Total pages filed: 31
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable	Jane			Date Received
10.00					ELECTRONICALLY FILED
	NICKNAME	LAST		SUFFIX	07/15/2024
		Nelson			
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING	P. O. Box 608				
ADDRESS					Receipt # Amount
Change of Address	Grapevine, TX 76099				
	Grapevine, 17, 70033				Date Processed
					Date Imaged
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI	
NAME	Mr.	James Michae	I		
	NICKNAME	LAST		SUFFIX	
		Nelson			
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	APT	/ SUITE #; CITY;	STATE; ZIP CODE
TREASURER	1109 Buckingham Place				
ADDRESS					
(Residence or Business)	Copper Canyon, TX 75077	7			
	Copper Carlyon, 17 75077				
7 CAMPAIGN	AREA CODE PHON	E NUMBER E	EXTENSION		
TREASURER	(214) 850-0700				
PHONE					
8 REPORT					
TYPE	January 15	30th day before	election	Runoff	15th day after campaign treasurer
		-		_	depointment (officeholder only)
	X July 15	8th day before		Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year			Month Day	Year
COVERED	01/01/2024	TH	IROUGH	06/30/202	4
10 ELECTION	ELECTION DATE			ELECTION TYPE	
	Month Day Year	P	rimary	Runoff	Other
		│ □G	eneral	Special	
11 OFFICE	OFFICE HELD (if any)	l		12 OFFICE SOUGHT	(if known)
III OFFICE	Secretary of State			12 OFFICE SOUGHT	(II KIIOWII)
	Secretary of State				
		GO T	O PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 31

13 C / OH NAME	Nelson, Jane (The Ho	onorable)	14 Filer ID (I	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without a d officeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION	1. TOTAL UNITEM	ZED POLITICAL CONTRIBUTIONS (OTHER THA	N PLEDGES LOANS	
TOTALS	OR GUARANTE	ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
	(OTHER THAN I	AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 1,450.74
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 87,491.33
CONTRIBUTION BALANCE	REPORTING PE			\$ 1,299,167.05
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 penalty true and correct and includes a under Title 15, Election Code.		
		The Ho	norable Jane Nelson	
		Signature of	Candidate or Officehold	der
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			CC	OVER SHEET PG 3 3 of 31
18 FILI Nel		ME ane (The Honorable)	19 Filer ID 00020673	(Ethics Commission Filers)
		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE E: LOANS		\$
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 67,715.19
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$ 28,135.86
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 19,776.14
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$ 28,135.86
I				

SCHEDULE F1

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

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	ete this form.		
1	Total pages Schedule F1:	2 FILER NAME	3	Filer ID	(Ethics Commission Filers)
	Sch: 1/6 Rpt: 4/31	Nelson, Jane (The Honorable)		00020673	
4	Date	5 Payee name			
	02/10/2024	American Express			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$1,967.29	PO Box 650448			
		Dallas, TX 75265			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description		
	OF EXPENDITURE	Credit Card Payment		tside of Texas. Con	nplete Schedule T.
	EXPENDITURE		_	X, officeholder livin	g expense
			Credit Card Pa	lyment	
_					
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought		Office h	eıa
<u> </u>	·				
	Date	Payee name			
	03/07/2024	American Express			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$4,450.93	PO Box 650448			
		Dallas, TX 75265			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description		
	OF EXPENDITURE	Credit Card Payment	—	tside of Texas. Con	
			Credit Card Pa	X, officeholder livin	g expense
			orean carar a	tyrriont.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office h	eld
	expenditure to benefit C/O	•			
	Date	Payee name			
	04/17/2024	American Express			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$3,456.26	PO Box 650448			
	ψ0,400.20	1 & Box 655446			
		Dallas, TX 75265			
		·			
	PURPOSE OF	,	Description Check if travel out	tside of Texas. Con	onlete Schedule T
	EXPENDITURE	Credit Card Payment	<u> </u>	X, officeholder livin	•
			Credit Card Pa	yment	
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office h	eld
	expenditure to benefit C/O	1			
_					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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: 2/6 Rpt: 5/31	Nelson, Jane (The Honorable) 00020673
4	Date	5 Payee name
	06/18/2024	American Express
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5,926.38	PO Box 650448
		Dallas, TX 75265
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Payment
		Great Gura Layment
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	05/10/2024	American Express
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$1,217.21	PO Box 650448
		Dallas, TX 75265
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Payment
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	01/16/2024	Fidelity Investments
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$2,603.63	1576 E Southlake Blvd
		Southlake, TX 76092
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Advisor fee
		Auvisor ree
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
一		
ı		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributing/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/6 Rpt: 6/31	Nelson, Jane (The Honorable) 00020673
4	Date	5 Payee name
	04/12/2024	Fidelity Investments
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,642.84	1576 E Southlake Blvd
		Southlake, TX 76092
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Advisor fee
		Auvisor ree
_	Operation ONLY if all part	One districts (Office healths are seen
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/01/2024	Hambrick, Brooke
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	10041 Cross Bend Circle
		Frisco, TX 75033
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Professional services
		Professional services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/01/2024	Hambrick, Brooke
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	10041 Cross Bend Circle
		Frisco, TX 75033
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Professional services
_	Operation Objects "	Openhildets (Office helden manne
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	p = 1 = 1 2 = 2 = 1 3/3/	

