CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to compl	lete this form.	1 Filer ID (Ethics Commis 00019652		2 Total pages fi 1	led: 90
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	Greg			Date Received ELECTRONIC	ALLY FILED
	NICKNAME	LAST		SUFFIX	07/15/2024	
		Abbott				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered of	or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	P. O. Box 308				Receipt#	Amount
Change of Address	Austin, TX 78767					
	, adding the rotton				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Mrs.	Cecilia P.				
	NICKNAME	LAST		SUFFIX		
	MORIVAINE	Abbott		301117		
		Abbott				
6 CAMPAIGN	STREET ADDRESS (NO PC	BOX PLEASE);	AP	/ SUITE #; CITY;	STA	ATE; ZIP CODE
TREASURER ADDRESS	502 E. 11th St. Ste. 300					
(Residence or Business)	Austin, TX 78701					
7 CAMPAIGN	AREA CODE PHON	NE NUMBER E	XTENSION			
TREASURER PHONE	(512) 477-2002					
8 REPORT TYPE	January 15	30th day before	alaction \square	Runoff	15th day after ca	mpaign treasurer
		30th day before	election	Kulloli	appointment (offi	
	X July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Atta	ach C/OH-FR)
9 PERIOD	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		rimary	Runoff	Other	
		│ □G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)	-		12 OFFICE SOUGHT	(if known)	
	Governor			Governor		
	1			1		
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 190

13 C / OH NAME	Abbott, Greg (The Ho	onorable)	14 Filer ID (00019652	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	the candidate's or office	ommittees to support the holder's knowledge or tice of such expenditures.	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	Texans for Greg Abbott		
		COMMITTEE ADDRESS		
	X SPECIFIC	PO Box 308		
		Austin, TX 78767		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Nau, John		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
		2229 San Felipe		
		Ste 1250		
		Houston, TX 77019		
16 CONTRIBUTION	1. TOTAL UNITEM	IIZED POLITICAL CONTRIBUTIONS (OTHER THA	N PLEDGES LOANS	
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 5,676,676.41
EXPENDITURE TOTALS	3. TOTAL UNITEM	IIZED POLITICAL EXPENDITURES		\$ 14,308.81
	4. TOTAL POLITIC	CAL EXPENDITURES		\$ 12,179,940.77
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L ERIOD	AST DAY OF THE	\$ 176,853.28
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF	PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING 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 Greg Abbott	
		Signature of	Candidate or Officehole	der
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to c	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

3 of 190

18 FIL	ER NAN	1E	19 Filer ID	(Ethi	cs Commission Filers)
Ab	bott, G	reg (The Honorable)	00019652		
20 SC	HEDUL	SUBTOTALS			CURTOTAL AMOUNT
NA	ME OF	SCHEDULE			SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	5,200,000.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	476,676.41
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			\$	12,146,571.78
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	33,368.99
9.	9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS			\$	
10.	10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$		
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	831,418.27

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages S Sch: 1/1 Rpt	
2	FILER NAME Abbott, Greg	g (The Honorable)		3 Filer ID (Eth 00019652	ics Commission Filers)
4	Date 02/21/2024			7 Amount of Co	ntribution (\$) \$500,000.00
		Austin, TX 78767			
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)	
	Date 03/07/2024	Full name of contributor out-of-state PAC (ID#:_ Texans for Greg Abbott Contributor address; City; State; Zip Code)	Amount of Co	ntribution (\$) \$500,000.00
	Principal occu	Austin, TX 78767 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 	
	Date 02/20/2024	Full name of contributor out-of-state PAC (ID#: Walton, Jim Contributor address; City; State; Zip Code)	Amount of Co	ntribution (\$) \$200,000.00
		Bentonville, AR 72712			
	Principal occu Investments	upation / Job title (See Instructions)	Employer (See Instructions Self	5)	
	Date 04/03/2024	Full name of contributor out-of-state PAC (ID#:_Yass, Jeff Contributor address; City; State; Zip Code Bala Cynwyd, PA 19004)	Amount of Co	ntribution (\$) \$4,000,000.00
	Principal occu Managing D	upation / Job title (See Instructions) irrector	Employer (See Instructions Susquehanna Internation	•	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/11 Rpt: 5/190
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	g (The Honorable)		00019652
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 03/19/2024	 Full name of contributor out-of-state PAC (ID#:)	8 Amount of contribution (\$) In-kind contribution description \$28,000.00 I Plane Use
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	
President		Midland Energy Inc	•
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 01/30/2024	Full name of contributor out-of-state PAC (ID#: Baker, Richard Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$11,692.18 Plane Use
	Mount Pleasant, TX 75455-7949		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
Owner		KRB Investments I	LLC
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 05/20/2024	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description \$10,972.73 I Plane Use
	Mount Pleasant, TX 75455-7949		Check if travel outside of Texas. Complete Schedule T.
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
Owner	refer to a local section (FOR ILIPIONAL)	KRB Investments	(FOR AUDIOIAL) (One instruction)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

The Instru	ction Guide explains how to complete this 1	form.	1 Total pages Schedule A2: Sch: 2/11 Rpt: 6/190
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Abbott, Gre	g (The Honorable)		00019652
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	SUTIONS	\$
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution
02/06/2024	Curry, Patrick		contribution (\$) description \$29,227.50 Plane Use
	7 Contributor address; City; State; Zip Code		I S29,227.501 Plane USE
			_
	Woodway, TX 76712-6529		Check if travel outside of Texas. Complete Schedule T.
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)
CEO		PJC Investments	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
10 lf contributor	is a shild law firms of report(s) (if any) (FOD HIDIOIAL)		
16 if contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description
03/26/2024	Curry, Patrick		\$21,750.00 Plane Use
	Contributor address; City; State; Zip Code		
	Woodway, TX 76712-6529		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	
CEO	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	PJC Investments	, ,
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution
04/06/2024	Curry, Patrick		contribution (\$) description
	Contributor address; City; State; Zip Code		\$18,900.00 Plane Use
			_
	Woodway, TX 76712-6529	1	Check if travel outside of Texas. Complete Schedule T.
l '	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
CEO		PJC Investments	(777 1177 1777 1777 1777 1777 1777 1777
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Combulle : :4 - :-1	omployer/low firm (FOR 31/DIGIAL)	Low firms of	and angular (if any.) (EOD 31 DIC(A).)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributes	is a shill low firm of parent(s) (if any) (FOR HIDIOIAL)		
ii contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
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SCH	EDI	JLE	A2
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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 3/11 Rpt: 7/190
2 FILER NAME Abbott, Greg	g (The Honorable)		3 Filer ID (Ethics Commission Filers) 00019652
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 04/09/2024	 Full name of contributor out-of-state PAC (ID#:		8 Amount of contribution (\$) 9 In-kind contribution description \$18,600.00 I Plane Use
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	L_ Check if travel outside of Texas. Complete Schedule T. I-JUDICIAL) (See instructions)
CEO		PJC Investments	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 01/11/2024	Full name of contributor out-of-state PAC (ID#: Martin, Gary Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$12,200.00 Plane Use
	Marble Falls, TX 78654-3803		Check if travel outside of Texas. Complete Schedule T.
Principal occu President	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON Falcon Bay Energy	· ·
	principal occupation (FOR JUDICIAL)	Contributor's job title	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 01/12/2024	Full name of contributor out-of-state PAC (ID#: Martin, Gary Contributor address; City; State; Zip Code Marble Falls, TX 78654-3803		Amount of In-kind contribution contribution (\$) description \$12,200.00 Plane Use
Drincinal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. -JUDICIAL) (See instructions)
Principal occi President	apadent out the (1 err mora sourcine)	Falcon Bay Energy	,
	principal occupation (FOR JUDICIAL)	Contributor's job title	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
i e			

The Instru	ection Guide explains how to complete this t	form.	1 Total pages Schedule A2: Sch: 4/11 Rpt: 8/190
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	g (The Honorable)		00019652
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	SUTIONS	\$
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution
01/17/2024	Martin, Gary		contribution (\$) description
	7 Contributor address; City; State; Zip Code		\$12,200.00 Plane Use
	, , , ,		!
			i
	Marble Falls, TX 78654-3803		Check if travel outside of Texas. Complete Schedule T.
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	N-JUDICIAL) (See instructions)
President		Falcon Bay Energy	y, LLC
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
	, , ,		, , , , ,
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
20 ii continuator	is a sima, law iiiii or pareni(e) (ii arry) (i en cestien iz)		
			T
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description
01/31/2024	Martin, Gary		\$12,200.00 Plane Use
	Contributor address; City; State; Zip Code		
			i
	Markla Falla TV 70054 2002		_ ;
5	Marble Falls, TX 78654-3803	T = 1 (500.110)	Check if travel outside of Texas. Complete Schedule T.
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	,
President		Falcon Bay Energy	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution
02/01/2024	Martin, Gary		contribution (\$) description
	Contributor address; City; State; Zip Code		\$12,200.00 Plane Use
			į į
	Marble Falls, TX 78654-3803		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	N-JUDICIAL) (See instructions)
President		Falcon Bay Energy	y, LLC
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
			,
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1	

The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A2: Sch: 5/11 Rpt: 9/190
2 FILER NAME	:		3 Filer ID (Ethics Commission Filers)
	g (The Honorable)	00019652	
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	SUTIONS	\$
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution contribution (\$) description
02/02/2024			\$12,200.00 Plane Use
	7 Contributor address; City; State; Zip Code		
			į į
	Marble Falls, TX 78654-3803		Check if travel outside of Texas. Complete Schedule T.
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	
President		Falcon Bay Energy	y, LLC
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	
		Í	`
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution
02/05/2024	Martin, Gary		contribution (\$) description
	Contributor address; City; State; Zip Code		\$12,200.00 Plane Use
	. ,		!
			į į
	Marble Falls, TX 78654-3803		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
President		Falcon Bay Energy	y, LLC
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
		<u> </u>	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
			T
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description
02/07/2024	Martin, Gary		\$12,200.00 Plane Use
	Contributor address; City; State; Zip Code		
			į į
	Marble Falls, TX 78654-3803		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. J-JUDICIAL) (See instructions)
President	apation 7 30b title (1 OK NON-30biolAL) (666 institutions)	Falcon Bay Energy	,
	principal occupation (FOR JUDICIAL)	Contributor's job title	
Continutors	principal occupation (i Ort JODICIAL)	Continuator 5 job title	(I ON JODICIAL) (See instituctions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
	, , , , , , , , , , , , , , , , , , , ,		. , , , ,
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1	

SCH	HED	UL	E	Α2

The Instru	ection Guide explains how to complete this t	form.	1 Total pages Schedule A2: Sch: 6/11 Rpt: 10/190
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	g (The Honorable)	00019652	
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	SUTIONS	\$
5 Date	6 Full name of contributor ut-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution contribution (\$) description
02/08/2024	Martin, Gary		\$12,200.00 Plane Use
	7 Contributor address; City; State; Zip Code		I
			_
	Marble Falls, TX 78654-3803		Check if travel outside of Texas. Complete Schedule T.
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	,
President		Falcon Bay Energy	y, LLC
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of In-kind contribution
02/09/2024	Martin, Gary		contribution (\$) description
	Contributor address; City; State; Zip Code		\$12,200.00 Plane Use
	Continuator address, City, State, Zip Code		i
	Marble Falls, TX 78654-3803		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	
President	, , ,	Falcon Bay Energy	,
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	
	p		(() () () () ()
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Continuation	omployernan iiiii (i eri ee bien iz)	Law iiiii or contribute	or a appearation (if arrive 2 low let)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>	
ii contributor	is a clind, law little of paretil(s) (if arry) (if of 3001clac)		
			T
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description
02/10/2024	Martin, Gary		\$12,200.00 Plane Use
	Contributor address; City; State; Zip Code		
			i
	Markla Falla TV 70054 2000		_
	Marble Falls, TX 78654-3803	T	Check if travel outside of Texas. Complete Schedule T.
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	,
President		Falcon Bay Energy	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

SCH	HED	UL	E	Α2

The Instru	ction Guide explains how to complete this t	1 Total pages Schedule A2: Sch: 7/11 Rpt: 11/190					
2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
	g (The Honorable)	00019652					
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$					
5 Date	6 Full name of contributor out-of-state PAC (ID#:	8 Amount of 9 In-kind contribution					
02/13/2024	Martin, Gary		contribution (\$) description				
	7 Contributor address; City; State; Zip Code		\$12,200.00 Plane Use				
			į į				
	Marble Falls, TX 78654-3803		Check if travel outside of Texas. Complete Schedule T.				
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)				
President		Falcon Bay Energy	y, LLC				
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)				
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date	Full name of contributor out-of-state PAC (ID#:	\	Amount of ! In-kind contribution				
02/15/2024	Martin, Gary		contribution (\$) description				
0=/=0/=0= 1	Contributor address; City; State; Zip Code		\$12,200.00 Plane Use				
	Continuator address, City, State, 21p Code		i				
	Marble Falls, TX 78654-3803		Check if travel outside of Texas. Complete Schedule T.				
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON					
President	,	Falcon Bay Energy	,				
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title					
	,		,				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)				
			(·· ····), (· ······-)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
ii continuator	is a sma, law mm or parent(e) (if any) (if one obtaining)						
Dett	Full name of contributes.		Amount of Indianal 1919				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description				
02/19/2024	Martin, Gary		\$12,200.00 Plane Use				
	Contributor address; City; State; Zip Code						
			į				
	Marble Falls, TX 78654-3803		_ ;				
Deinsinglass		Francis von (FOD NON	Check if travel outside of Texas. Complete Schedule T. J-JUDICIAL) (See instructions)				
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	,				
President	· · · / (500 NIDION)	Falcon Bay Energy					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)				
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 8/11 Rpt: 12/190			
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
	g (The Honorable)	00019652			
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$			
5 Date 02/20/2024	 Full name of contributor out-of-state PAC (ID#:	8 Amount of contribution (\$) In-kind contribution description \$12,200.00 I Plane Use			
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON			
President	spation 7 300 title (FOR NON-30DICIAL) (See instructions)	Falcon Bay Energy	•		
	principal occupation (FOR JUDICIAL)	13 Contributor's job title			
12 Contributors	principal occupation (i ON SODICIAL)	13 Contributor 3 job title	(TON JODICIAL) (See instituctions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)		
40 16	is a shill low form of a smarkle) (if any) (FOR HIDIOIAL)				
16 if contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date Full name of contributor out-of-state PAC (ID#:		Amount of In-kind contribution contribution (\$) description s12,200.00 Plane Use			
	Marble Falls, TX 78654-3803		I I Check if travel outside of Texas. Complete Schedule T.		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON			
President	,	Falcon Bay Energy	•		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 02/22/2024	Full name of contributor out-of-state PAC (ID#: Martin, Gary Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$12,200.00 Plane Use		
	Marble Falls, TX 78654-3803		Check if travel outside of Texas. Complete Schedule T.		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)		
President		Falcon Bay Energy	/, LLC		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•			

The Instru	ction Guide explains how to complete this 1	1 Total pages Schedule A2: Sch: 9/11 Rpt: 13/190				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Abbott, Gre	g (The Honorable)	00019652				
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$				
5 Date 02/23/2024	6 Full name of contributor out-of-state PAC (ID#: Martin, Gary)	8 Amount of 9 In-kind contribution contribution (\$) description			
02/20/2021	7 Contributor address; City; State; Zip Code		\$12,200.00 Plane Use			
	Toolianbutor address, City, State, 21p code		ļ			
	Marble Falls, TX 78654-3803		Check if travel outside of Texas. Complete Schedule T.			
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)			
President		Falcon Bay Energy	, LLC			
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)			
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Deta	Full name of contributes.		Amount of Linds and the start			
Date 02/24/2024	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description			
02/24/2024			\$12,200.00 Plane Use			
	Contributor address; City; State; Zip Code					
	Marble Falls, TX 78654-3803		Check if travel outside of Texas. Complete Schedule T.			
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON				
President	,	Falcon Bay Energy	•			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	title (FOR JUDICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date	Full name of contributor uut-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description			
02/26/2024	Martin, Gary		\$12,200.00 Plane Use			
	Contributor address; City; State; Zip Code					
			į			
	Marble Falls, TX 78654-3803		_ ;			
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.			
President	apation 7 300 title (POR NON-30DICIAE) (See instructions)	Falcon Bay Energy	,			
	principal occupation (FOR JUDICIAL)	Contributor's job title				
Continuator 3	principal occupation (i ON SOBICIAL)	Contributor 3 job title	(COLUMN) (See mandadons)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