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 Travel in District

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

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/6 Rpt: 8/31	Nelson, Jane (The Honorable) 00020673
4	Date	5 Payee name
	01/01/2024	Nelson, Dave
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5,000.00	3008 Pinecrest Drive
		Austin, TX 78757
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Professional services
		1 Tolessional services
_	Complete ONLY if direct	Constitute / Office helder mores Office accords
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/01/2024	Nelson, Dave
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	3008 Pinecrest Drive
		Austin, TX 78757
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Professional services
		Troissolena solviose
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	
	Date	Payee name Nelson Daye
	03/01/2024	Nelson, Dave
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	3008 Pinecrest Drive
		Austin, TX 78757
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Professional services
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onpenditure to beliefft C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations I Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/6 Rpt: 9/31	Nelson, Jane (The Honorable) 00020673
4	Date	5 Payee name
	04/17/2024	Nelson, Dave
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10,000.00	3008 Pinecrest Drive
		Austin, TX 78757
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Professional services
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	01/04/2024	Texas Economic Development Corporation
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$7,371.34	1005 Congress Ave. Ste. 600
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District X Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Trade mission to India
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experialitate to benefit 6/01	'

PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instru	uction Guide explains how to complete this form.	1 Total pages Schedule F3: Sch: 1/3 Rpt: 10/31
FILER NAME Nelson, Jane (The	. Honorable)	3 Filer ID (Ethics Commission Filers) 00020673
Date	5 Name of person from whom investment is purchased	000200.0
01/03/2024	Fidelity Investments	
02,00,202	6 Address of person from whom investment is purchased; City,	
	1576 E Southlake Blvd	, state, Zip code
	Southlake, TX 76092	
	7 Description of investment	
	Reinvested cash income	
	8 Amount of investment (\$)	
	4,713.17	
Date	Name of person from whom investment is purchased	
01/31/2024	Fidelity Investments	
	Address of person from whom investment is purchased; City	
	1576 E Southlake Blvd	
	Southlake, TX 76092	
	Description of investment	
	Reinvested cash income	
	Amount of investment (\$)	
	212.16	
Date	Name of person from whom investment is purchased	
02/06/2024	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	Name of person from whom investment is purchased	
02/29/2024	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 Instr	ruction Guide explains how to complete this form.	1 Total pages Schedule F3: Sch: 2/3 Rpt: 11/31
FILER NAME		3 Filer ID (Ethics Commission Filers)
Nelson, Jane (The	e Honorable)	00020673
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 1576 E Southlake Blvd	; State; Zip Code
	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 1576 E Southlake Blvd	
	Southlake, TX 76092	
	Description of investment Reinvested cash income	
	Amount of investment (\$) 242.37	
Date	Name of person from whom investment is purchased	
04/04/2024	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	Name of person from whom investment is purchased	
04/30/2024		
	Address of person from whom investment is purchased; City 1576 E Southlake Blvd	; State; Zip Code
	Southlake, TX 76092	
	Description of investment Reinvested cash income	
	Amount of investment (\$) 247.98	

PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instr	ruction Guide explains how to complete this form.	1 Total pages Schedule F3: Sch: 3/3 Rpt: 12/31
FILER NAME		3 Filer ID (Ethics Commission Filers)
Nelson, Jane (The	e Honorable)	00020673
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 1576 E Southlake Blvd 	; State; Zip Code
	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 1576 E Southlake Blvd	
	Southlake, TX 76092	
	Description of investment Reinvested cash income	
	Amount of investment (\$) 269.98	
Date	Name of person from whom investment is purchased	
06/05/2024	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 OC (20) 2024	Name of person from whom investment is purchased	
06/28/2024	Fidelity Investments	
	Address of person from whom investment is purchased; City 1576 E Southlake Blvd	; State; ZIP Code
	Southlake, TX 76092	
	Description of investment Reinvested cash income	
	Amount of investment (\$) 281.31	