The Instru	ection Guide explains how to complete this t	form.	1 Total pages Schedule A2: Sch: 10/11 Rpt: 14/190			
2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
	g (The Honorable)	00019652				
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$				
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution			
02/27/2024	Martin, Gary		contribution (\$) description			
	7 Contributor address; City; State; Zip Code		\$12,200.00 Plane Use			
			į			
	Marble Falls, TX 78654-3803		Check if travel outside of Texas. Complete Schedule T.			
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	N-JUDICIAL) (See instructions)			
President		Falcon Bay Energy	y, LLC			
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title				
	,	· · · · · · · · · · · · · · · · · · ·	, ,			
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
14 Continuator 3	employer/law lilli (i Ort 005/01/12)	25 Eaw IIIII of contribute	or a spouse (if any) (if any objective)			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u>l</u>				
10 ii continuatori	is a clind, law little of paretil(s) (if any) (FOR SODICIAL)					
			, 			
Date	Full name of contributor out-of-state PAC (ID#:		Amount of In-kind contribution contribution (\$) description			
02/28/2024	Martin, Gary		• \$12,200.00 Plane Use			
	Contributor address; City; State; Zip Code		I			
	Marble Falls, TX 78654-3803		Check if travel outside of Texas. Complete Schedule T.			
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	N-JUDICIAL) (See instructions)			
President		Falcon Bay Energy	y, LLC			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•				
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of ! In-kind contribution			
03/04/2024	Martin, Gary)	contribution (\$) description			
00/0-1/202-1	Contributor address; City; State; Zip Code		\$12,200.00 Plane Use			
	Continuator address, City, State, Zip Code					
	Marble Falls, TX 78654-3803		m i			
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. J-JUDICIAL) (See instructions)			
President	apation 7 30b title (1 OK NON-30biolAL) (300 mandations)	Falcon Bay Energy	,			
	principal convention (FOR HIDICIAL)					
Contributors	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)			
0	and a sellen from (EOD JUDICIAL)	1 6 6 11				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 11/11 Rpt: 15/190 3 Filer ID (Ethics Commission Filers) FILER NAME Abbott, Greg (The Honorable) 00019652 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution Date out-of-state PAC (ID#: Amount of contribution (\$) description 01/13/2024 Perot Jr., H. Ross \$16,725.00 Plane Use 7 Contributor address; City; State; Zip Code Dallas, TX 75219-6268 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) Real Estate Development Hillwood Development Corp. 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Date Full name of contributor Amount of out-of-state PAC (ID#: contribution (\$) description 04/20/2024 Perot Jr., H. Ross \$40,209.00 Plane Use Contributor address; City; State; Zip Code Dallas, TX 75219-6268 Check if travel outside of Texas. Complete Schedule T. (See instructions) Employer (FOR NON-JUDICIAL) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Real Estate Development Hillwood Development Corp. Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to c	ompl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 1/128 Rpt:	Abbott, Greg (The Honorable)		00019652
4	Date	5 Payee name		•
(02/20/2024	Angry Cactus Bar & Grill		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$4,500.00	1 W. Concho Avenue		
		San Angelo, TX 76903		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE			Check if Austin, TX, officeholder living expense
				Campaign venue expense
			<u> </u>	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught	Office held
ı	Date	Payee name		
(01/19/2024	Apex Strategies LLC		
,	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$7,865.69	PO Box 17302		
		Arlington, VA 22216		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense
				Political advertising
	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/O		ugnt	Office field
	Date	Payee name		
	02/06/2024	Apex Strategies LLC		
,	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$33,952.01	PO Box 17302		
		Arlington, VA 22216		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense
				Political advertising
	Complete ONLY if direct	Condidate/Officeholder name	nap+	Office hold
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ugnt	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	03/06/2024	Apex Strategies LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$218,446.76	PO Box 17302
		Arlington, VA 22216
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Political advertising
		1 Ontion davertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
—	Date	Payee name
	04/09/2024	Apex Strategies LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$13,149.70	PO Box 17302
		Arlington, VA 22216
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Political advertising
	Operation ONLY if allowed	Our didn't lotter had a grant of the country of the
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/17/2024	Apex Strategies LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$63,475.83	PO Box 17302
		Arlington, VA 22216
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense
		Political advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	05/21/2024	Apex Strategies LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$9,717.06	PO Box 17302
		Arlington, VA 22216
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Political advertising
		- Control date of the many
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/30/2024	Apex Strategies LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$92,163.65	PO Box 17302
	, , , , , , , , , , , , , , , , , , , ,	
		Arlington, VA 22216
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political advertising
		1 Ontion davertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	01/13/2024	Buc-ee's
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.84	4155 North General Bruce Drive
	410.01	1200 North Control Brade Brite
		Temple, TX 76501
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign travel food and beverage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y

SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 4/128 Rpt:	Abbott, Greg (The Honorable)	00019652
4	Date	5 Payee name	'
	02/01/2024	Buc-ee's	
6	Amount (\$) \$31.94	7 Payee address; City; State; Zip Code 4155 North General Bruce Drive Temple, TX 76501	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for campaign travel
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	02/21/2024	Buc-ee's	
	Amount (\$) \$20.42	Payee address; City; State; Zip Code 4155 North General Bruce Drive	
		Temple, TX 76501	
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign travel food and beverage
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/03/2024	Camelback Strategy Group	
	Amount (\$) \$55,000.00	Payee address; City; State; Zip Code 3700 Duke Street	
		Alexandria, VA 22304	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign services
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	01/19/2024	Camelback Strategy Group
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$197,758.00	3700 Duke Street
		Alexandria, VA 22304
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense Campaign services
		Campaign services
_	Operation ONLY if direct	On did to 10 ff as hald a grant Off as south
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/08/2024	Camelback Strategy Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$96,421.00	3700 Duke Street
		Alexandria, VA 22304
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign services
		Campaign scr viocs
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Data	
	Date	Payee name
	02/21/2024	Camelback Strategy Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$208,026.00	3700 Duke Street
		Alexandria, VA 22304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Campaign services
	Commission ONU Wife allows	Condidate/Officeholder name Office county
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	. •	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 6/128 Rpt:	Abbott, Greg (The Honorable)	00019652
4	Date 02/29/2024	5 Payee nameCamelback Strategy Group	
6	Amount (\$) \$131,895.00	7 Payee address; City; State; Zip Code 3700 Duke Street	
		Alexandria, VA 22304	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign services
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	03/06/2024	Camelback Strategy Group	
	Amount (\$) \$171,396.00	Payee address; City; State; Zip Code 3700 Duke Street	
		Alexandria, VA 22304	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign services
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 04/02/2024	Payee name Camelback Strategy Group	
	Amount (\$) \$26,134.00	Payee address; City; State; Zip Code 3700 Duke Street	
		Alexandria, VA 22304	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign services
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	rd Payment		egal Services The Instruction Guid	Salaries/\ le explains how to co	-	ete this form.	OTHER	≺ (enter a	category not liste	d above)
1 Total pag	es Schedule F1:	2 FILER NAME				1:	3 Filer I	ID	(Ethics Comn	nission Filers)
	7/128 Rpt:		(The Honorable))			0001			,
4 Date		5 Payee name								
04/03/20	024	Camelback S	Strategy Group							
6 Amount ((\$)	7 Payee address	s; City;	State; Zip Co	ode					
	\$54,818.00	3700 Duke S	treet							
		Alexandria, V	'A 22304							
	POSE)F	(a) Category (See	Categories listed at the	top of this schedule)	(b)	Description				
	DITURE	Advertising E	xpense			Check if travel or Check if Austin,			plete Schedule T.	
						Campaign ser		nuer living	expense	
						Campaign ser	VICCO			
9 Complete	e ONLY if direct	Candidate/Office		Office sou	ught			Office he	7ld	
	ure to benefit C/O		filoluei fiame	Office soc	agrit		O	niice ne	iu	
Date		Payee name								
04/10/20)24	Camelback S	Strategy Group							
Amount ((\$)	Payee address	s; City;	State; Zip Co	ode					
	\$74,760.00	3700 Duke S	treet							
		Alexandria, V	'A 22304							
	POSE)F	(a) Category (See	Categories listed at the	top of this schedule)	(b)	Description				
	DITURE	Advertising E	xpense			—			plete Schedule T.	
						Check if Austin, Campaign ser		lider living	expense	
						Campaign 55.	VICCO			
Complete	e ONLY if direct	Candidate/Office		Office sou	l aht			Office he	vi4	
	ure to benefit C/O		Houer name	Office 300	Jynt		C	JIIICE IIC	iu	
Date		Payee name								
04/22/20)24	Camelback S	Strategy Group							
Amount ((\$)	Payee address		State; Zip Co	ode					
	\$80,823.00	3700 Duke S	treet							
		Alexandria, V	'A 22304							
	POSE	(a) Category (See	Categories listed at the	top of this schedule)	(b)	Description				
)F DITURE	Advertising E							plete Schedule T.	
- /	DITORL					Check if Austin,		older living	expense	
						Campaign ser	vices			
			 		<u> </u>		_			
	e <u>ONLY</u> if direct ure to benefit C/O	Candidate/Office	eholder name	Office sou	ught		O	Office he	eld	
охропана	are to benefit 6,6	·								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 8/128 Rpt:	Abbott, Greg (The Honorable)	00019652
4	Date	5 Payee name	•
l	04/24/2024	Camelback Strategy Group	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$73,430.00	3700 Duke Street	
l			
l		Alexandria, VA 22304	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	· · · · · · · · · · · · · · · · · · ·	vel outside of Texas. Complete Schedule T.
l	EXPENDITURE		stin, TX, officeholder living expense
l		Campaign	services
Ļ	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:		0.00
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
┡	·		
l	Date	Payee name	
L	05/02/2024	Camelback Strategy Group	
l	Amount (\$)	Payee address; City; State; Zip Code	
l	\$77,367.00	3700 Duke Street	
l			
		Alexandria, VA 22304	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Advertising Expense	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
l		Campaign	
		- san panga	
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
F	Date	Payee name	
	05/10/2024	Camelback Strategy Group	
⊢	Amount (\$)	Payee address; City; State; Zip Code	
l	\$81,284.00	3700 Duke Street	
l	·		
		Alexandria, VA 22304	
⊢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF		vel outside of Texas. Complete Schedule T.
l	EXPENDITURE		stin, TX, officeholder living expense
		Campaign	services
L			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	experience to beliefit 6/01	•	

SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
TTHER (order a cotogony not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	05/15/2024	Camelback Strategy Group
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$73,278.00	3700 Duke Street
		Alexandria, VA 22304
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign services
		Campaign services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash	Date	Payee name
	05/22/2024	
		Camelback Strategy Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$80,440.00	3700 Duke Street
		Alexandria, VA 22304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Campaign services
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	
	Date 05/22/2024	Payee name
	05/23/2024	Camelback Strategy Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$12,861.00	3700 Duke Street
		Alexandria, VA 22304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Campaign services
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer	rs)
	Sch: 10/128 Rpt:	Abbott, Greg (The Honorable) 00019652	
4	Date	5 Payee name	
	05/30/2024	Camelback Strategy Group	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$61,488.00	3700 Duke Street	
		Alexandria, VA 22304	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign services	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OF	н	·
	Date	Payee name	
	02/02/2024	Cross Screen Media, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$564,022.40	127 South Peyton Street	
	!	Suite 301	
	!	Alexandria, VA 22314	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	!	Check if Austin, TX, officeholder living expense Political advertising	
	!	1 ontion devoteding	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
_	Date	Payee name	
	02/08/2024	Cross Screen Media, LLC	
	Amount (\$) \$688,206.40	Payee address; City; State; Zip Code 127 South Peyton Street	
	\$000,200.40		
		Suite 301	
		Alexandria, VA 22314	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Political advertising	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OF		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
-	Total pages Cabadula 54		_
1	Total pages Schedule F1: Sch: 11/128 Rpt:	2 FILER NAME Abbott, Greg (The Honorable) 3 Filer ID (Ethics Commission Filers) 00019652	
4	Date	5 Payee name	_
7	02/20/2024	Cross Screen Media, LLC	
6	Amount (\$) \$86,256.00	7 Payee address; City; State; Zip Code 127 South Peyton Street Suite 301	
L		Alexandria, VA 22314	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political advertising	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	=
	02/22/2024	Cross Screen Media, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$754,808.80	127 South Peyton Street	
		Suite 301	
		Alexandria, VA 22314	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Political advertising	
		Folitical advertising	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	=
	02/23/2024	Cross Screen Media, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$15,753.20	127 South Peyton Street	
		Suite 301	
		Alexandria, VA 22314	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	_, _, _,,_,	Check if Austin, TX, officeholder living expense Political advertising	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
			_
L			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	:		ages	/Contract Labor		OTHER (enter	a category not listed	above)
	·	_		The Instruction G	uide explains ho	ow to cor	nple	ete this form.	_			
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	ssion Filers)
	Sch: 12/128 Rpt:		Abbott, Gre	g (The Honorab	le)					00019652		
4	Date	5	Payee name									
	04/22/2024		Cross Scree	en Media, LLC								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$183,733.60		127 South F	eyton Street								
			Suite 301									
			Alexandria,	VA 22314								
8	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sched	lule)	(b)	Description				
	OF EXPENDITURE		Advertising					Check if travel	outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITORE							_		officeholder livir	ng expense	
								Political adve	rtis	sing		
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name	Off	fice sou	ght			Office h	neld	
		_										
	Date		Payee name									
	05/03/2024		Cross Scree	en Media, LLC								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$183,733.60		127 South F	eyton Street								
			Suite 301									
			Alexandria,	VA 22314								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sched	lule)	(b)	Description				
	OF EXPENDITURE		Advertising	Expense				=			mplete Schedule T.	
								ш		officeholder livir	ng expense	
								Political adve	ะเนธ	onig		
_	Complete ONLY if direct	<u> </u>	Candidate/Offic	reholder name	Off	fice soug	thr			Office h	neld	
	expenditure to benefit C/O		24.14.44.67		.		9			000 .	.0.0	
	Date	Г	Payee name									
	05/17/2024		•	en Media, LLC								
_		├			Ctoto	7in Co	do					
	Amount (\$)		Payee addres	•	State;	Zip Co	ue					
	\$284,222.40			eyton Street								
			Suite 301									
			Alexandria,	VA 22314								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sched	lule)	(b)	Description				
	OF EXPENDITURE		Advertising	Expense							mplete Schedule T.	
										officeholder livir	ng expense	
								Political adve	ะเมร	onig		
	Complete ONLY if direct	<u> </u>		ceholder name	Off	fice soug	tdr			Office h	neld	
	expenditure to benefit C/O		Januale/OIII	Cholder Haille	Oli	noc soul	JIIL			Office I	iciu	
-												