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

Printing Expense Salaries/Wages/Contract Labor

Candidate/Officeriolide//Folitica		ruction Guide explains how	•	THEN (eller a calegory	not iisteu ai	Jove)
1 Total pages Schedule F4:		·	<u> </u>	3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 1/15 Rpt: 13/31	Nelson, Jane (The	Honorable)		00020673		
4 CREDIT CARD ISSUER	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	983.8	32
6 PAYMENT	(a) Amount Charged \$302.00	(b) Date of Charge 01/02/2024	(c) Date(s) Credit Card Issuel 02/10/2024	r Paid		
7 PAYEE	(a) Payee name Advantage Storage		(b) Payee address; 850 Gerault Road Flower Mound, TX 75028	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Storage			
Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.		officeholder living expe	ense	
9 Complete ONLY if direct expenditure to benefit C/OH (a) Assert Cleaned (b) Pate (c) Candidate/Office sought			e sought	Office held		
PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 01/02/2024	(c) Date(s) Credit Card Issuer 02/10/2024	r Paid		
PAYEE	PAYEE (a) Payee name Go Creative Group			City, 103	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	Austin, TX 78731 (b) Description Online Outreach			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$74.27	(b) Date of Charge 01/02/2024	(c) Date(s) Credit Card Issuer 02/10/2024	r Paid		
PAYEE (a) Payee name Hill Country Springs		(b) Payee address; 10019 S I-35 Frontage Ro Austin, TX 78747	City, pad	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Supplies			
Non-Political	(c) Check if travel outside Candidate/Officeholder		officeholder living expe	ense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	e sought	Office held				

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

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics	Commiss	sion Filers)						
Sch: 2/15 Rpt: 14/31	Nelson, Jane (The	Honorable)		00020673							
4 CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZED								
ISSUER	see pi	revious	EXPENDITURES CHARGED TO A CREDIT CARD	 \$	983.8	32					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid							
	\$80.72	01/10/2024	02/10/2024								
7 PAYEE	(a) Payee name	L	(b) Payee address;	City,	State,	Zip Code					
	AT&T Uverse		208 S. Akard St.								
			Dallas, TX 75202								
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cobodule)	(b) Description								
X Political	Office Overhead/Rent		Communication								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exper	nse						
9 Complete ONLY if direct											
expenditure to benefit C/OH	re to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid							
	\$10.83	01/13/2024	02/10/2024								
PAYEE	(a) Payee name (b) Payee address;				State,	Zip Code					
	AT&T Mobility		PO Box 6463								
			Carol Stream, IL 60197								
PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodula)	(b) Description								
EXPENDITURE	Office Overhead/Rent		Communication								
X Political		·									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		officeholder living exper	nse						
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held							
expenditure to benefit C/OH	(a) A	(l-) D-+ + Ol	(-) D-+-(-) O	- D-1:1							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer 02/10/2024	r Paid							
	\$151.67 	01/23/2024									
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code					
	AT&T Mobility		PO Box 6463								
			Carol Stream, IL 60197								
PURPOSE OF	(a) Category		(b) Description								
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Communication								
X Political											
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exper	nse						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
experialitate to benefit C/On											

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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Candidate/Officeriolide//Folitica		ruction Guide explains how	-	TILK (eliter a category	r not iisteu a	bove)	
1 Total pages Schedule F4:		·	·	3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 3/15 Rpt: 15/31	Nelson, Jane (The F	Honorable)		00020673		,	
4 CREDIT CARD ISSUER	Name of finar	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	983.8	32	
6 PAYMENT	(a) Amount Charged \$695.00	(b) Date of Charge 01/26/2024	(c) Date(s) Credit Card Issue 02/10/2024	r Paid			
7 PAYEE	(a) Payee name American Express		(b) Payee address; PO Box 650448 Dallas, TX 75265	City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of Fees	of this schedule)	(b) Description Annual Membership Fee				
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense		
9 Complete ONLY if direct	Complete ONLY if direct candidate/Officeholder name office sought expenditure to benefit C/OH						
<u> </u>			1				
PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 01/30/2024	(c) Date(s) Credit Card Issuel 03/07/2024	r Paid			
PAYEE	(b) Payee address;	City,	State,	Zip Code			
	Go Creative Group		5511 Parkcrest Drive Ste.	103			
DUDDOCE OF	(a) Catagon		Austin, TX 78731 (b) Description				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of Advertising Expense	of this schedule)	Online Outreach				
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$302.00	(b) Date of Charge 02/01/2024	(c) Date(s) Credit Card Issue 03/07/2024	r Paid			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Advantage Storage		850 Gerault Road				
DUDDOSE OF	(a) Category		Flower Mound, TX 75028 (b) Description				
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)			Storage				
X Political	Office Overhead/Rent	Storage					
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
Complete ONLY if direct expenditure to benefit C/OH							