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers	
	Sch: 13/128 Rpt:	Abbott, Greg (The Honorable) 00019652	,
4	Date	5 Payee name	
	05/29/2024	Cross Screen Media, LLC	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$800,000.00	127 South Peyton Street	
		Suite 301	
		Alexandria, VA 22314	
_	DUDDOOF		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Political advertising	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	Date	Payee name	
	02/15/2024	CrossRoads Media	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500,000.00	66 Canal Center Plaza, Suite 555	
		Alexandria, VA 22314	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Political advertising	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	/n	
	Date	Payee name	
	02/16/2024	CrossRoads Media	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000,000.00	66 Canal Center Plaza, Suite 555	
		Alexandria, VA 22314	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Political advertising	
		1 ontotal dayordoring	
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid	xpense I		ense ges/Contract Labor		Travel in District Travel Out of Di OTHER (enter a	
1	Total pages Schedule F1:						3	Filer ID	(Ethics Commission Filers)
	Sch: 14/128 Rpt:	Abbott, G	reg (The Honorable	e) 				00019652	
4	Date	5 Payee nan							
	02/21/2024		ads Media						
6	Amount (\$)	7 Payee add	•	•	Zip Cod	е			
	\$1,800,000.00	66 Canal	Center Plaza, Suite	9 555					
		Alexandri	a, VA 22314						
8	PURPOSE OF		(See Categories listed at the	top of this sched	dule)	Description			
	EXPENDITURE	Advertisir	ng Expense					de of Texas. Con officeholder living	nplete Schedule T.
						Political adve			gpo-100
								-	
9	Complete ONLY if direct expenditure to benefit C/Oh		Officeholder name	Off	fice sougl	nt		Office h	eld
H	Date	Payee nan	ne						
	05/01/2024	1 1	ads Media						
	Amount (\$)	Payee add	ress; City;	State;	Zip Cod	e			
	\$1,153,844.00	66 Canal	Center Plaza, Suite	555					
		Alexandri	a, VA 22314						
	PURPOSE	(a) Category	(See Categories listed at the	top of this sched	dule)	Description			
	OF EXPENDITURE	Advertisir	ng Expense			=		de of Texas. Con officeholder living	nplete Schedule T.
						Political adve			g caperioc
								-	
	Complete ONLY if direct expenditure to benefit C/Oh		Officeholder name	Off	fice sougl	nt		Office h	eld
	Date	Payee nan	ne						
	05/07/2024	CrossRoa	ads Media						
	Amount (\$)	Payee add	ress; City;	State;	Zip Cod	е			
	\$59,991.00	66 Canal	Center Plaza, Suite	555					
		Alexandri	a, VA 22314						
	PURPOSE	(a) Category	(See Categories listed at the	top of this sched	dule)	Description			
	OF EXPENDITURE		ng Expense						nplete Schedule T.
						Political adve		officeholder living	y expense
						. JJar adve		9	
	Complete ONLY if direct	Candidate/C	Officeholder name	Off	fice sougl	nt		Office h	eld
	expenditure to benefit C/O				3				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	05/14/2024	CrossRoads Media
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$32,860.80	66 Canal Center Plaza, Suite 555
		Alexandria, VA 22314
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political advertising
		1 Ontion davertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_		
	Date	Payee name
	01/09/2024	Cygnal, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$144,473.89	900 17th Street NW, Suite 950
		Washington, DC 20006
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign services
		Cumpaign services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/10/2024	Cygnal, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$55,669.45	900 17th Street NW, Suite 950
		Washington, DC 20006
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Campaign services
	0 1: 0:::::::::::::::::::::::::::::::::	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
		•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form	m.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 16/128 Rpt:	Abbott, Greg (The Honorable)	00019652
4	Date	5 Payee name	'
	01/11/2024	Cygnal, LLC	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$91,337.90	900 17th Street NW, Suite 950	
		Washington, DC 20006	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	on
	OF	· · · · · · · · · · · · · · · · · · ·	f travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if	f Austin, TX, officeholder living expense
		Campaiç	gn services
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/17/2024	Cygnal, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,815.38	900 17th Street NW, Suite 950	
		Washington, DC 20006	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	on
	OF EXPENDITURE	Polling Expense	f travel outside of Texas. Complete Schedule T.
			f Austin, TX, officeholder living expense gn services
		Campaig	gri services
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	•	
_	Date	Payee name	
	02/07/2024	Cygnal, LLC	
		Payee address; City; State; Zip Code	
	Amount (\$) \$25,750.00	900 17th Street NW, Suite 950	
	Ψ23,730.00	300 17th Street NW, Suite 330	
		Machineton DC 2000C	
		Washington, DC 20006	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Description	ON f travel outside of Texas. Complete Schedule T.
	EXPENDITURE	1 dilling Expense	f Austin, TX, officeholder living expense
			gn services
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	02/12/2024	Cygnal, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$29,650.00	900 17th Street NW, Suite 950
		Washington, DC 20006
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign services
		Campaign services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
_	Date	Payee name
	02/13/2024	Cygnal, LLC
_	Amount (\$)	Payee address; City; State; Zip Code
	* *	
	\$15,450.00	900 17th Street NW, Suite 950
		Washington, DC 20006
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
		Compaign convices
		Campaign services
	Complete ONLY if direct	Condidate/Office holds
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/14/2024	Cygnal, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$10,300.00	900 17th Street NW, Suite 950
		Washington, DC 20006
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign services
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to belief C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services	egal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME	Ē					3	Filer ID	(Ethics	Commission Filers)
	Sch: 18/128 Rpt:	<u> </u>		g (The Hone	orable)					00019652		
4	Date	5	Payee name									
	02/20/2024	'	Cygnal, LL0	2								
6	Amount (\$)	7	Payee addre	ss; City;	Sta	ite; Zip Co	ode					
	\$22,200.00		900 17th St	reet NW, Su	iite 950							
		<u>'</u>	Washingtor	n, DC 20006								
8	PURPOSE OF	(a)	Category (S	ee Categories liste	ed at the top of this	schedule)	(b)	Description				
	EXPENDITURE		Polling Exp	ense				=		ide of Texas. Cor , officeholder livir		dule T.
								Campaign se			ig experise	
9	Complete ONLY if direct expenditure to benefit C/O		andidate/Offi	iceholder nam	ne	Office sou	<u>l</u> ught			Office h	ield	
H	Date		Payee name									
	03/28/2024	l	Cygnal, LL0									
H	Amount (\$)	├	Payee addre		Sta	ite; Zip Co	nde					
	\$49,500.00	l	•	reet NW, Su		iic, zip ot	ouc					
	Ψ-5,500.00		300 17111 31	icci ivv, oc	iiic 550							
		,	Washingtor	n, DC 20006								
	PURPOSE OF	(a)	Category (Se	ee Categories liste	ed at the top of this	schedule)	(b)	Description				
	EXPENDITURE		Polling Exp	ense				=		ide of Texas. Cor , officeholder livir		dule T.
								Campaign se			ig experise	
								oumpaign oo	•	000		
Complete <u>ONLY</u> if direct Candidate/C expenditure to benefit C/OH			andidate/Offi	ceholder nam	ne	Office sou	<u>l</u> ught			Office h	ield	
F	Date		Payee name									
	04/09/2024	l	Cygnal, LL0									
	Amount (\$)	_	Payee addre		Sta	ite; Zip Co	nde					
	\$10,650.00	l	,	reet NW, Su		iic, zip oi	ouc					
	Ψ10,030.00		300 17111 31	icci ivv, oc	iiic 550							
		,	Washingtor	n, DC 20006								
	PURPOSE OF				ed at the top of this	schedule)	(b)	Description				
	EXPENDITURE		Polling Exp	ense						ide of Texas. Cor , officeholder livir		dule T.
								Campaign se			ig expense	
								Campaign sc	, I V I	003		
\vdash	Complete ONLY if direct	<u> </u>	andidate/∩ffi	ceholder nam	10	Office sou	ıaht			Office h	eld	
	expenditure to benefit C/O		a. raraate/OIII	ocholder ridir		Ciliod 300	agrit			Office I	Joiu	
\vdash												
L												

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	Total names Oct 11 51	· · · · · · · · · · · · · · · · · · ·	_
1	Total pages Schedule F1: Sch: 19/128 Rpt:	2 FILER NAME Abbott, Greg (The Honorable) 3 Filer ID (Ethics Commission Filers) 00019652	
4	•	,	
4	Date	5 Payee name	
L	05/08/2024	Cygnal, LLC	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$29,900.00	900 17th Street NW, Suite 950	
		Washington, DC 20006	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
ľ	OF	Polling Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Campaign services	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
_	Date	Payee name	_
	05/20/2024	Cygnal, LLC	
_		1 2	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5,150.00	900 17th Street NW, Suite 950	
		Washington, DC 20006	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.	
	LXI ENDITORE	Check if Austin, TX, officeholder living expense	
		Campaign services	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Superiord to belieff 6/01	•	
	Date	Payee name	
	04/22/2024	Deep Root Analytics	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$20,000.00	3100 Clarendon Blvd.	
		Suite 900	
		Arlington, VA 22201	
	DUDDOCE	1	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign data services	
		Sampaigh data solvious	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		

SCHEDULE F1

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide ex	Salaries/\	xpens Wages	e /Contract Labor		Travel in District Travel Out of Dist OTHER (enter a c	rict ategory not listed above)
1	Total pages Schedule F1:							Filer ID	(Ethics Commission Filers)
L	Sch: 20/128 Rpt:	Abbott, Gre	g (The Honorable)					00019652	
4	Date	5 Payee name							
L	01/31/2024	EAN Service	es, LLC						
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode				
	\$48.59	P.O. Box 4	02383						
		Atlanta, GA	30384						
8	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Travel In D	strict					de of Texas. Comp	
	-					Campaign ca		officeholder living ontal	expense
						Campaign ca		····	
9	Complete ONLY if direct	Candidate/∩ff	ceholder name	Office sou	laht			Office hel	ld
Ĺ	expenditure to benefit C/Oh		sonoider name		-9·11			Office field	
	Date	Payee name							
	01/31/2024	EAN Service	es, LLC						
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode				
	\$48.59	P.O. Box 4	02383						
L		Atlanta, GA	30384						
	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Travel In D				ш		de of Texas. Comp	
						Campaign ca		officeholder living ontal	expense
						Campaign ca		····	
\vdash	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	<u>l</u> ught			Office hel	ld
	expenditure to benefit C/O				J				
H	Date	Payee name							
	01/31/2024	EAN Service							
	Amount (\$)	Payee addre		State; Zip Co	ode				
	\$48.59	P.O. Box 4		- Luco, 21p Ot	- 40				
	\$ 10.00	1 . C. 20% T							
		Atlanta, GA	30384				_		
	PURPOSE OF		ee Categories listed at the top of	this schedule)	(b)	Description			
	EXPENDITURE	Travel In D	strict					de of Texas. Comp officeholder living	
						Campaign ca			олронас
						pg 3a	. 3		
	Complete ONLY if direct	Candidate/Off	ceholder name	Office sou	<u>l</u> ught			Office hel	d
	expenditure to benefit C/O		-		J -				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

1	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: 21/128 Rpt:	Abbott, Greg (The Honorable)	00019652
4	Date	5 Payee name	
	01/31/2024	EAN Services, LLC	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$48.62	P.O. Box 402383	
		Atlanta, GA 30384	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense
			Campaign car rental
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office field
\vdash	Doto		
	Date 01/31/2024	Payee name EAN Services, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$71.32	P.O. Box 402383	
		Atlanta, GA 30384	
	PURPOSE OF	,	Description
	EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Campaign car rental
1			
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	Complete ONLY if direct expenditure to benefit C/Oł		Office held
		1	Office held
	expenditure to benefit C/O		Office held
	expenditure to benefit C/Ol Date 01/31/2024	Payee name EAN Services, LLC	Office held
	expenditure to benefit C/OF	Payee name	Office held
=	Date 01/31/2024 Amount (\$)	Payee name EAN Services, LLC Payee address; City; State; Zip Code	Office held
_	Date 01/31/2024 Amount (\$)	Payee name EAN Services, LLC Payee address; City; State; Zip Code	Office held
	Date 01/31/2024 Amount (\$) PURPOSE	Payee name EAN Services, LLC Payee address; City; State; Zip Code P.O. Box 402383 Atlanta, GA 30384	Office held Description
	Date 01/31/2024 Amount (\$) PURPOSE OF	Payee name EAN Services, LLC Payee address; City; State; Zip Code P.O. Box 402383 Atlanta, GA 30384	Description Check if travel outside of Texas. Complete Schedule T.
	Date 01/31/2024 Amount (\$) PURPOSE	Payee name EAN Services, LLC Payee address; City; State; Zip Code P.O. Box 402383 Atlanta, GA 30384 (a) Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Date 01/31/2024 Amount (\$) PURPOSE OF	Payee name EAN Services, LLC Payee address; City; State; Zip Code P.O. Box 402383 Atlanta, GA 30384 (a) Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.
	Date 01/31/2024 Amount (\$) PURPOSE OF EXPENDITURE	Payee name EAN Services, LLC Payee address; City; State; Zip Code P.O. Box 402383 Atlanta, GA 30384 (a) Category (See Categories listed at the top of this schedule) Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental
	Date 01/31/2024 Amount (\$) PURPOSE OF	Payee name EAN Services, LLC Payee address; City; State; Zip Code P.O. Box 402383 Atlanta, GA 30384 (a) Category (See Categories listed at the top of this schedule) Travel In District Candidate/Officeholder name Office sought	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental
	Date 01/31/2024 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee name EAN Services, LLC Payee address; City; State; Zip Code P.O. Box 402383 Atlanta, GA 30384 (a) Category (See Categories listed at the top of this schedule) Travel In District Candidate/Officeholder name Office sought	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental
	Date 01/31/2024 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Payee name EAN Services, LLC Payee address; City; State; Zip Code P.O. Box 402383 Atlanta, GA 30384 (a) Category (See Categories listed at the top of this schedule) Travel In District Candidate/Officeholder name Office sought	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to com	nplete	this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 22/128 Rpt:	Abbott, Greg (The Honorable)		00019652
4	Date	5 Payee name		
	01/31/2024	EAN Services, LLC		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	de	
	\$71.32	P.O. Box 402383		
		Atlanta, GA 30384		
8	PURPOSE		(b) D	Pescription
ľ	OF	Travel In District	(~, _D	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
			С	Campaign car rental
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght	Office held
	experialitate to beliefit eroi	<u> </u>		
	Date	Payee name		
	01/31/2024	EAN Services, LLC		
	Amount (\$)	Payee address; City; State; Zip Cod	de	
	\$155.25	P.O. Box 402383		
		Atlanta, GA 30384		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) D	escription
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.
			L	Check if Austin, TX, officeholder living expense Campaign car rental
				ampaign car remai
_	Complete ONLY if direct	Candidate/Officeholder name Office soug	nht	Office held
	expenditure to benefit C/OI	•	Ji it	Office field
	Data			
	Date 01/31/2024	Payee name EAN Services, LLC		
	Amount (\$)	Payee address; City; State; Zip Cod	ae	
	\$173.45	P.O. Box 402383		
		All - 1 - 0 A 0000 A		
		Atlanta, GA 30384		
	PURPOSE OF	,	(b) D	Description
	EXPENDITURE	Travel In District	⊢	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			C	Campaign car rental
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/OI	1		
I				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 23/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	02/06/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.18	P.O. Box 402383
	!	
		Atlanta, GA 30384
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign car rental
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	H .
	Date	Payee name
	02/06/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.18	P.O. Box 402383
	!	
		Atlanta, GA 30384
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	!	Campaign car rental
	!	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	н
	Date	Payee name
	02/06/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.19	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense Campaign car rental
		Campaign carrenai
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	, -	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 24/128 Rpt:	Abbott, Greg (The Honorable)	00019652
4	Date	5 Payee name	
L	02/13/2024	EAN Services, LLC	
6	Amount (\$) \$41.96	7 Payee address; City; State; Zip Code P.O. Box 402383	
	Ψ-1.50	1.0.200	
		Atlanta, GA 30384	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Campaign car rental
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	02/13/2024	EAN Services, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$101.32	P.O. Box 402383	
L		Atlanta, GA 30384	
	PURPOSE OF	, ,	Description
	EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Campaign car rental
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	02/13/2024	EAN Services, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$101.32	P.O. Box 402383	
		Atlanta CA 20204	
		Atlanta, GA 30384	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel In District	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Havei in District	Check if Austin, TX, officeholder living expense
			Campaign car rental
L	0 1: 0:::::::::::::::::::::::::::::::::		Off
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

		The Instruction Guide explains how to co	ompl	lete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 25/128 Rpt:	Abbott, Greg (The Honorable)		00019652
4	Date	5 Payee name		
L	02/13/2024	EAN Services, LLC		
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode	
l	\$101.32	P.O. Box 402383		
l		All		
Ļ		Atlanta, GA 30384		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Travel In District		Check if Austin, TX, officeholder living expense
l				Campaign car rental
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ught	Office held
L	experialitate to beliefit C/O	'		
l	Date	Payee name		
L	02/13/2024	EAN Services, LLC		
l	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$101.32	P.O. Box 402383		
l				
		Atlanta, GA 30384		
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel In District		Check if Austin, TX, officeholder living expense
				Campaign car rental
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ught	Office held
L	experialiture to benefit C/O	1		
l	Date	Payee name		
	02/13/2024	EAN Services, LLC		
l	Amount (\$)	Payee address; City; State; Zip Co	ode	
l	\$101.32	P.O. Box 402383		
l		Atlanta CA 20204		
L		Atlanta, GA 30384		
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel In District	(a)	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Traver in district		Check if Austin, TX, officeholder living expense
				Campaign car rental
L				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ught	Office held
L		•		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this fo	orm.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 26/128 Rpt:	Abbott, Greg (The Honorable)	00019652
4	Date	5 Payee name	•
	02/13/2024	EAN Services, LLC	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$101.32	P.O. Box 402383	
		Atlanta, GA 30384	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	tion
	OF EXPENDITURE	Travel In District	k if travel outside of Texas. Complete Schedule T.
		 	k if Austin, TX, officeholder living expense aign car rental
		Cumpt	agir car remai
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Cinco non
_	Date	Payee name	
	02/13/2024	EAN Services, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$101.35	P.O. Box 402383	
	Ψ101.00	THE BOX TOZOGO	
		Atlanta, GA 30384	
_	PURPOSE	· · · · · · · · · · · · · · · · · · ·	Aio in
	OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Descrip	k if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Haver in District	k if Austin, TX, officeholder living expense
		Campa	aign car rental
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experiditure to benefit C/Or	1	
	Date	Payee name	
	02/13/2024	EAN Services, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$111.64	P.O. Box 402383	
		Atlanta, GA 30384	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	tion
	OF EXPENDITURE	Traver in District	k if travel outside of Texas. Complete Schedule T.
			k if Austin, TX, officeholder living expense aign car rental
		Campa	agn car remai
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Onice field
l			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:		_
-	Sch: 27/128 Rpt:	Abbott, Greg (The Honorable)	
4	Date	5 Payee name	
	02/13/2024	EAN Services, LLC	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
ľ	\$111.64	P.O. Box 402383	
	Ψ111.04	F.O. DOX 402303	
		Atlanta, GA 30384	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
		Campaign car rental	
		Campaign car remai	
<u>_</u>	Complete ONII V if dies -t	Condidate/Officeholder name Office county	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	02/13/2024	EAN Services, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$111.64	P.O. Box 402383	
		Atlanta, GA 30384	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
		Campaign car rental	
		Campaign car rental	
	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held	_
	Complete ONLY if direct expenditure to benefit C/OI		
	Date	Payee name	
	02/13/2024	EAN Services, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$111.64	P.O. Box 402383	
		Atlanta, GA 30384	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
	LAI ENDITONE	Check if Austin, TX, officeholder living expense	
		Campaign car rental	
	0 1		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	- Farmana to bonont or or		

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services			/ages	/Contract Labor		OTHER (enter a	a category not listed a	oove)
	·			The Instruction G	uide explains h	low to col	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 28/128 Rpt:		Abbott, Gre	g (The Honoral	ole)					00019652		
4	Date	5	Payee name									
	02/13/2024		EAN Service	es, LLC								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$111.64		P.O. Box 40	2383								
			Atlanta, GA	30384								
8	PURPOSE	(2)					(h)	Description				
ľ	OF	^(a)		e Categories listed at	the top of this sche	edule)	(D)	Description Check if travel (nutsi	de of Texas Cor	nplete Schedule T.	
	EXPENDITURE		Travel In Dis	SUICU				=		officeholder livin		
								Campaign ca	r re	ental		
9	Complete ONLY if direct		Candidate/Offic	ceholder name	0	ffice sou	ght			Office h	eld	
	expenditure to benefit C/O	Н					-					
H	Date		Payee name									
	02/13/2024		EAN Service	es. LLC								
	Amount (\$)	┝	Payee addres		State:	Zip Co	de					
	\$111.64		P.O. Box 40		Otato,	2.p 00	uo					
	Ψ111.04		F.O. DOX 40	2303								
			Atlanta, GA	30384								
	PURPOSE OF	(a)	Category (Se	e Categories listed at	the top of this sche	dule)	(b)	Description				
	EXPENDITURE		Travel In Dis	strict				=			nplete Schedule T.	
								Campaign ca		officeholder livin	g expense	
								Campaign ca		inai		
_	Complete ONLY if direct	<u> </u>		ceholder name	0	ffice sou	aht			Office h	ماط	
	expenditure to benefit C/O		zarialaate/Onic	cholder hame	O	mee sou	giit			Office fi	Ciu	
		_										
	Date		Payee name									
	02/13/2024		EAN Service	es, LLC								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$111.67		P.O. Box 40	2383								
			Atlanta, GA	30384								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Travel In Dis			, i					nplete Schedule T.	
	LAFENDITORE									officeholder livin	g expense	
								Campaign ca	r re	ental		
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	ceholder name	0	ffice sou	ght			Office h	eld	
	experience to beliefft C/Of											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 29/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	02/13/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$138.31	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign car rental
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	02/13/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$138.32	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign car rental
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/13/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$138.32	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense Campaign car rental
		Sampaigh sai feiliai
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment		_	s/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME			3	Filer ID	(Ethics Commission Filers)
	Sch: 30/128 Rpt:	Abbott, Greg (The Honorable)				00019652	
4	Date	5 Payee name					
	02/20/2024	EAN Services, LLC					
6	Amount (\$) \$142.74	7 Payee address; City; State; Zip P.O. Box 402383	Code				
		Atlanta, GA 30384					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		ide of Toyon Com	plata Cabadula T
	EXPENDITURE	Travel In District		_	, TX	ide of Texas. Com , officeholder livinç ental	
9	Complete ONLY if direct expenditure to benefit C/O		sought			Office he	eld
	Date	Payee name					
	02/20/2024	EAN Services, LLC					
	Amount (\$)	Payee address; City; State; Zip	Code				
	\$195.25	P.O. Box 402383					
		Atlanta, GA 30384					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Travel In District				ide of Texas. Com	
				_		, officeholder living	g expense
				Campaign ca	. 10	riiai	
	Complete ONLY if direct expenditure to benefit C/Oh		 sought			Office he	eld
	Date	Payee name					
	02/20/2024	EAN Services, LLC					
	Amount (\$)	Payee address; City; State; Zip	Code				
	\$195.25	P.O. Box 402383					
		Atlanta, GA 30384					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Travel In District		ш		ide of Texas. Com	
				Campaign ca		, officeholder living ental	g expense
				Sampaign Ca	. 10	J. 1641	
	Complete ONLY if direct expenditure to benefit C/O		sought			Office he	eld

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

l	Credit Card Payment	The Instruction Guide explains how to cor	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 31/128 Rpt:	Abbott, Greg (The Honorable)		00019652
4	Date	5 Payee name		'
	02/20/2024	EAN Services, LLC		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
l	\$195.25	P.O. Box 402383		
		Atlanta, GA 30384		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Campaign car rental
				Campaign car remai
9	Complete ONLY if direct	Candidate/Officeholder name Office sout	aht	Office held
ľ	expenditure to benefit C/O		giit	Office field
H	Date	Payee name		
	02/20/2024	EAN Services, LLC		
┝	Amount (\$)	Payee address; City; State; Zip Coo	da	
	\$195.28	P.O. Box 402383	ue	
	Ψ133.20	1.0. 00x 402303		
		Atlanta, GA 30384		
┡	DUDDOCE		/l-\	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel In District	(D)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Havei in District		Check if Austin, TX, officeholder living expense
				Campaign car rental
L				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held
L	experientare to benefit 6/01	1		
l	Date	Payee name		
	02/26/2024	EAN Services, LLC		
l	Amount (\$)	Payee address; City; State; Zip Coo	de	
l	\$41.96	P.O. Box 402383		
l				
		Atlanta, GA 30384		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l				Campaign car rental
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O	•	-	
H				

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Leg	t/Awards/Memorials Expense gal Services ne Instruction Guide exp		Vages	/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)	
╙			le ilistruction Guide exp	iailis flow to co	ilipie	te tilis loilli.	_			
1	Total pages Schedule F1: Sch: 32/128 Rpt:		The Honorable)				3	Filer ID 00019652	(Ethics Commission Filers)	1
4	Date	5 Dove nome								
ľ		5 Payee name	11.0							
	02/26/2024	EAN Services	, LLC							
6	Amount (\$)	7 Payee address;	City;	State; Zip Co	de					
l	\$116.44	P.O. Box 4023	383							
l										
		Atlanta, GA 30)384							
8	PURPOSE	(a) Category (See C	Categories listed at the top of the	his schedule)	(b)	Description				
l	OF	Travel In Distr		,			outsi	de of Texas. Com	plete Schedule T.	
l	EXPENDITURE					Check if Austin,	, TX,	officeholder living	expense	
l						Campaign ca	r re	ental		
9	Complete ONLY if direct	Candidate/Officel	nolder name	Office sou	l <u></u> ight			Office he	eld	
	expenditure to benefit C/OI	4			•					
⊨										_
	Date	Payee name								
	02/26/2024	EAN Services	, LLC							
	Amount (\$)	Payee address;	City;	State; Zip Co	de					
	\$116.44	P.O. Box 4023	383							
			2004							
		Atlanta, GA 30)384							
	PURPOSE	(a) Category (See C	Categories listed at the top of the	his schedule)	(b)	Description				
	OF EXPENDITURE	Travel In Distr	ict			Check if travel of	outsi	de of Texas. Com	plete Schedule T.	
	LAFENDITORE					—		officeholder living	expense	
						Campaign ca	r re	ental		
Г	Complete ONLY if direct	Candidate/Officel	nolder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	4								
H	Dete									
	Date	Payee name								
	02/26/2024	EAN Services	, LLC							
	Amount (\$)	Payee address;	City;	State; Zip Co	de					
	\$173.45	P.O. Box 4023	383							
1										
		Atlanta CA 20	1204							
L		Atlanta, GA 30	7JU4							
	PURPOSE OF		Categories listed at the top of the	his schedule)	(b)	Description				
l	EXPENDITURE	Travel In Distr	ict			ш		de of Texas. Com		
l						_		officeholder living	expense	
						Campaign ca	r re	entai		
L					L					_
l _	Complete ONLY if direct	Candidate/Officel	nolder name	Office sou	ght	<u> </u>		Office he	eld	
	expenditure to benefit C/OI	1								
Г										_
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/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 33/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	02/26/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$173.45	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign car rental
		Sampaign sai romai
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davies same
	02/26/2024	Payee name EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code P.O. Box 402383
	\$173.45	P.O. B0X 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign car rental
		Sampaign sai romai
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Date	Davies name
	02/26/2024	Payee name EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$173.45	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign car rental
		Gampaign can roman
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

l	Credit Card Payment	The Instruction Guide explains how to c	-	ete this form.
1	Total pages Schedule F1:	·		3 Filer ID (Ethics Commission Filers)
	Sch: 34/128 Rpt:	Abbott, Greg (The Honorable)		00019652
4	Date	5 Payee name		<u> </u>
	02/27/2024	EAN Services, LLC		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
l	\$46.99	P.O. Box 402383		
l				
		Atlanta, GA 30384		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense
				Campaign car rental
9	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
ľ	expenditure to benefit C/O		ugnt	Office field
⊨	Data			
	Date	Payee name		
L	02/27/2024	EAN Services, LLC		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$46.99	P.O. Box 402383		
		Atlanta, GA 30384		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Campaign car rental
H	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
l	expenditure to benefit C/O			
F	Date	Payee name		
	03/05/2024	EAN Services, LLC		
H	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$64.42	P.O. Box 402383		
		Atlanta, GA 30384		
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	Travel In District	``	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Campaign car rental
L			_	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught	Office held
<u> </u>				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to cor	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 35/128 Rpt:	Abbott, Greg (The Honorable)		00019652
4	Date	5 Payee name		
	03/05/2024	EAN Services, LLC		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$64.42	P.O. Box 402383		
		Atlanta, GA 30384		
8	PURPOSE OF	,	(b)	Description
	EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Campaign car rental
9	Complete ONLY if direct	Candidate/Officeholder name Office sout	ght	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	03/05/2024	EAN Services, LLC		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$64.42	P.O. Box 402383		
		Atlanta, GA 30384		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Campaign car rental
				our pargir our rollium
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI	4		
	Date	Payee name		
	03/05/2024	EAN Services, LLC		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$64.42	P.O. Box 402383		
		Atlanta, GA 30384		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE			Check if Austin, TX, officeholder living expense
				Campaign car rental
	Complete ONLY if direct	Candidate/Officeholder name Office sour	aht	Office held
	expenditure to benefit C/OI		giit	Office Held
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 36/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	03/05/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$64.42	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign car rental
		Sampaigh ear rental
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
\vdash	Date	Power name
	03/05/2024	Payee name EAN Services LLC
		EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.42	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign car rental
		Sampaigh sai rontai
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash	Date	Payee name
	03/05/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.42	P.O. Box 402383
	Ψ04.42	1.0. DOX 402000
		Atlanta CA 20294
	DUDESSE	Atlanta, GA 30384
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign car rental
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 37/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	03/05/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$64.42	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign car rental
		Campagn carrena
Ļ	On and the ONE Wife disease	Occasional Office health and a second of the
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	<u> </u>	
	Date	Payee name
	03/05/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.43	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign car rental
L	Operation ONE V if dispert	Occasional Office health and a second of the
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L	<u> </u>	
	Date	Payee name
	03/05/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.43	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
Ī		Campaign car rental
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experiorale to belieff C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 38/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	03/05/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$64.43	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign car rental
		Sampaigh ear rental
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
۱	expenditure to benefit C/O	
H	Date	Power name
	03/05/2024	Payee name
		EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.43	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign car rental
		Campaigh car rental
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davies same
	03/05/2024	Payee name EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.43	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense Campaign car rental
		Campaign car rental
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to comp	plete this	s form.		
1	Total pages Schedule F1:	2 FILER NAME		3	iler ID	(Ethics Commission Filers)
	Sch: 39/128 Rpt:	Abbott, Greg (The Honorable)			00019652	
4	Date	5 Payee name		·		
	03/05/2024	EAN Services, LLC				
6	Amount (\$)	7 Payee address; City; State; Zip Code	е			
	\$64.43	P.O. Box 402383				
		Atlanta, GA 30384				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)) Desc	cription		
	OF EXPENDITURE	Travel In District		heck if travel outside heck if Austin, TX, c		
			_	npaign car rer		expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt		Office he	eld
	expenditure to benefit C/OI	1				
F	Date	Payee name				
	03/05/2024	EAN Services, LLC				
	Amount (\$)	Payee address; City; State; Zip Code	e			
	\$99.59	P.O. Box 402383				
l						
		Atlanta, GA 30384				
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Desc	cription		
	OF EXPENDITURE	Travel In District	CI	heck if travel outside		
	LAFLINDITORL			heck if Austin, TX, o		expense
			Can	npaign car rer	ılaı	
┝	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt .		Office he	7ld
	expenditure to benefit C/OI	•			Office fic	Jiu
H	Date	Payee name				
	03/05/2024	EAN Services, LLC				
┝	Amount (\$)	Payee address; City; State; Zip Code	<u> </u>			
	\$99.59	P.O. Box 402383	-			
	φσσ.σσ	1.0. Box 102000				
		Atlanta, GA 30384				
	PURPOSE		b) Desc	orintion		
	OF	(a) Category (See Categories listed at the top of this schedule) Travel In District		heck if travel outside	e of Texas. Com	plete Schedule T.
	EXPENDITURE	Traver in Biodiec		heck if Austin, TX, o		expense
			Cam	npaign car rer	ntal	
	Operated ONE VIII	Out distance 10ff asked days as	-4		04	.1.1
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	10		Office he	eiu
	•					

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

l	Credit Card Payment	The Instruction Guide explains how to	-	ete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·		3 Filer ID (Ethics Commission Filers)
	Sch: 40/128 Rpt:	Abbott, Greg (The Honorable)		00019652
4	Date	5 Payee name		<u> </u>
	03/05/2024	EAN Services, LLC		
6	Amount (\$)	7 Payee address; City; State; Zip (Code	
l	\$99.59	P.O. Box 402383		
l				
		Atlanta, GA 30384		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense
				Campaign car rental
9	Complete ONLY if direct	Candidate/Officeholder name Office so	uaht	Office held
ľ	expenditure to benefit C/OI		Jugiit	Office field
⊨	Data			
	Date	Payee name		
L	03/05/2024	EAN Services, LLC		
	Amount (\$)	Payee address; City; State; Zip (Code	
	\$99.59	P.O. Box 402383		
		Atlanta, GA 30384		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Campaign car rental
H	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/OI			
F	Date	Payee name		
	03/05/2024	EAN Services, LLC		
H	Amount (\$)	Payee address; City; State; Zip (Code	
	\$99.59	P.O. Box 402383		
		Atlanta, GA 30384		
┝	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF	Travel In District	()	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
1				Campaign car rental
L				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ought	Office held
L	Ondition to bottom O/OI	•		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 41/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	03/05/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$99.59	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Compaign oar reptal
		Campaign car rental
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiantare to benefit ere	
	Date	Payee name
	03/05/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$99.59	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Compaign oar reptal
		Campaign car rental
	Compulate ONLY if direct	Condidate/Officeholder name Office sought Office hold
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	•	
	Date	Payee name
	03/05/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$99.59	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Compaign oar reptal
		Campaign car rental
	0 1. 5	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onponditure to beliefit 6/01	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 42/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	03/05/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$99.59	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign car rental
		Campaign carrentar
Ļ	Commiste ONII V if diseast	Condidate/Officeholder name
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	03/05/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$99.59	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign car rental
L	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/05/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$99.59	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Campaign car rental
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to beliefft C/O	•