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

Printing Expense Salaries/Wages/Contract Labor

Candidate/Officeriolide//Folitica	· · · · · · · · · · · · · · · · · · ·	ruction Guide explains how	· ·	TILK (enter a category i	ioi iisteu at	ove)	
1 Total pages Schedule F4:		<u> </u>	<u> </u>	3 Filer ID (Ethics	Commiss	sion Filers)	
Sch: 4/15 Rpt: 16/31	Nelson, Jane (The I	Honorable)		00020673			
4 CREDIT CARD ISSUER	Name of finar	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	983.8	32	
6 PAYMENT	(a) Amount Charged \$26.27	(b) Date of Charge 02/01/2024	(c) Date(s) Credit Card Issuer 03/07/2024	Paid			
7 PAYEE	(a) Payee name Hill Country Springs	5	(b) Payee address; 10019 S I-35 Frontage Ro Austin, TX 78747	City, State, Zip Code coad			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Supplies				
Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.		officeholder living expen	se		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH			1				
PAYMENT	(a) Amount Charged \$80.72	(b) Date of Charge 02/11/2024	(c) Date(s) Credit Card Issuer 03/07/2024	⁻ Paid			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	AT&T Uverse		208 S. Akard St.				
			Dallas, TX 75202				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Communication				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expen	se		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$134.20	(b) Date of Charge 02/25/2024	(c) Date(s) Credit Card Issuer 03/07/2024	⁻ Paid			
PAYEE	(a) Payee name		(b) Payee address; 1000 East 41 Street	City,	State,	Zip Code	
	HEB		Austin, TX 78751				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Supplies				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expen	se		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			

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

	The Instruction Guide explains how to complete this form.											
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	s Commiss	sion Filers)				
	Sch: 5/15 Rpt: 17/31	Nelson, Jane (The	Honorable)			00020673						
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	983.8	32				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid						
		\$202.43	02/26/2024	03/07/20)24							
7	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code				
		Central Market			∟amar Blvd							
				Austin, T								
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this echodula)	(b) Descri	•							
	X Political	Office Overhead/Rent		Supplies	i							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense					
9 Complete ONLY if direct Candidate/Officeholder name Office sought				Office held								
expenditure to benefit C/OH												
	PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issue			r Paid								
		\$2,500.00	02/29/2024	04/17/20	024							
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code				
		PediPlace		502 S. C	old Orchard Ln. St	te. 126						
				Lewisvill	e, TX 75067							
	PURPOSE OF	(a) Category		(b) Descri	ption							
	EXPENDITURE	(See Categories listed at the top Contributions/Donatio		Event Sponsorship								
	X Political	Candidate/Officeholde										
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense					
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held						
e	xpenditure to benefit C/OH											
	PAYMENT	(a) Amount Charged	(b) Date of Charge	` ') Credit Card Issue	r Paid						
		\$302.00	03/01/2024	04/17/20)24							
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code				
				850 Gera	ault Road							
		Advantage Storage										
				Flower M	Mound, TX 75028							
	PURPOSE OF	(a) Category		(b) Descri	ption							
	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	,	Storage								
	X Political											
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	ense					
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held						
e	xpenditure to benefit C/OH											
ı												

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	sion Filers)			
	Sch: 6/15 Rpt: 18/31	Nelson, Jane (The	Honorable)			00020673					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES GED TO A CREDIT	\$	983.8	32			
6	PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 03/01/2024	(c) Date(s) 04/17/20	Credit Card Issuel 24	r Paid					
7	PAYEE	(a) Payee name Go Creative Group		(b) Payee 5511 Par Austin, T	kcrest Drive Ste.	City, 103	State,	Zip Code			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description Online O	otion						
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense				
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
е	expenditure to benefit C/OH		T	T.,,							
	PAYMENT	(a) Amount Charged \$59.02	(b) Date of Charge 03/01/2024	(c) Date(s) 04/17/20	Credit Card Issuer 24	r Paid					
	Hill Country Springs			address; I-35 Frontage Ro X 78747	City, oad	State,	Zip Code				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Supplies							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living ex	pense				
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$61.81	(b) Date of Charge 03/05/2024	(c) Date(s) 04/17/20	Credit Card Issuer 24	r Paid					
	PAYEE	(a) Payee name HEB		(b) Payee 1000 Eas Austin, T	st 41 Street	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Descrip Supplies	_						
lacksquare	Non-Political	(c) Check if travel outside	0.001:26+	Check if Austin, TX,	Office hold	pense					
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
1											

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

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (E	Ethics Commiss	sion Filers)				
Sch: 7/15 Rpt: 19/31	Nelson, Jane (The	Honorable)			00020673						
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDI	\$	983.8	32				
6 PAYMENT	(a) Amount Charged \$468.28	(b) Date of Charge 03/05/2024	(c) Date(s) 04/17/20	Credit Card Issu 24	er Paid						
7 PAYEE	(a) Payee name iFratelli		(b) Payee a 501 W. 1	5th Street	City,	State,	Zip Code				
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Meals for	otion							
Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX	K, officeholder living	expense					
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held						
expenditure to benefit C/OH											
PAYMENT	(a) Amount Charged \$80.72	(b) Date of Charge 03/10/2024	(c) Date(s) 04/17/20	Credit Card Issu 24	er Paid						
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code				
	AT&T Uverse		208 S. Al	kard St.							
			Dallas, T								
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	K, officeholder living	expense					
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held						
expenditure to benefit C/OH											
PAYMENT	(a) Amount Charged \$429.14	(b) Date of Charge 03/10/2024	(c) Date(s) 04/17/20	Credit Card Issu 24	er Paid						
PAYEE	(a) Payee name	I	(b) Payee 3		City,	State,	Zip Code				
	Eddie V's										
DI IDDOSE OF	(a) Category		(b) Descrip								
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)				Officeholder M	eetina						
X Political Food/Beverage Expense				CHICCHOIGE W	Journa						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	<u>l</u>	Check if Austin T	K, officeholder living	expense					
Complete ONLY if direct Candidate/Officeholder name Office sought					Office held	- CAPCHOC					
expenditure to benefit C/OH			5								
	I										

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

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)					
Sch: 8/15 Rpt: 20/31	Nelson, Jane (The	Honorable)		00020673							
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	983.8	32					
6 PAYMENT	(a) Amount Charged \$302.00	(b) Date of Charge 04/01/2024	(c) Date(s) Credit Card Issuel 05/10/2024	r Paid							
7 PAYEE	(a) Payee name Advantage Storage		(b) Payee address; 850 Gerault Road	City,	State,	Zip Code					
	() -		Flower Mound, TX 75028								
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description								
l <u> </u>	Office Overhead/Rent		Storage								
X Political											
Non-Political	(1)	of Texas. Complete Schedule T.		officeholder living expe	ense						
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held							
expenditure to benefit C/OH			1								
PAYMENT	(a) Amount Charged \$60.27	(b) Date of Charge 04/01/2024	(c) Date(s) Credit Card Issuel 05/10/2024	r Paid							
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code					
	Hill Country Springs	5	10019 S I-35 Frontage Ro	pad							
			Austin, TX 78747								
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Supplies								
X Political		·									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense						
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held							
expenditure to benefit C/OH											
PAYMENT	(a) Amount Charged \$80.72	(b) Date of Charge 04/10/2024	(c) Date(s) Credit Card Issuer 05/10/2024	r Paid							
PAYEE	(a) Payee name AT&T Uverse		(b) Payee address; 208 S. Akard St. Dallas, TX 75202	City,	State,	Zip Code					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			(b) Description Communication								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							

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

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commiss	ion Filers)						
Sch: 9/15 Rpt: 21/31	Nelson, Jane (The	Honorable)		00020673							
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 983.8	2						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid							
	\$339.42	04/12/2024	05/10/2024								
7 PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code						
	iFratelli		501 W. 15th Street								
			Austin, TX 78707								
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this sahadula)	(b) Description								
EXPENDITURE X Political	Office Overhead/Rent	,	Meals for Staff								
Non-Political	(c) 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/OH											
PAYMENT	(a) Amount Charged \$340.33	(b) Date of Charge 04/26/2024	(c) Date(s) Credit Card Issue 05/10/2024	r Paid							
PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code						
	Fully Promoted		3419 Cross Timbers Road								
PURPOSE OF	(a) Category		Flower Mound, TX 75028 (b) Description								
EXPENDITURE X Political	(See Categories listed at the top Event Expense	of this schedule)	Napkins for Reception Event								
Non-Political	(2) 🗖 (2) + (3) + (4)	(T. 0. 1. 0. 1. T.		<i>(</i> , 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,							
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	officeholder living expense Office held							
Complete ONLY if direct expenditure to benefit C/OH	Cartaldate/Officeriolder	name ome	c sought	Office field							
PAYMENT	(a) Amount Charged \$2,098.72	(b) Date of Charge 04/26/2024	(c) Date(s) Credit Card Issue 05/10/2024	r Paid							
PAYEE	(a) Payee name	I .	(b) Payee address;	City, State,	Zip Code						
	Fully Promoted		3419 Cross Timbers Road	d							
			Flower Mound, TX 75028								
PURPOSE OF	(a) Category		(b) Description								
EXPENDITURE	(See Categories listed at the top Gift/Awards/Memorial	,	Lapel pins								
X Political	Gilly (wards/wicifiorial	з Ехрепзе									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense							
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held							