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 43/128 Rpt:	Abbott, Greg (The Honorable)	00019652
4	Date	5 Payee name	·
	03/05/2024	EAN Services, LLC	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$99.59	P.O. Box 402383	
		Atlanta, GA 30384	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Campaign car rental
			, ,
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
F	Date	Payee name	
	03/05/2024	EAN Services, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$99.59	P.O. Box 402383	
		Atlanta, GA 30384	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Campaign car rental
			Campaign da Tonia
H	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
F	Date	Payee name	
	03/05/2024	EAN Services, LLC	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$99.60	P.O. Box 402383	
		Atlanta, GA 30384	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Campaign car rental
			Campaign car rental
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
-			

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Services			/ages	s/Contract Labor		OTHER (enter a	a category not listed a	bove)
		_		The Instruction G	uide expiains n	low to col	mpie	ete tnis form.	_			
1	Total pages Schedule F1:	1							3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 44/128 Rpt:		Abbott, Gre	g (The Honoral	ble)					00019652		
4	Date	5	Payee name									
	03/05/2024		EAN Service	es, LLC								
6	Amount (\$)	7	Payee addres	ss; City;	State:	Zip Co	de					
ľ	\$99.60	ı	P.O. Box 40		State,	Zip Co	uc					
	φ99.00		F.O. DOX 40	12303								
			Atlanta, GA	30384								
8	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Travel In Dis					Check if travel of	outsi	de of Texas. Cor	mplete Schedule T.	
	LAFENDITORE							\Box		officeholder livin	ig expense	
								Campaign ca	ır re	ental		
9	Complete ONLY if direct		Candidate/Offic	ceholder name	0	ffice sou	ght			Office h	ield	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	03/12/2024	1	EAN Service	es. LLC								
	Amount (\$)	┡	Payee addres		Stato:	Zip Co	do					
	\$56.45	ı	P.O. Box 40		Siale,	Zip Co	ue					
	Φ30.43		P.O. BOX 40	12303								
			Atlanta, GA	30384								
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Travel In Dis								mplete Schedule T.	
	EXI ENDITORE							_		officeholder livin	ig expense	
								Campaign ca	ır re	ental		
	Complete ONLY if direct		Candidate/Office	ceholder name	0	ffice sou	ght			Office h	ield	
	expenditure to benefit C/OI	П										
	Date		Payee name									
	03/12/2024		EAN Service	es, LLC								
	Amount (\$)		Payee addres	ss; City;	State:	Zip Co	de					
	\$56.45	ı	P.O. Box 40			_,						
	Ψ00.40		1 .O. BOX 40	2000								
			Atlanta, GA	30384								
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Travel In Dis	strict							mplete Schedule T.	
										officeholder livin	ig expense	
								Campaign ca	u re	ııldı		
	Complete ONLY if direct		Candidate/Office	ceholder name	0	ffice sou	ght			Office h	ield	
L	expenditure to benefit C/OH											
				<u> </u>				<u> </u>				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

\$56.45 P.O. Box 402383 Atlanta, GA 30384		Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
Date S Payse name EAN Services, LLC	1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
D3/12/2024 EAN Services, LLC 6 Amount (\$) 7 Payee address: City; State; Zip Code \$56.45 P.O. Box 402383 Atlanta, GA 30384 8 PURPOSE OF Travel In District 9 Complete ONLY if direct expenditure to benefit C/OH Date 03/12/2024 EAN Services; LLC Amount (\$) Payee address: City; State; Zip Code PORPOSE OF EXPENDITURE 1 Payee address: City; State; Zip Code PORPOSE OF Travel In District 1 District 1 District 1 District 1 District 1 District 2 Candidate/Officeholder name Office sought Office held Porpose OF EXPENDITURE 2 Payee address: City; State; Zip Code PORPOSE OF Travel In District 2 Candidate/Officeholder name Office sought Office held 2 Category (See Categories listed at the top of this schedule) Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee address: City; State; Zip Code EXPENDITURE 4 Payee name EAN Services, LLC Amount (\$) Payee address: City; State; Zip Code Payee name EAN Services, LLC Amount (\$) Payee address: City; State; Zip Code Payee address: City; State; Zip Code Payee address: City; State; Zip Code Por EAN Services, LLC Amount (\$) Payee address: City; State; Zip Code Por EAN Services, LLC Amount (\$) Payee address: City; State; Zip Code Propose (a) Category (See Categories listed at the top of this schedule) Office held Purpose OF Code (a) Category (See Categories listed at the top of this schedule) Office held (b) Description One City (a) Category (See Categories listed at the top of this schedule) Office held (b) Description One City (a) Category (See Categories listed at the top of this schedule) One City (City Categories Schedule T. Categories (See Categories Isseed at the top of this schedule) One City (City Categories Schedule T. Categories (See Categories Isseed at the top of this schedule) Office Roughly Categories (Code Categories Isseed at the top of this schedule) Office Roughly Categories (Code Categories Isseed at the top of this schedule) Office Roughly Categories (Code Categories Isseed at the top of this schedule) Office Ro			
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Atlanta, GA 30384 8	6	Amount (\$)	7 Payee address; City; State; Zip Code
Complete QNLY if direct expenditure to benefit C/OH		\$56.45	P.O. Box 402383
Complete QNLY if direct expenditure to benefit C/OH			
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Complete ONLY if direct expenditure to benefit C/OH	8		(a) Category (See Categories listed at the top of this schedule) (b) Description
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9 Complete ONLY if direct expenditure to benefit C/OH Date			l
Date 03/12/2024 Payee name EAN Services, LLC Amount (\$) Payee address; City; State; Zip Code P.O. Box 402383 Atlanta, GA 30384 PURPOSE OF EXPENDITURE Candidate/Officeholder name Office sought Office held Date 03/12/2024 Payee andress; City; State; Zip Code P.O. Box 402383 Atlanta, GA 30384 (a) Category (See Categories listed at the top of this schedule) Travel In District Campaign car rental Complete ONLY if direct expenditure to benefit C/OH Date 03/12/2024 Payee name EAN Services, LLC Amount (\$) Payee address; City; State; Zip Code P.O. Box 402383 Atlanta, GA 30384 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if avail outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental (b) Description Check if avail outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Campaigh car rental
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 46/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	03/12/2024	EAN Services, LLC
6	Amount (\$) \$56.45	7 Payee address; City; State; Zip Code P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/12/2024	EAN Services, LLC
	Amount (\$) \$56.45	Payee address; City; State; Zip Code P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/12/2024	EAN Services, LLC
	Amount (\$) \$56.45	Payee address; City; State; Zip Code P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 47/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	03/12/2024	EAN Services, LLC
6	Amount (\$) \$56.45	7 Payee address; City; State; Zip Code P.O. Box 402383
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		Atlanta, GA 30384
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
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9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
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H	Date	Payee name
	03/12/2024	EAN Services, LLC
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	φ50.45	P.O. BOX 402303
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		Atlanta, GA 30384
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	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign car rental
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	1
	Date	Payee name
	03/12/2024	EAN Services, LLC
-	Amount (\$)	Payee address; City; State; Zip Code
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		Atlanta, GA 30384
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		Campaign car rental
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SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage E
Contributions/ Donations Made By - Gitt/Awards/Mem

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:		·s)
•	Sch: 48/128 Rpt:	Abbott, Greg (The Honorable) 00019652	3)
4	Date	5 Payee name	
	03/12/2024	EAN Services, LLC	
6	Amount (\$) \$56.45	7 Payee address; City; State; Zip Code P.O. Box 402383 Atlanta, GA 30384	
8	PURPOSE		
°	OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.	
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9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	03/12/2024	EAN Services, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
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		Atlanta, GA 30384	
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	Date	Payee name	
	03/12/2024	EAN Services, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$56.45	P.O. Box 402383	
		Atlanta, GA 30384	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign car rental	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 49/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	03/12/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$59.62	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign car rental
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9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
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	03/12/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$59.62	P.O. Box 402383
		Atlanta, GA 30384
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	Date	Payee name
	03/12/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$59.62	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
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		Campaign car rental
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SCHEDULE F1

Advertising Expense Event E
Accounting/Banking Fees
Consulting Expense Food/Be
Contributions/ Donations Made By - Gfft/Awa
Contributions/ Distributions/ Contributions/ Contributions/ Contributions/ Contributions/ Contrib

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 50/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	03/12/2024	EAN Services, LLC
6	Amount (\$) \$59.62	7 Payee address; City; State; Zip Code P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/12/2024	EAN Services, LLC
	Amount (\$) \$59.62	Payee address; City; State; Zip Code P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/12/2024	EAN Services, LLC
	Amount (\$) \$59.62	Payee address; City; State; Zip Code P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Committee	Gift/Awards/Memorials Ex Legal Services The Instruction Guid			ages/Contract Labor	Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	<u></u>				3 Filer ID	(Ethics Commission Filers)
	Sch: 51/128 Rpt:		reg (The Honorable	:)			00019652	
4	Date	5 Payee nam	ie					
	03/12/2024	EAN Serv	ices, LLC					
6	Amount (\$) \$59.62	7 Payee addi P.O. Box Atlanta, G	402383	State;	Zip Cod	le		
8	PURPOSE	(a) Category	(See Categories listed at the	top of this sched	edule) ((b) Description		
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						Campaign ca	ar rental	
9	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Of	ffice soug	ht	Office he	eld
	Date	Payee nam	ne					
	03/12/2024	EAN Serv	ices, LLC					
	Amount (\$)	Payee add	ress; City;	State;	Zip Cod	le		
	\$59.62	P.O. Box	402383					
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	Amount (\$)	Payee add	ress; City;	State;	Zip Cod	le		
	\$59.62	P.O. Box	402383					
		Atlanta, G	A 30384					
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						Campaign ca		
	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Of	ffice soug	ht	Office he	eld

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 52/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	03/12/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$59.62	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign car rental
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
L		
	Date	Payee name
	03/12/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$59.62	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign car rental
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/12/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$59.62	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign car rental
L		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	p = 1 3.5 12 25.15.11 5/01	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 53/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	03/12/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$59.62	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign car rental
		Gampaigh da Tontai
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Data	
	Date	Payee name
	03/12/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$59.62	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign car rental
		Campaign car rental
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/12/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$59.63	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign car rental
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onpenditure to beliefft C/Of	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - ıl Committ	tee Lega	Awards/Memorials E I Services Instruction Guid			ages/	/Contract Labor		Travel Out of OTHER (ent		ict ategory not listed above)
1	Total pages Schedule F1:	2 FII	ER NAMF						3	Filer ID		(Ethics Commission Filers)
Ĺ	Sch: 54/128 Rpt:			he Honorable)				Ĺ	0001965	•	
4	Date	5 Pa	yee name									
	03/12/2024	EA	AN Services,	LLC								
6	Amount (\$) \$59.63	P.(yee address; O. Box 40238 anta, GA 303		State;	Zip Coo	de 					
8	PURPOSE	(a) Ca	tegory (See Ca	tegories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		avel In Distric					Check if travel of Check if Austin, Campaign ca	, TX,	officeholder li		
9	Complete ONLY if direct expenditure to benefit C/Oh		didate/Officeho	older name	C	Office soug	ght			Office	e helc	t
Г	Date	Pa	yee name						_			
	03/12/2024	1 '	AN Services,	LLC								
	Amount (\$)	Pa	yee address;	City;	State;	Zip Cod	de					
	\$59.63	P.0	O. Box 40238	33								
			anta, GA 303									
	PURPOSE OF			tegories listed at the	top of this sche	edule)	(b)	Description	, .			
	EXPENDITURE	Tra	avel In Distric	t				Check if travel of Check if Austin,				
						1		Campaign ca			y C	
								Jan., pargri ou	10			
	Complete ONLY if direct expenditure to benefit C/Oh		didate/Officeho	older name	C	Office soug	ght		<u> </u>	Office	helc	1
	Date	Pa	yee name									
	03/12/2024		AN Services,	LLC								
	Amount (\$)	Pa	yee address;	City;	State:	Zip Cod	de		_			
	\$132.69	Ι .	O. Box 40238	-	-	,						
	\$102.03	'.'	5. 50% F0200	. .								
		Atl	anta, GA 303	884					_			
	PURPOSE	(a) Ca	tegory (See Ca	tegories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE	Tra	avel In Distric	t				Check if travel of				
	-							Campaign ca			iving ex	xpense
								oampaigh Ca	u 1t	iital		
	Complete ONLY if direct	L Can	didate/Officeho	ılder name		Office soug	ght			Office	held:	1
	expenditure to benefit C/O						-					
							_		_			
_	· · · · ·											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	ll 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: 55/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	03/12/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$132.69	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign car rental
		Sampaigh sai rontai
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/12/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$132.69	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Campaign car rental
		Campaigh our remai
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/12/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$132.69	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Campaign car rental
		Campaign car ichtai
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
	Sch: 56/128 Rpt:	Abbott, Greg (The Honorable)		00019652		
4	Date	5 Payee name				
	03/12/2024	EAN Services, LLC				
6	Amount (\$)	7 Payee address; City; State; Zip Cod	de			
	\$132.69	P.O. Box 402383				
		Atlanta, GA 30384				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
				Campaign car rental		
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held		
	expenditure to benefit C/OI		•			
	Date	Payee name				
	03/12/2024	EAN Services, LLC				
	Amount (\$)	Payee address; City; State; Zip Coo	de			
	\$132.69	P.O. Box 402383				
	,					
		Atlanta, GA 30384				
	PURPOSE		(h)	Description		
	OF	(a) Category (See Categories listed at the top of this schedule) Travel In District	(2)	Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Traver in Bistrict		Check if Austin, TX, officeholder living expense		
				Campaign car rental		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office souç	ght	Office held		
	experience to benefit Gree	·				
	Date	Payee name				
	03/12/2024	EAN Services, LLC				
	Amount (\$)	Payee address; City; State; Zip Coo	de			
	\$132.70	P.O. Box 402383				
		Atlanta, GA 30384				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.		
				Check if Austin, TX, officeholder living expense Campaign car rental		
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held		
	expenditure to benefit C/OI		J	22		
_						

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to con	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 57/128 Rpt:	Abbott, Greg (The Honorable)		00019652
4	Date	5 Payee name		
	03/12/2024	EAN Services, LLC		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$132.70	P.O. Box 402383		
		Atlanta, GA 30384		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Campaign car rental
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI		•	
	Date	Payee name		
	03/12/2024	EAN Services, LLC		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$132.70	P.O. Box 402383		
	,			
		Atlanta, GA 30384		
	PURPOSE		(h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Travel In District	(5)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Traver in District		Check if Austin, TX, officeholder living expense
				Campaign car rental
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
	experience to benefit Gree	·		
	Date	Payee name		
	03/12/2024	EAN Services, LLC		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$132.70	P.O. Box 402383		
		Atlanta, GA 30384		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Campaign car rental
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI		J -	
_				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commis	ssion Filers)		
Sch: 58/128 Rpt: Abbott, Greg (The Honorable) 00019652			
4 Date 5 Payee name			
03/27/2024 EAN Services, LLC			
6 Amount (\$) 7 Payee address; City; State; Zip Code			
\$322.16 P.O. Box 402383			
Atlanta, GA 30384			
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description			
OF Travel In District Check if travel outside of Texas. Complete Schedule T.			
Check if Austin, TX, officeholder living expense Campaign car rental			
Campaign car rental			
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OH			
Date Payee name			
04/02/2024 EAN Services, LLC			
Amount (\$) Payee address; City; State; Zip Code			
\$138.76 P.O. Box 402383			
Atlanta, GA 30384			
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description (b) Description			
Travel In District Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
Campaign car rental			
Sampaigh sai rentai			
Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OH			
D.:			
Date Payee name			
04/09/2024 EAN Services, LLC			
Amount (\$) Payee address; City; State; Zip Code			
\$44.95 P.O. Box 402383			
Atlanta, GA 30384			
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description			
OF Travel In District Check if travel outside of Texas. Complete Schedule T.			
Cneck if Austin, 1X, officenoider living expense			
Campaign car rental			
Operation ONLY if the state of			
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 59/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	04/16/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$75.81	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Campaign car rental
		Campaigh car rental
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Data	
	Date	Payee name
	04/16/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.82	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Compaign our reptal
		Campaign car rental
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Data	
	Date	Payee name
	04/16/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$80.67	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Compaign car routal
		Campaign car rental
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 60/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	04/16/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$156.57	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign car rental
		Campaign carrentar
Ļ	Commiste ONII V if diseast	Condidate/Officeholder name
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
┕		
	Date	Payee name
	04/16/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$214.11	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign car rental
		Campaign carrentar
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	•
⊨	D :	
	Date	Payee name
	04/16/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$235.52	P.O. Box 402383
		Atlanta, GA 30384
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign car rental
L	0 1. 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 61/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	04/22/2024	EAN Services, LLC
6	Amount (\$) \$82.65	7 Payee address; City; State; Zip Code P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/22/2024	EAN Services, LLC
	Amount (\$) \$143.74	Payee address; City; State; Zip Code P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/22/2024	EAN Services, LLC
	Amount (\$) \$143.74	Payee address; City; State; Zip Code P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 62/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	04/22/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$143.74	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Campaign car rental
		Campaigh car rental
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	05/07/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$41.96	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Compaign our reptal
		Campaign car rental
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date 05/07/2024	Payee name
		EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.41	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense Campaign car rental
		Campaign car rentar
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 63/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	05/14/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$41.96	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign car rental
		Campaigh car rental
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Data	David and the second se
	Date	Payee name
	05/21/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$47.56	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	-	Compaign oar reptal
		Campaign car rental
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date 05/21/2024	Payee name
		EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$88.90	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense Campaign car rental
		Campaign car rental
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 64/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	05/21/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$192.48	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign car rental
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/O	
L	<u> </u>	
	Date	Payee name
	05/21/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$247.95	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign car rental
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/28/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$102.24	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign car rental
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

(Credit Card Payment	The Instruction Guide explains how	to complete this form.
1 To	otal pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 65/128 Rpt:	Abbott, Greg (The Honorable)	00019652
4 D	ate	5 Payee name	
0;	5/28/2024	EAN Services, LLC	
6 Ai	mount (\$) \$115.63	7 Payee address; City; State; Z P.O. Box 402383	p Code
		Atlanta, GA 30384	
8 	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Travel In District	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental
	omplete <u>ONLY</u> if direct kpenditure to benefit C/OI		e sought Office held
D	ate	Payee name	
0;	5/28/2024	EAN Services, LLC	
Aı	mount (\$) \$115.63	Payee address; City; State; Z P.O. Box 402383	p Code
		Atlanta, GA 30384	
E	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Travel In District	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental
	omplete <u>ONLY</u> if direct kpenditure to benefit C/OI		e sought Office held
Di	ate	Payee name	
0;	5/28/2024	EAN Services, LLC	
Aı	mount (\$) \$115.64	Payee address; City; State; Z P.O. Box 402383	p Code
		Atlanta, GA 30384	
E	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Travel In District	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign car rental
	omplete <u>ONLY</u> if direct kpenditure to benefit C/OI		e sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to con	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 66/128 Rpt:	Abbott, Greg (The Honorable)		00019652
4	Date	5 Payee name		,
	05/28/2024	EAN Services, LLC		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
l	\$139.66	P.O. Box 402383		
		Atlanta, GA 30384		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.
				Campaign car rental
				Campaign car remai
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/O		,	
⊨	Date	Payee name		
	05/28/2024	EAN Services, LLC		
⊢	Amount (\$)	Payee address; City; State; Zip Coo	<u></u>	
	\$139.66	P.O. Box 402383		
	¥200.00			
		Atlanta, GA 30384		
┝	PURPOSE		(h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Travel In District	(15)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Traver in District		Check if Austin, TX, officeholder living expense
				Campaign car rental
L				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght	Office held
┕	·			
l	Date	Payee name		
L	05/28/2024	EAN Services, LLC		
	Amount (\$)	Payee address; City; State; Zip Coc	de	
l	\$139.66	P.O. Box 402383		
L		Atlanta, GA 30384		
l	PURPOSE OF	,	(b)	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Travel In District		Check if Austin, TX, officeholder living expense
l				Campaign car rental
Г	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/O	1		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to cor	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 67/128 Rpt:	Abbott, Greg (The Honorable)		00019652
4	Date	5 Payee name		-
	05/28/2024	EAN Services, LLC		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
l	\$143.74	P.O. Box 402383		
		Atlanta, GA 30384		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Campaign car rental
				Campaign car remai
9	Complete ONLY if direct	Candidate/Officeholder name Office sout	aht	Office held
ľ	expenditure to benefit C/O		giit	Office field
H	Date	Payee name		
	05/28/2024	EAN Services, LLC		
┝	Amount (\$)	Payee address; City; State; Zip Coo	da	
	\$143.74	P.O. Box 402383	ue	
	Ψ143.74	1.0. Box 402303		
		Atlanta, GA 30384		
┡	DUDDOCE		/l-\	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel In District	(u)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Havei in District		Check if Austin, TX, officeholder living expense
				Campaign car rental
L				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held
L	experialitate to beliefit C/O	1		
l	Date	Payee name		
	05/28/2024	EAN Services, LLC		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
l	\$145.46	P.O. Box 402383		
l				
		Atlanta, GA 30384		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l				Campaign car rental
				, 🧸
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O			
H				
L				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 68/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	05/28/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$209.88	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign car rental
		Campaign cai rentai
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	05/28/2024	EAN Services, LLC
H	Amount (\$)	Payee address; City; State; Zip Code
	\$209.89	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign car rental
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	05/28/2024	EAN Services, LLC
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$209.89	P.O. Box 402383
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign car rental
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 69/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	05/28/2024	EAN Services, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$209.89	P.O. Box 402383
		Atlanta, GA 30384
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign car rental
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
	Date	Payee name
	06/25/2024	EAN Services, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$330.60	P.O. Box 402383
	φοσο.σσ	1 101 Box 192900
		Atlanta, GA 30384
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Campaign car rental
		Campaigh da renai
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Davido namo
	02/02/2024	Payee name Embassy Suites
		·
	Amount (\$)	Payee address; City; State; Zip Code 550 S. Buchanan Street SE
	\$149.58	550 S. Buchanan Street SE
	l	Amarillo, TX 79101
	DUDDOCE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Lodging to attend campaign event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	ч

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	mmittee	Gift/Awards/Memori Legal Services The Instruction	·		ages.	/Contract Labor		Travel Out of D OTHER (enter	istrict a category not listed above)
<u> </u>	Tatalanana C.I. III Ti	٦	Ell ED MAN		-aide expidills				<u> </u>	Ell 15	(Ethios Commission Ethio)
1	Total pages Schedule F1: Sch: 70/128 Rpt:	2		: g (The Honora	able)				3	Filer ID 00019652	(Ethics Commission Filers)
Ļ		<u> </u>		9 (1110 11011011					<u> </u>	00013032	
4	Date	5	Payee name								
L	02/24/2024	L	Hilton Gard	en Inn							
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de				
	\$55.18		912 Northto	n Street							
			Fort Worth,	TX 76104							
8	PURPOSE	(a)		ee Categories listed a	at the ten of this sale	hodulo)	(b)	Description			
	OF	``'	Travel In Di		at the top of this scr	neuule)	()	_ `	outsi	de of Texas. Cor	mplete Schedule T.
	EXPENDITURE		. Idvoi III Di	J. 101				므		officeholder livin	
								Lodging to at	ten	d campaigr	n event
9	Complete ONLY if direct		Candidate/Offi	ceholder name	(Office sou	ght			Office h	neld
	expenditure to benefit C/OI	Н				·					
H	Date		Payee name								
	02/24/2024		Hilton Gard	en Inn							
\vdash	Amount (\$)	\vdash	Payee addre	ss; City;	State	; Zip Co	de				
	\$55.18		912 Northto		2.300	. , , 50	-				
	Ψ30.10		512 . W. W. W.	50.000							
			End Maria	TV 70404							
		L	Fort Worth,								
	PURPOSE OF	(a)	Category (Se	ee Categories listed	at the top of this sch	hedule)	(b)	Description			
	OF EXPENDITURE		Travel In Di	strict				-			mplete Schedule T.
	- -							—		officeholder livin	
								Lodging to at	ıen	u campaigi	ı evelil
_	Complete ONLY if direct	Ц	Candidata/Offi	coholdor nama		Office sour	ab+			Office h	nold
	Complete ONLY if direct expenditure to benefit C/OI		zariuiuale/OIII	ceholder name	(Office sou	yııı			Office h	ICIU
\vdash	<u> </u>										
	Date		Payee name								
	02/24/2024		Hilton Gard	en Inn							
	Amount (\$)		Payee addre	ss; City;	State	e; Zip Co	de				
	\$55.18		912 Northto	n Street							
			Fort Worth,	TX 76104							
	PURPOSE	(a)	Category (Se	ee Categories listed	at the top of this sch	hedule)	(b)	Description			
	OF	^	Travel In Di			/	-		outsi	de of Texas. Cor	mplete Schedule T.
	EXPENDITURE									officeholder livin	
								Lodging to at	ten	d campaigr	n event
	Complete ONLY if direct		Candidate/Offi	ceholder name	(Office sou	ght			Office h	neld
	expenditure to benefit C/OI	H									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 71/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	02/24/2024	Hilton Garden Inn
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$55.18	912 Northton Street
		Fort Worth, TX 76104
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Lodging to attend campaign event
		Loughing to attend outspanger overt
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	02/24/2024	Hilton Garden Inn
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.18	912 Northton Street
		Fort Worth, TX 76104
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Lodging to attend campaign event
		Loughig to attenu campaight event
	Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/24/2024	Hilton Garden Inn
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.18	912 Northton Street
		Fort Worth, TX 76104
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Lodging to attend campaign event
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 72/128 Rpt:	2 FILER NAME Abbott, Greg (The Honorable) 3 Filer ID (Ethics Commission Filers) 00019652
4	Date 02/24/2024	5 Payee name Hilton Garden Inn
6	Amount (\$) \$55.18	7 Payee address; City; State; Zip Code 912 Northton Street
		Fort Worth, TX 76104
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lodging to attend campaign event
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/24/2024	Hilton Garden Inn
	Amount (\$) \$55.18	Payee address; City; State; Zip Code 912 Northton Street
		Fort Worth, TX 76104
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lodging to attend campaign event
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 02/24/2024	Payee name Hilton Garden Inn
	Amount (\$) \$55.18	Payee address; City; State; Zip Code 912 Northton Street
		Fort Worth, TX 76104
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lodging to attend campaign event
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 73/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	02/24/2024	Hilton Garden Inn
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$55.18	912 Northton Street
		Fort Worth, TX 76104
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Lodging to attend campaign event
		Loughig to attenu campaight event
_	Operation ONLY if all parts	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
	•	
	Date	Payee name
	02/24/2024	Hilton Garden Inn
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.19	912 Northton Street
		Fort Worth, TX 76104
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Lodging to attend campaign event
		Loughig to attend earlpaight event
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/24/2024	Hilton Garden Inn
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.19	912 Northton Street
		Fort Worth, TX 76104
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Lodging to attend campaign event
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By
Condidate/Officebolder/Political

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
-	Total pages Cabadula 54:	
	Total pages Schedule F1:	
	Sch: 74/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	02/24/2024	Hilton Garden Inn
6	Amount (\$)	7 Payee address; City; State; Zip Code
١	\$55.19	912 Northton Street
	Ψ00.10	522.13.13.13.13
		For A Month. TV 70404
		Fort Worth, TX 76104
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Lodging to attend campaign event
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	ר
	Date	Payee name
	02/24/2024	Hilton Garden Inn
H	Amount (\$)	Payee address; City; State; Zip Code
	\$55.19	912 Northton Street
	Ψ33.13	ozz Holaiton Groot
		Fort Worth, TX 76104
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Lodging to attend campaign event
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
L		•
	Date	Payee name
	02/24/2024	Hilton Garden Inn
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.19	912 Northton Street
		Fort Worth, TX 76104
	DUDDOCE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Lodging to attend campaign event
	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 M Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
-	Total pages Cabadyla 51:	
	Total pages Schedule F1:	
	Sch: 75/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	02/24/2024	Hilton Garden Inn
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$55.19	912 Northton Street
	¥35.25	
		Fort Month, TV 70104
		Fort Worth, TX 76104
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Lodging to attend campaign event
Ļ		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitate to benefit 6/61	'
	Date	Payee name
	02/27/2024	Hotels.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$47.11	5400 LBJ Freeway Suite 500
	*=	
		Dallag TV 75040
		Dallas, TX 75240
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Lodging to attend campaign event
		Loughing to attend campaign event
	0 1: 0 1: 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/27/2024	Hotels.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$47.11	5400 LBJ Freeway Suite 500
		Dallas, TX 75240
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Lodging to attend campaign event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

l	Credit Card Payment	The Instruction Guide explains how to com	olete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
l	Sch: 76/128 Rpt:	Abbott, Greg (The Honorable)	00019652
4	Date	5 Payee name	I
	02/27/2024	Hotels.com	
6	Amount (\$) \$47.11	7 Payee address; City; State; Zip Code 5400 LBJ Freeway Suite 500	
		Dallas, TX 75240	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lodging to attend campaign event
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	t Office held
	Date	Payee name	
	03/04/2024	Houston 59	
	Amount (\$) \$31.56	Payee address; City; State; Zip Code 28570 Hwy 290	
		Cypress, TX 77433	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel for campaign travel
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	t Office held
Г	Date	Payee name	
	04/12/2024	Jet Fly Aviation LLC	
	Amount (\$) \$10,578.00	Payee address; City; State; Zip Code 101 NE 3rd Avenue	
		Fort Lauderdale, FL 33301	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Airplane to attend campaign event
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	t Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 77/128 Rpt:	2 FILER NAME Abbott, Greg (The Honorable) 3 Filer ID (Ethics Commission Filers) 00019652
4	Date 04/12/2024	5 Payee name Jet Fly Aviation LLC
6	Amount (\$) \$10,578.00	7 Payee address; City; State; Zip Code 101 NE 3rd Avenue
8	PURPOSE OF EXPENDITURE	Fort Lauderdale, FL 33301 (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Airplane to attend campaign event
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 04/16/2024	Payee name Jet Fly Aviation LLC
	Amount (\$) \$12,746.28	Payee address; City; State; Zip Code 101 NE 3rd Avenue Fort Lauderdale, FL 33301
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Airplane to attend campaign event
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 05/08/2024	Payee name Jet Fly Aviation LLC
	Amount (\$) \$4,918.12	Payee address; City; State; Zip Code 101 NE 3rd Avenue
		Fort Lauderdale, FL 33301
_	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Airplane to attend campaign event
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Cabadula F1:	
1 Total pages Schedule F1:	
Sch: 78/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4 Date	5 Payee name
05/08/2024	Jet Fly Aviation LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4,918.12	101 NE 3rd Avenue
* ',	
	Forth sudandala, El 20004
	Fort Lauderdale, FL 33301
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Airplane to attend campaign event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/Of	1
Date	Payee name
05/08/2024	Jet Fly Aviation LLC
Amount (\$)	Payee address; City; State; Zip Code
\$4,918.12	101 NE 3rd Avenue
* ',	
	Forth sudandala, El 20004
	Fort Lauderdale, FL 33301
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Airplane to attend campaign event
	Airplane to attend campaign event
One of the ONE Wife disease	On did to 10 ff as hald a grant Off as a south
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	
Date	Payee name
05/08/2024	Jet Fly Aviation LLC
Amount (\$)	Payee address; City; State; Zip Code
\$4,918.12	101 NE 3rd Avenue
	Fort Lauderdale, FL 33301
DUDDOSE	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Airplane to attend campaign event
	F
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 79/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	05/08/2024	Jet Fly Aviation LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,918.13	101 NE 3rd Avenue
		Fort Lauderdale, FL 33301
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Airplane to attend campaign event
		7 in plane to attend outling if event
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
\vdash	Date	Payee name
	05/08/2024	Jet Fly Aviation LLC
		-
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,918.13	101 NE 3rd Avenue
		Fort Lauderdale, FL 33301
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Airplane to attend campaign event
		Airpiane to attend campaign event
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	Davies same
	Date 05/08/2024	Payee name
		Jet Fly Aviation LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,918.13	101 NE 3rd Avenue
		Fort Lauderdale, FL 33301
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Airplane to attend campaign event
		Airpiane to attenu campaign event
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Tatal as a second of Education Education	· · · · · · · · · · · · · · · · · · ·
_	Total pages Schedule F1:	
	Sch: 80/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	05/08/2024	Jet Fly Aviation LLC
Ļ		·
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,918.13	101 NE 3rd Avenue
		Fort Lauderdale, FL 33301
Ļ	DUDDOS.	1
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Airplane to attend campaign event
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Payee name
	05/14/2024	Jet Fly Aviation LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$11,986.25	101 NE 3rd Avenue
		Fort Lauderdale, FL 33301
		1
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Airplane to attend campaign event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
-	Date	Payee name
	05/22/2024	Jet Fly Aviation LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,225.00	101 NE 3rd Avenue
		Fort Lauderdale, FL 33301
	DUDDOOF	1
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Airplane to attend campaign event
		Airpiane to attenu campaign event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to comple	te this form.	
1	Total pages Schedule F1: Sch: 81/128 Rpt:	FILER NAME Abbott, Greg (The Honorable)	3 Filer ID (Ethics Comm 00019652	ission Filers)
4	Date 05/22/2024	5 Payee name Jet Fly Aviation LLC	•	
6	Amount (\$) \$1,225.00	7 Payee address; City; State; Zip Code 101 NE 3rd Avenue		
8	PURPOSE OF EXPENDITURE	Fort Lauderdale, FL 33301 (a) Category (See Categories listed at the top of this schedule) Travel In District (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Airplane to attend campaign event	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held	
	Date 06/18/2024	Payee name Pixl Productions, LLC		
	Amount (\$) \$8,375.30	Payee address; City; State; Zip Code 710 Presidential Drive Suite 225 Richardson, TX 75081		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign event production services	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held	
	Date 01/10/2024	Payee name PlainsCapital Bank		
	Amount (\$) \$35.00	Payee address; City; State; Zip Code 919 Congress Avenue		
		Austin, TX 78701		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign bank fee	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 82/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	01/11/2024	PlainsCapital Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.00	919 Congress Avenue
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign bank fee
		Campaign bank ice
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	01/29/2024	PlainsCapital Bank
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	
	φ33.00	919 Congress Avenue
L		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign bank fee
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	02/16/2024	PlainsCapital Bank
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	919 Congress Avenue
	Ψ00.00	313 Congress / Wenter
		Austin, TX 78701
L	PURPOSE	In .
	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign bank fee
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	1
Г		
ĺ		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