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

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethic	s Commiss	sion Filers)		
	Sch: 10/15 Rpt: 22/31	Nelson, Jane (The	Honorable)				00020673				
4	CREDIT CARD ISSUER		ncial institution revious	5	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$	983.8	32		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge			redit Card Issuer	Paid				
		\$176.40	04/29/2024	0	06/18/2024	ļ					
7	PAYEE	(a) Payee name	•	(b) Payee ad	dress;	City,	State,	Zip Code		
		American Express		P	O Box 65	0448					
				D	allas, TX	75265					
8	PURPOSE OF	(a) Category		(b) Description	on					
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Α	nnual Me	mbership Fee					
	X Political	1 003									
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.					Check if Austin, TX,	officeholder living expe	ense			
9					ought	_	Office held				
е	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge			redit Card Issuer	Paid				
		\$302.00	05/01/2024	0	06/18/2024	1					
H	PAYEE	(a) Payee name		(b) Payee ad	dress;	City,	State,	Zip Code		
		Advantage Storage		8	50 Geraul	t Road					
				$ _{F}$	lower Mou	und, TX 75028					
	PURPOSE OF	(a) Category		_) Description						
	EXPENDITURE	(See Categories listed at the top		S	torage						
	X Political	Office Overhead/Rent	tai Expense								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	ce so	ought		Office held				
е	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge			redit Card Issuer	Paid				
		\$361.73	05/01/2024	0	06/18/2024	•					
一	PAYEE	(a) Payee name	I	(b) Payee ad	dress;	City,	State,	Zip Code		
				6	16 W. 34t	h Street					
		Food Heads									
				Α	ustin, TX	78705					
	PURPOSE OF	(a) Category		Ι`) Description						
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		M	leals for S	staff					
	X Political	. 300/2010/ago Expo									
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.					Check if Austin, TX,	officeholder living expe	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	ce so	ought		Office held				
е	xpenditure to benefit C/OH										

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Et	thics Commiss	sion Filers)			
	Sch: 11/15 Rpt: 23/31	Nelson, Jane (The	Honorable)			00020673					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZEI IDITURES GED TO A CRED	\$	983.8	32			
6	PAYMENT	(a) Amount Charged \$137.26	(b) Date of Charge 05/01/2024	(c) Date(s 06/18/20) Credit Card Issu 124	uer Paid					
7	PAYEE	(a) Payee name Hill Country Springs	5	(b) Payee 10019 S Austin, T	I-35 Frontage F	City, Road					
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Descri Supplies	ption						
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, T	X, officeholder living	expense				
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$672.72	(b) Date of Charge 05/03/2024	(c) Date(s 06/18/20) Credit Card Issu 124	ıer Paid					
	PAYEE	(a) Payee name Brewtorium		(b) Payee address; 6015 Dillard Circle		City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		Austin, T (b) Descri Staff Dev							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, T	X, officeholder living e	expense				
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$80.72	(b) Date of Charge 05/11/2024	(c) Date(s 06/18/20) Credit Card Issu 124	uer Paid					
	PAYEE	(a) Payee name AT&T Uverse	1	(b) Payee 208 S. A Dallas, T	kard St.	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Descri	nication						
lacksquare	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	0 001:24	Check if Austin, T	X, officeholder living of	expense				
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
ı											

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

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)			
	Sch: 12/15 Rpt: 24/31	Nelson, Jane (The	Honorable)			00020673					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	983.8	32			
6	PAYMENT	(a) Amount Charged \$321.97	(b) Date of Charge 05/15/2024	(c) Date(s) 06/18/20) Credit Card Issue 24	r Paid					
7	PAYEE	(a) Payee name Eddie V's		(b) Payee 301 E. 5t Austin, T	h Street	City,	State,	Zip Code			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	*	(b) Descrip		eeting					
L	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense				
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$303.13	(b) Date of Charge 05/21/2024	(c) Date(s) 06/18/20) Credit Card Issue 24	r Paid					
	PAYEE	(a) Payee name iFratelli		(b) Payee 501 W. 1 Austin, T	5th Street	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descrip	otion						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense				
l e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 06/13/2024	(c) Date(s)) Credit Card Issue	r Paid					
	PAYEE	(a) Payee name Go Creative Group		(b) Payee 5511 Pai Austin, T	kcrest Drive Ste.	City, . 103	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political Non-Political	(a) Category (See Categories listed at the top Advertising Expense	,	(b) Descri Online O	utreach	off-about 11					
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.					Check if Austin, TX,	officeholder living exp	oense				
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Onice nelu					
٦											