l	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
l	Sch: 83/128 Rpt:	Abbott, Greg (The Honorable)		00019652
4	Date	5 Payee name		'
	02/16/2024	PlainsCapital Bank		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
l	\$35.00	919 Congress Avenue		
		Austin, TX 78701		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Campaign bank fee
				Campaign bank ree
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
ľ	expenditure to benefit C/O		giit	Office field
H	Date	Payee name		
	02/20/2024	PlainsCapital Bank		
┝	Amount (\$)	Payee address; City; State; Zip Co	nda	
l	\$15.00	919 Congress Avenue	uc	
	Ψ10.00	515 Gongress / Wende		
		Austin, TX 78701		
┝	PURPOSE		(h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(D)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Danking		Check if Austin, TX, officeholder living expense
				Campaign bank fee
L				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
L				
l	Date	Payee name		
	02/21/2024	PlainsCapital Bank		
l	Amount (\$)	Payee address; City; State; Zip Co	de	
l	\$15.00	919 Congress Avenue		
		Austin, TX 78701		
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l				Campaign bank fee
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O			
Г				
L				

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
-	Sch: 84/128 Rpt:	Abbott, Greg (The Honorable)		
4	Date	5 Payee name		
-	02/21/2024	PlainsCapital Bank		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$35.00	919 Congress Avenue		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	g		
		Auglia TV 70701		
		Austin, TX 78701		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense Campaign bank fee		
		Campaigh bank ice		
Ļ	0 1: 0:::::::::::::::::::::::::::::::::			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
L				
	Date	Payee name		
	02/21/2024	PlainsCapital Bank		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$35.00	919 Congress Avenue		
		3 · · · · · · · · · · · · · · · · · · ·		
		Auctin TV 70701		
		Austin, TX 78701		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Campaign bank fee		
		Campaign bank 100		
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI			
	Date	Payee name		
	02/26/2024	PlainsCapital Bank		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$35.00	919 Congress Avenue		
		Austin, TX 78701		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITORE	Check if Austin, TX, officeholder living expense		
		Campaign bank fee		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OH			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 85/128 Rpt:	Abbott, Greg (The Honorable)	00019652
4	Date	5 Payee name	
	03/01/2024	PlainsCapital Bank	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$35.00	919 Congress Avenue	
		Austin, TX 78701	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	7 tooleanting/Banking	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
		Campaign b	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	03/07/2024	PlainsCapital Bank	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.00	919 Congress Avenue	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	/ ccounting/ banking	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
		Campaign b	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
	Date	Payee name	
	03/08/2024	PlainsCapital Bank	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.00	919 Congress Avenue	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	/ tecounting/Banking	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense
		Campaign b	- '
-	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 Com

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 86/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	03/18/2024	PlainsCapital Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.00	919 Congress Avenue
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign bank fee
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	04/09/2024	PlainsCapital Bank
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	919 Congress Avenue
	φ33.00	919 Congress Avenue
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign bank fee
		Campaign bank ice
┡	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	•
H	Date	Davisa nama
	04/09/2024	Payee name Plains Capital Rank
L		PlainsCapital Bank
	Amount (\$)	Payee address; City; State; Zip Code
l	\$35.00	919 Congress Avenue
		Austin, TX 78701
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign bank fee
L		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit C/O	•

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

ense Travel in District

ense Travel Out of District

ges/Contract Labor OTHER (enter a c

Date 5 04/09/2024 5 Amount (\$) 7 \$35.00	Abbott, Greg (The Honorable) Payee name PlainsCapital Bank Payee address; City; State; Zip C 919 Congress Avenue Austin, TX 78701	ode		Filer ID 00019652	(Ethics Commission Filers)
Date 04/09/2024 5 Amount (\$) 7 \$35.00 8 PURPOSE OF	Payee name PlainsCapital Bank Payee address; City; State; Zip C 919 Congress Avenue Austin, TX 78701	ode		00019652	
04/09/2024 5 Amount (\$) 7 \$35.00 8 PURPOSE OF (a)	PlainsCapital Bank Payee address; City; State; Zip C 919 Congress Avenue Austin, TX 78701	ode	1		
04/09/2024 5 Amount (\$) 7 \$35.00 8 PURPOSE OF (a)	PlainsCapital Bank Payee address; City; State; Zip C 919 Congress Avenue Austin, TX 78701	ode			
\$35.00 B PURPOSE (a) OF	919 Congress Avenue Austin, TX 78701	ode			
B PURPOSE (a) OF	Austin, TX 78701				
PURPOSE (a)					
PURPOSE (a)					
PURPOSE (a)					
OF `´	Category (2 a	(b) D	Description		
EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Check if travel outsid	e of Texas. Com	nplete Schedule T.
	, 1000a.nan.g, 2a.man.g		Check if Austin, TX,	officeholder living	g expense
		_ C	Campaign bank f	ee	
Complete ONLY if direct C expenditure to benefit C/OH	Candidate/Officeholder name Office so	ught		Office he	eld
experiulture to beriefft C/OH					
Date	Payee name				
04/12/2024	PlainsCapital Bank				
Amount (\$)	Payee address; City; State; Zip C	ode			-
\$35.00	919 Congress Avenue				
	Austin, TX 78701				
PURPOSE (a)	Category (See Categories listed at the top of this schedule)	(b) D	Description		
OF	Accounting/Banking	l` , Ē	Check if travel outsid	e of Texas. Com	nplete Schedule T.
EXPENDITURE	3		Check if Austin, TX,		g expense
			Campaign bank f	ee	
		<u> </u>			
Complete ONLY if direct C expenditure to benefit C/OH	Candidate/Officeholder name Office so	ught		Office he	eld
	Payee name				
04/15/2024	PlainsCapital Bank				
Amount (\$)	Payee address; City; State; Zip C	ode			
\$35.00	919 Congress Avenue				
	Austin, TX 78701				
PURPOSE (a)	Category (See Categories listed at the top of this schedule)	(b) D	Description		
OF EXPENDITURE	Accounting/Banking		Check if travel outsid		
LXI ENDITORE			Check if Austin, TX,) expense
			Campaign bank f	ee	
Complete ONLY & direct	Consideration of the challenge of the constant			Office	ald.
Complete ONLY if direct C expenditure to benefit C/OH	Candidate/Officeholder name Office so	ugnt		Office he	eiu

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 88/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4 Date	5 Payee name
04/22/2024	PlainsCapital Bank
6 Amount (\$) \$35.00	7 Payee address; City; State; Zip Code 919 Congress Avenue Austin, TX 78701
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign bank fee
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/02/2024	PlainsCapital Bank
Amount (\$) \$35.00	Payee address; City; State; Zip Code 919 Congress Avenue
	Austin, TX 78701
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign bank fee
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date 05/02/2024	Payee name PlainsCapital Bank
	·
Amount (\$) \$35.00	Payee address; City; State; Zip Code 919 Congress Avenue
	Austin, TX 78701
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign bank fee
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to	s/wages/Contra complete this	, , , , , , , , , , , , , , , , , , , ,	ove)
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commissi	on Filers)
Sch: 89/128 Rpt:	Abbott, Greg (The Honorable)		00019652	
4 Date	5 Payee name		•	
05/06/2024	PlainsCapital Bank			
6 Amount (\$)	7 Payee address; City; State; Zip	Code		
\$35.00	919 Congress Avenue			
	Austin, TX 78701			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Desc	•	
EXPENDITURE	Accounting/Banking		neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense	
			paign bank fee	
9 Complete ONLY if direct	Candidate/Officeholder name Office s	ought	Office held	
expenditure to benefit C/O	H			
Date	Payee name			
05/07/2024	PlainsCapital Bank			
Amount (\$)	Payee address; City; State; Zip	Code		
\$35.00	919 Congress Avenue			
	Austin, TX 78701			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Desc	•	
EXPENDITURE	Accounting/Banking		neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense	
			paign bank fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office s	ought	Office held	
experiorare to benefit C/O				
Date	Payee name			
05/08/2024	PlainsCapital Bank			
Amount (\$)	Payee address; City; State; Zip	Code		
\$35.00	919 Congress Avenue			
	A			
	Austin, TX 78701	la.		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Desc	ription neck if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Accounting/Banking		neck if Austin, TX, officeholder living expense	
		Cam	paign bank fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office s	ought	Office held	
Forms provided by Texas F	thice Commission www.athice state to		Version V/I 1 0	1070

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 90/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	05/09/2024	PlainsCapital Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.00	919 Congress Avenue
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign bank fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	05/09/2024	PlainsCapital Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	919 Congress Avenue
	400.00	old deligited / World
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign bank fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/10/2024	PlainsCapital Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	919 Congress Avenue
	400.00	old deligited / Welling
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign bank fee
	Computate ONLY if direct	Condidate/Office helder no rec
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	·	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Political Col Credit Card Payment	mmittee Legal Services Salaries A The Instruction Guide explains how to co	Vages/Contract Labor	OTHER (enter a category not listed above)
1 Total pages Schedule F1: 2	FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 91/128 Rpt:	Abbott, Greg (The Honorable)		00019652
4 Date 5	Payee name		
05/14/2024	PlainsCapital Bank		
6 Amount (\$) 7	Payee address; City; State; Zip Co 919 Congress Avenue Austin, TX 78701	ode	
8 PURPOSE (a) OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	l <u>—</u>	outside of Texas. Complete Schedule T. , TX, officeholder living expense unk fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sou	ıght	Office held
Date	Payee name		
05/14/2024	PlainsCapital Bank		
Amount (\$) \$35.00	Payee address; City; State; Zip Co 919 Congress Avenue	ode	
	Austin, TX 78701		
PURPOSE (a) OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	. <u>–</u>	outside of Texas. Complete Schedule T. , TX, officeholder living expense ink fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sou	ight	Office held
Date	Payee name		
05/16/2024	PlainsCapital Bank		
Amount (\$) \$35.00	Payee address; City; State; Zip Co 919 Congress Avenue	ode	
	Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		outside of Texas. Complete Schedule T. TX, officeholder living expense Ink fee
Complete ONLY if direct (expenditure to benefit C/OH	Candidate/Officeholder name Office sou	ight	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 92/128 Rpt:	Abbott, Greg (The Honorable) O0019652
4 Date	5 Payee name
05/17/2024	PlainsCapital Bank
6 Amount (\$) \$35.00	7 Payee address; City; State; Zip Code 919 Congress Avenue
	Austin, TX 78701
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign bank fee
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/17/2024	PlainsCapital Bank
Amount (\$)	Payee address; City; State; Zip Code
\$35.00	919 Congress Avenue
PUPPOG	Austin, TX 78701
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign bank fee
Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/22/2024	PlainsCapital Bank
Amount (\$) \$35.00	Payee address; City; State; Zip Code 919 Congress Avenue
	Austin, TX 78701
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign bank fee
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 93/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	05/22/2024	PlainsCapital Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.00	919 Congress Avenue
	1	
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	!	Campaign bank fee
	!	Gampaign Sammos
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	<u> </u>
	Date	Payee name
	05/23/2024	PlainsCapital Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	919 Congress Avenue
	!	
	!	Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Compaign bank for
		Campaign bank fee
	Camplete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	- · · · · · · · · · · · · · · · · · · ·
	•	
	Date	Payee name
	05/29/2024	PlainsCapital Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	919 Congress Avenue
	!	
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORL	Check if Austin, TX, officeholder living expense
	1	Campaign bank fee
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experialitate to benefit 0,0.	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 94/128 Rpt:	2 FILER NAME Abbott, Greg (The Honorable) 3 Filer ID (Ethics Commission Filers) 00019652
4	Date 05/30/2024	5 Payee name PlainsCapital Bank
6	Amount (\$) \$35.00	7 Payee address; City; State; Zip Code 919 Congress Avenue
8	PURPOSE OF EXPENDITURE	Austin, TX 78701 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign bank fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 05/30/2024	Payee name PlainsCapital Bank
	Amount (\$) \$35.00	Payee address; City; State; Zip Code 919 Congress Avenue Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign bank fee
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 06/27/2024	Payee name PlainsCapital Bank
	Amount (\$) \$15.00	Payee address; City; State; Zip Code 919 Congress Avenue
		Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign bank fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment			vices			se s/Contract Labor	OTHER (enter a	category not listed above)
				truction Guide exp	plains how to co	mple	ete this form.		
1	Total pages Schedule F1: Sch: 95/128 Rpt:	2	FILER NAME Abbott, Greg (The	Honorable)			3	Filer ID 00019652	(Ethics Commission Filers)
4	Date	5	Payee name	<u> </u>					
-	06/27/2024		PlainsCapital Banl	<					
6	Amount (\$) \$35.00	7	Payee address; 919 Congress Ave Austin, TX 78701	•	State; Zip Co	ode			
8	PURPOSE	(a)	Category (See Catego	ries listed at the top of	this schedule)	(b)	Description		
	OF EXPENDITURE		Accounting/Bankir		,		Check if travel out	side of Texas. Com X, officeholder living 〈 fee	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholde	r name	Office sou	ght		Office he	eld
	Date		Payee name						
	02/02/2024		Ragnar Research	Partners LLC					
	Amount (\$)		Payee address;	City;	State; Zip Co	de			
	\$6,750.00		103 E. Street SE						
			Washington, DC 2	0003					
	PURPOSE	(a)	Category (See Catego	ries listed at the top of	this schedule)	(b)	Description		
	OF EXPENDITURE		Polling Expense					side of Texas. Com K, officeholder living İCES	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholde	er name	Office sou	ght		Office he	eld
	Date		Payee name						
	02/05/2024		Ragnar Research	Partners LLC					
	Amount (\$)		Payee address;	City;	State; Zip Co	de			
	\$27,000.00		103 E. Street SE						
			Washington, DC 2	0003					
	PURPOSE OF EXPENDITURE	(a)	Category (See Catego Polling Expense	ries listed at the top of	this schedule)	(b)	ш	side of Texas. Com K, officeholder living ICES	•
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholde	er name	Office sou	ght		Office he	eld