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

The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	e F4: 2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
	Sch: 13/15 Rpt: 25/31	Nelson, Jane (The Honorable)				00020673			
4	CREDIT CARD ISSUER	Name of financial institution see previous			L OF UNITEMIZED NDITURES GED TO A CREDIT	\$	983.8	32	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
		\$80.72	06/10/2024						
7	PAYEE	(a) Payee name		(b) Paye	e address;	City,	State,	Zip Code	
	AT&T Uverse				Akard St.				
				Dallas,	TX 75202				
8	PURPOSE OF	(a) Category		(b) Desci	ription				
l	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	*	Commu	ınication				
l	X Political	Office Overflead/Refin	iai Experise						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	, officeholder living exp	ense		
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
е	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
		\$302.00	06/01/2024						
Г	PAYEE	(a) Payee name		(b) Paye	e address;	City,	State,	Zip Code	
		Advantage Storage		850 Ge	rault Road				
l				Flower	Mound, TX 75028	1			
Н	PURPOSE OF	(a) Category		(b) Desci					
	EXPENDITURE	(See Categories listed at the top			!				
	X Political	Office Overhead/Rent	tai Expense						
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
е	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
		\$49.91	06/12/2024						
Г	PAYEE	(a) Payee name		(b) Paye	e address;	City,	State,	Zip Code	
l				1000 Ea	ast 41 Street				
l		HEB							
				Austin,	TX 78751				
	PURPOSE OF	(a) Category		(b) Desci	ription				
EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense				Supplie	S				
1	X Political	Onice Overneau/Rem	iai Eypeiise						
	Non-Political	(c) Check if travel outside		Check if Austin, TX,	, officeholder living exp	ense			
Г	Complete ONLY if direct	Candidate/Officeholder	e sought	_ 	Office held				
е	xpenditure to benefit C/OH								

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

The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission File							
Sch: 14/15 Rpt: 26/31	Nelson, Jane (The	00020673							
4 CREDIT CARD ISSUER	Name of finar see pi	5 TOTAL OF UN EXPENDITUR CHARGED TO CARD	ES	\$	983.8	32			
6 PAYMENT	(a) Amount Charged \$946.74	(b) Date of Charge 05/02/2024	(c) Date(s) Credit 06/18/2024	Paid					
7 PAYEE	(a) Payee name Rosewood Mansior	n at Turtle	(b) Payee addres 2821 Turtle Cre Dallas, TX 752	eek Blvd	City,	State,	Zip Code		
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Meals for Officeholder Me			eholder Mee	eting				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Che	ck if Austin, TX, o	, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held				
PAYMENT	(a) Amount Charged \$314.21	(b) Date of Charge 05/01/2024	(c) Date(s) Credit 06/18/2024	Card Issuer	Paid				
PAYEE	(a) Payee name Four Seasons Hote	el	(b) Payee addres 98 San Jacinto Austin, TX 7870	Blvd	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	EXPENDITURE (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meals for Office		eting				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Che	ck if Austin, TX, o	fficeholder living exp	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e 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	s	(b) Payee addres 10019 S I-35 F Austin, TX 787	rontage Roa	City, ad	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	(b) Description Supplies								
Non-Political	`	of Texas. Complete Schedule T.		ck if Austin, TX, o	officeholder living exp	ense			
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Food/Beve Gift/Awards Legal Servi	age Expense /Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Travel in District Travel Out of District	egory not listed above)
	The Insti	uction Guide explains h	ow to complete this form.		
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (E	thics Commission Filers)
Sch: 15/15 Rpt: 27/31	Nelson, Jane (The I	Honorable)		00020673	
4 CREDIT CARD ISSUER		ncial institution evious	5 TOTAL OF UNITEMIZI EXPENDITURES CHARGED TO A CRE CARD	 \$	983.82
6 PAYMENT	(a) Amount Charged \$3,500.00	(b) Date of Charge 02/11/2024	(c) Date(s) Credit Card Is: 03/07/2024	suer Paid	
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State, Zip Code
	Denton County Rep	ublican	PO BOX 50748		
	() 2		Denton, TX 76206		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Donation		
X Political	Contributions/Donatio Candidate/Officeholde				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin	, TX, officeholder living	expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Of	fice sought	Office held	

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

SCHEDULE K

	The Instru	nages Schedule K: L/3 Rpt: 28/31						
2	FILER NAME			C (Ethics Commission Filers)				
	Nelson, Jane	e (1	The Honorable)	00020	0673			
4	Date	5	Name of person from whom amount is received		8 Amount (\$)			
	01/03/2024		Fidelity Investments	\$4,713.17				
		6	Address of person from whom amount is received; City; State; Zip Code					
			Coutblete TV 70000					
		Ļ	Southlake, TX 76092					
		7	Purpose for which amount is received Check cash dividend received	ribution returned to filer				
			Casif dividend received					
	Date		Name of person from whom amount is received			Amount (\$)		
	01/31/2024	ļ	Fidelity Investments			\$212.16		
			Address of person from whom amount is received; City; State; Zip Code					
			Southlake, TX 76092					
		lribution returned to filer						
		ribution returned to liler						
			1					
	Date		Name of person from whom amount is received	Amount (\$)				
	02/06/2024 Fidelity Investments Address of person from whom amount is received; City; State; Zip Code				\$4,353.16			
			Southlake, TX 76092					
		ribution returned to filer						
_	Date		Name of person from whom amount is received			Amount (\$)		
	02/29/2024		Fidelity Investments			\$208.75		
		ļ	Address of person from whom amount is received; City; State; Zip Code			•		
		cal cont	ribution returned to filer					
			cash dividend received					
	Date		Name of person from whom amount is received			Amount (\$)		
	03/06/2024 Fidelity Investments					\$4,260.37		
		l''''	Address of person from whom amount is received; City; State; Zip Code			•		
		L	Southlake, TX 76092 Purpose for which amount is received Check					
		ribution returned to filer						
	cash dividend received							

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

SCHEDULE K

	The Instru	ages Schedule K: 2/3 Rpt: 29/31						
2	FILER NAME			Filer ID	(Ethics Commission Filers)			
	Nelson, Jane	e (1	The Honorable)	00020	0673			
4	Date	5	Name of person from whom amount is received			8 Amount (\$)		
	03/28/2024		Fidelity Investments			\$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	if politi	cal cont	ribution returned to filer		
			cash dividend received					
	Date	Ħ	Name of person from whom amount is received	Amount (\$)				
	04/04/2024		Fidelity Investments			\$4,391.39		
		ļ	Address of person from whom amount is received; City; State; Zip Code					
		ribution returned to filer						
	Date		Name of person from whom amount is received	Amount (\$)				
	04/30/2024 Fidelity Investments					\$247.98		
			Southlake, TX 76092					
		Iribution returned to filer						
_	Date		Name of person from whom amount is received			Amount (\$)		
	05/06/2024		Fidelity Investments			\$4,510.86		
		ļ	Address of person from whom amount is received; City; State; Zip Code					
		L	Southlake, TX 76092					
				if politi	cal cont	ribution returned to filer		
			cash dividend received					
	Date		Name of person from whom amount is received			Amount (\$)		
	05/31/2024 Fidelity Investments					\$269.98		
			Address of person from whom amount is received; City; State; Zip Code					
			Southlake, TX 76092					
		H		ribution returned to filer				
		ribution returned to filer						
		<u> </u>	cash dividend received					

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

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

SCHEDULE T

The Inst	ruction C	Guide explains	1 Total pages Schedule T: Sch: 1/1 Rpt: 31/31						
2 FILER NAME Nelson, Jane (T					3 Filer ID (Ethics Commission Filers) 00020673				
`			ınization / Pledgor /Paye	ee	I				
	•	nent Corporation	,						
	ntribution / Expenditure reported on:								
Schedule A2	_	Schedule B	Schedule B(J)	Schedule C2	Schedule D	X Schedule F1			
Schedule F2	브	Schedule F4	Schedule G	Schedule H	Schedule COH-UC	X Golledaie 11			
6 Dates of Travel	7 Name of person(s) traveling								
	Hanley, Beau								
	8 Depart	ure city or name of	departure location						
01/18/2024	Austin								
	9 Destina	ation city or name o	f destination location						
01/29/2024	Mumb	ai, India							
10 Means of transpor	rtation	11 Purpose of tra	vel (including name of co	onference, seminar, or	other event)				
Commercial Airı	plane	Travel for tra	de mission to India						
Name of Contribu	tor / Corpora	ation or Labor Orga	nization / Pledgor /Paye	ee					
		nent Corporation							
Contribution / Exp									
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D	X Schedule F1			
Schedule F2	브	Schedule F4	Schedule G	Schedule H	븓	<u> </u>			
Dates of Travel Name of person(s) traveling									
	Nelson, James Michael								
		ure city or name of	departure location						
01/17/2024	Dallas	i 							
	1	-	f destination location						
02/01/2024	Mumb	ai, India							
Means of transpor	rtation	Purpose of trav	vel (including name of co	onference, seminar, or	other event)				
Commercial Airı	plane	Travel for tra	de mission to India						
Name of Contribu	tor / Corpora	ation or Labor Orga	nization / Pledgor /Paye	ee					
Texas Economi	c Developr	ment Corporation							
Contribution / Exp	enditure rep	orted on:							
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D	X Schedule F1			
Schedule F2	H	Schedule F4	Schedule G	Schedule H	Schedule COH-UC				
	. – –								
Dates of Travel	1	of person(s) traveli	-						
		n, Jane (The Hon	· · · · · · · · · · · · · · · · · · ·						
Departure city or name of departure location 01/17/2024 Dallas									
								1	ation city or name o
02/01/2024 Mumbai, India									
Means of transportation Purpose of travel (including name of conference, seminar, or other event)									
Commercial Airplane Travel for trade mission to India									