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nittee L	ift/Awards/Memo egal Services The Instruction			xpens Vages	se s/Contract Labor		Travel Out of Di OTHER (enter a		ove)
1	Total pages Schedule F1:	2 F	ILER NAME						3	Filer ID	(Ethics Commissi	on Filers)
	Sch: 96/128 Rpt:	Δ	Abbott, Greg	(The Hono	rable)					00019652		
4	Date	5 P	ayee name									
	04/02/2024	F	Ragnar Rese	arch Partne	ers LLC							
6	Amount (\$)	7 P	avee address	s; City;	Sta	ate; Zip C	ode					
	\$13,850.00	1	.03 E. Street	•								
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,											
		٧	Vashington,	DC 20003			_					
8	PURPOSE	(a) C	Category (See	Categories listed	at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE	P	Polling Expe	nse							plete Schedule T.	
								_		officeholder living	g expense	
								Campaign se	IVIC	<i>.</i> es		
							<u> </u>					
9	Complete ONLY if direct expenditure to benefit C/OI		ındidate/Offic	eholder name	9	Office sou	ıght			Office h	eld	
	Date	Р	ayee name									
	04/09/2024	F	Ragnar Rese	arch Partne	ers LLC							
	Amount (\$)	Р	ayee address	; City;	Sta	ate; Zip C	ode					
	\$23,866.00	1	.03 E. Street	SE								
		v	Vashington,	DC 20003								
	PURPOSE	(a) C	Category (See	Categories listed	at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE	ı	Polling Expe								plete Schedule T.	
								_		officeholder living	g expense	
								Campaign se	rvio	es		
							<u> </u>					
	Complete ONLY if direct expenditure to benefit C/OI		undidate/Offic	eholder name	9	Office sou	ıght			Office h	eld	
	Date	Р	ayee name									
	04/15/2024	F	Ragnar Rese	arch Partne	ers LLC							
	Amount (\$)	P	ayee address	s; City;	Sta	ate; Zip C	ode					
	\$8,900.00	l	.03 E. Street			, [-						
	70,000			-								
		v	Vashington,	DC 20003								
	PURPOSE	(a) C	Category (See	Categories listed	at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE	P	olling Expe	nse				ш			plete Schedule T.	
	EXI ENDITORE									officeholder living	g expense	
								Campaign se	rvio	ces		
	Complete ONLY if direct		ındidate/Offic	eholder name	9	Office sou	ıght			Office h	eld	
	expenditure to benefit C/OI	_										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 97/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	04/16/2024	Ragnar Research Partners LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10,167.00	103 E. Street SE
		Washington, DC 20003
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign services
		Gampaigh Services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
-	Date	Payee name
	05/09/2024	Ragnar Research Partners LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$27,000.00	103 E. Street SE
		Washington, DC 20003
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign services
		Campaign services
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	Davis verse
	Date 02/08/2024	Payee name Red Owl Studios
	Amount (\$)	Payee address; City; State; Zip Code
	\$12,350.00	271Middle Creek
		Buda, TX 78610
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political advertising
		Political advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

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

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

	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: 98/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	02/21/2024	Red Owl Studios
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$17,200.00	271Middle Creek
		Buda, TX 78610
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political advertising
		Political advertising
_	Operation ONLY if allowed	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
	•	
	Date	Payee name
	02/26/2024	Red Owl Studios
	Amount (\$)	Payee address; City; State; Zip Code
	\$17,000.00	271Middle Creek
		Buda, TX 78610
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Political advertising
		Tondoal davordoning
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Data	Power warms
	Date 04/26/2024	Payee name Red Owl Studios
	Amount (\$)	Payee address; City; State; Zip Code
	\$9,000.00	271Middle Creek
		Buda, TX 78610
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political advertising
		Folitical advertising
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

l	Credit Card Payment	The Instruction Guide explains how	-	lete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 99/128 Rpt:	Abbott, Greg (The Honorable)		00019652
4	Date	5 Payee name		'
	05/06/2024	Red Owl Studios		
6	Amount (\$)	7 Payee address; City; State; Z	ip Code	
l	\$18,400.00	271Middle Creek		
l				
		Buda, TX 78610		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Political advertising
				Political advertising
9	Complete ONLY if direct	Candidate/Officeholder name Offic	e sought	Office held
	expenditure to benefit C/O		e sought	Office field
⊨	Date	Davido namo		
	05/20/2024	Payee name Red Owl Studios		
⊢			in Codo	
l	Amount (\$) \$34,855.30	Payee address; City; State; Z 271Middle Creek	ip Code	
	Φ34,055.30	27 Ilvilidale Creek		
		Dudo TV 70010		
L		Buda, TX 78610	I	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule	e) (b)	Description Check if travel outside of Toyon, Complete Schoolule T
	EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Political advertising
Г	Complete ONLY if direct		e sought	Office held
	expenditure to benefit C/O	1		
	Date	Payee name		
	05/09/2024	Rural AM FM LLC		
	Amount (\$)	Payee address; City; State; Z	ip Code	
	\$4,233.60	190 Monroe Avenue Suite 300		
		Grand Rapids, MI 49503		
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule	e) (b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
l	EXI ENDITORE			Check if Austin, TX, officeholder living expense
				Political advertising
\vdash	Complete ONLY if direct	Candidate/Officeholder name Offic	e sought	Office held
	expenditure to benefit C/O		o oougrii	Cinice Hold
\vdash				
L				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ		,
1	Total pages Schedule F1: Sch: 100/128 Rpt:	2 FILER NAME Abbott, Greg (The Honorable) 3 Filer ID (Ethics Commission Filers) 00019652
Ļ	·	
4	Date	5 Payee name
	05/09/2024	Rural AM FM LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6,856.00	190 Monroe Avenue Suite 300
	40,000.00	200 11011100 7 1101100 000
		Grand Rapids, MI 49503
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Political advertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
	Date	Payee name
	05/09/2024	Rural AM FM LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$9,870.84	190 Monroe Avenue Suite 300
	, , , , , , ,	
		Grand Rapids, MI 49503
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	LAI LINDITORL	Check if Austin, TX, officeholder living expense
		Political advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Payee name
	05/09/2024	Rural AM FM LLC
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$12,176.00	190 Monroe Avenue Suite 300
		Grand Rapids, MI 49503
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Political advertising
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
	p = 1 1 2 12 120 3/01	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.			
1	Total pages Schedule F1: Sch: 101/128 Rpt:	FILER NAME Abbott, Greg (The Honorable)		3	Filer ID 00019652	(Ethics Commission Filers)
4	Date 05/09/2024	5 Payee name Rural AM FM LLC				
6	Amount (\$) \$12,576.00	7 Payee address; City; State; Zip Code 190 Monroe Avenue Suite 300				
8	PURPOSE OF EXPENDITURE	Grand Rapids, MI 49503 (a) Category (See Categories listed at the top of this schedule) Advertising Expense	_	stin, TX	ide of Texas. Com , officeholder living sing	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought			Office he	eld
	Date 05/09/2024	Payee name Rural AM FM LLC				
	Amount (\$) \$14,669.00	Payee address; City; State; Zip Code 190 Monroe Avenue Suite 300 Grand Rapids, MI 49503				
	PURPOSE OF EXPENDITURE		ш	stin, TX	ide of Texas. Com , officeholder living sing	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought			Office he	eld
	Date 05/09/2024	Payee name Rural AM FM LLC				
	Amount (\$) \$17,893.00	Payee address; City; State; Zip Code 190 Monroe Avenue Suite 300				
		Grand Rapids, MI 49503				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		stin, TX	ide of Texas. Com , officeholder living sing	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought			Office he	əld

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-	Office O Polling E Printing Salaries	verhea Expens Expens Wages	se s/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
			The Instruction Guide expla	uns now to c	ompi	ete this form.	_		
1	Total pages Schedule F1: Sch: 102/128 Rpt:	l	FILER NAME Abbott, Greg (The Honorable)				3	Filer ID 00019652	(Ethics Commission Filers)
_	Date								
4	05/09/2024		Payee name Rural AM FM LLC						
6	Amount (\$) \$32,798.00	-	Payee address; City; St 190 Monroe Avenue Suite 300 Grand Rapids, MI 49503	ate; Zip C	ode				
8	PURPOSE OF EXPENDITURE	(a) (Category (See Categories listed at the top of this Advertising Expense	s schedule)	(b)	=	, TX	ide of Texas. Comp , officeholder living Sing	
9	Complete ONLY if direct expenditure to benefit C/Oh		andidate/Officeholder name	Office so	ught			Office he	eld
	Date	F	Payee name						
	04/22/2024	ı	Ryan Data & Research						
	Amount (\$)	F	Payee address; City; St	ate; Zip C	ode				
	\$5,000.00	F	P.O. Box 202675						
		,	Austin, TX 78720-2675						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Consulting Expense	s schedule)	(b)		, TX	ide of Texas. Comp , officeholder living CES	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ught			Office he	eld
	Date 02/07/2024	l	Payee name Shell						
	Amount (\$) \$17.23	į	513 State Hwy 71	ate; Zip C	ode				
			Bastrop, TX 78602						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Fravel In District	s schedule)	(b)	ш	, TX	ide of Texas. Comp , officeholder living gn travel	
	Complete ONLY if direct expenditure to benefit C/Oh		andidate/Officeholder name	Office so	ught			Office he	eld

SCHEDULE F1

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

Fees Office Overhead/Rental Expens
Food/Beverage Expense Polling Expense
Git/Awards/Memorials Expense
Legal Services Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to c	ompl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 103/128 Rpt:	Abbott, Greg (The Honorable)		00019652
4	Date	5 Payee name		
	02/07/2024	Shell		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
l	\$17.23	513 State Hwy 71		
L		Bastrop, TX 78602		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Fuel for campaign travel
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught	Office held
L	experialitire to beriefft C/Of	1		
	Date	Payee name		
	05/21/2024	Sideways BBQ		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$4,800.00	2067 Summer Lee Drive #105		
		D		
L		Rockwall, TX 75032		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense		Check if Austin, TX, officeholder living expense
				Campaign event food and beverage
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught	Office held
L				
	Date	Payee name		
L	05/22/2024	Sideways BBQ		
	Amount (\$) \$2,565.00	Payee address; City; State; Zip C 2067 Summer Lee Drive #105	ode	
	φ2,505.00	2007 Summer Lee Drive #103		
		Rockwall, TX 75032		
\vdash	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.
l	LAFLINDITORL			Check if Austin, TX, officeholder living expense
				Campaign event food and beverage
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office so	l uaht	Office held
	expenditure to benefit C/OI		J	
L				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 104/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	05/03/2024	Smart City Networks
6	Amount (\$) \$13,026.87	7 Payee address; City; State; Zip Code 650 S. Griffin Street Dallas, TX 75202
8	PURPOSE	
0	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign event internet expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/24/2024	Springhill Suites
	Amount (\$) \$167.98	Payee address; City; State; Zip Code 2601 Lakefront Trail
		Rockwall, TX 75032
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lodging to attend campaign event
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/24/2024	Springhill Suites
	Amount (\$) \$176.28	Payee address; City; State; Zip Code 2601 Lakefront Trail
		Rockwall, TX 75032
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lodging to attend campaign event
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Com	nmittee	Gift/Awards/Memor Legal Services The Instruction	ials Expense Guide explains		/ages/	/Contract Labor		Travel Out of E OTHER (enter	District a category not listed ab	oove)
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commiss	ion Filers)
Ĺ	Sch: 105/128 Rpt:	ı		g (The Honor	able)				Ľ	00019652	•	
4	Date	5	Payee name									
	05/24/2024	;	Springhill Su	ıites								
6	Amount (\$) \$176.28	:	Payee addres 2601 Lakefr Rockwall, T	ont Trail	State	e; Zip Coo	de					
8	PURPOSE	\vdash				1	(h)	Description				
	OF		Category (Se Travel In Dis		at the top of this sc	chedule)	(U)	Description Check if travel of	outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE		naverili Di	ouill				=		, officeholder livi		
								Lodging to att	ten	d campaig	n event	
9	Complete ONLY if direct expenditure to benefit C/OF		andidate/Offic	ceholder name		Office sou	ght			Office I	neld	
	Date		Payee name		 _							
	05/24/2024		Springhill Su	ıites								
	Amount (\$)	\vdash	Payee addres	ss; City;	State	e; Zip Co	de					
	\$179.67	:	2601 Lakefr	•		-						
	,											
		\vdash	Rockwall, T									
	PURPOSE OF				at the top of this sc	:hedule)	(b)	Description			modele O. J. J =	
	EXPENDITURE	'	Travel In Dis	strict				<u></u>		ide of Texas. Co , officeholder livi	mplete Schedule T.	
						ļ		Lodging to att				
								g g to at				
	Complete ONLY if direct expenditure to benefit C/Oh		andidate/Offic	ceholder name		Office sou	ght			Office I	neld	
	Date		Payee name						_		<u> </u>	
	04/11/2024	ı	Texans for 0	Freg Abbott								
	Amount (\$)	-	Payee addres		State	e; Zip Co	de		—			
	\$500,000.00	ı	PO Box 308		Cian	-, <u>-</u> .p 50						
	\$300,000.00		. 5 55% 500									
		,	Austin, TX 7	8767								
	PURPOSE OF				at the top of this sc	:hedule)	(b)	Description				
	EXPENDITURE			s/Donations		nittee		브		ide of Texas. Co , officeholder livi	mplete Schedule T.	
		['	Candidate/C	micenoider/F	Political Comn	пшее		Political contr			ng expense	
						ļ		. Smilour COIIII	u			
	Complete ONLY if alice at	<u> </u>	andidata/Off.	ceholder name		Office	ah+			Office I	neld.	
	Complete ONLY if direct expenditure to benefit C/OH		anuluate/Offic	enoluer name	!	Office sou	grit			Опісе	ieiū	
	 											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 106/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	06/27/2024	Texans for Greg Abbott
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500,000.00	PO Box 308
		Austin, TX 78767
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		I Shada sehangadan
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/O	the state of the s
_	Date	Davis varia
	02/21/2024	Payee name Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.98	1515 Third Street
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Campaign ground transportation
		Campaign ground nanoportation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	Davis vers
	Date 02/21/2024	Payee name Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.98	1515 Third Street
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Campaign ground transportation
		Sampaign ground transportation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complet	te this form.
1	Total pages Schedule F1: Sch: 107/128 Rpt:	FILER NAME Abbott, Greg (The Honorable)	3 Filer ID (Ethics Commission Filers) 00019652
4	Date 02/21/2024	5 Payee name Uber	00010002
6	Amount (\$) \$2.98	7 Payee address; City; State; Zip Code 1515 Third Street	
8	PURPOSE OF EXPENDITURE	Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign ground transportation
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 02/21/2024	Payee name Uber	
	Amount (\$) \$2.99	Payee address; City; State; Zip Code 1515 Third Street San Francisco, CA 94158	
	PURPOSE OF EXPENDITURE	Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign ground transportation
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 02/22/2024	Payee name Uber	
	Amount (\$) \$5.99	Payee address; City; State; Zip Code 1515 Third Street	
		San Francisco, CA 94158	
	PURPOSE OF EXPENDITURE	Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign ground transportation
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 108/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	02/22/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5.99	1515 Third Street
		San Francisco, CA 94158
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign ground transportation
		Campaign ground transportation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
—	Data	David and the second se
	Date	Payee name
	02/22/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.99	1515 Third Street
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Compaign ground transportation
		Campaign ground transportation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	<u> </u>	
	Date	Payee name
	02/22/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.99	1515 Third Street
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	-	☐ Check if Austin, TX, officeholder living expense Campaign ground transportation
		Campaign ground transportation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

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

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

Fees C Food/Beverage Expense P Gift/Awards/Memorials Expense P Legal Services S

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 109/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	02/23/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2.02	1515 Third Street
		San Francisco, CA 94158
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign ground transportation
		Campaign ground transportation
Ļ	Commission ONII V if disease	Condidate/Officeholder name
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
⊨	Date	Payee name
	02/23/2024	Uber
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.02	1515 Third Street
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Campaign ground transportation
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit ere.	
	Date	Payee name
	02/23/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.02	1515 Third Street
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORL	Check if Austin, TX, officeholder living expense
		Campaign ground transportation
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
$ldsymbol{f eta}$		

SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to comple	· · · · · · · · · · · · · · · · · · ·				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission I					
	Sch: 110/128 Rpt:	Abbott, Greg (The Honorable) 00019652					
4	Date	5 Payee name	•				
	02/23/2024	Uber					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$2.59	1515 Third Street					
		San Francisco, CA 94158					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description				
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITORE		Check if Austin, TX, officeholder living expense				
			Campaign ground transportation				
_			0.00				
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	02/23/2024	Uber					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$2.59	1515 Third Street					
		San Francisco, CA 94158					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description				
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.				
			Campaign ground transportation				
			Campaign ground transportation				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/OI		Since hold				
	Date	Dayloo nama					
	02/23/2024	Payee name Uber					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$2.60	1515 Third Street					
	Ψ2.00	1313 Tillid Street					
		San Francisco, CA 94158					
	PURPOSE OF	,	Description Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Travel In District	Check if Austin, TX, officeholder living expense				
			Campaign ground transportation				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/OI	4					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 111/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	02/24/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1.11	1515 Third Street
		San Francisco, CA 94158
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign ground transportation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/24/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.12	1515 Third Street
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense Campaign ground transportation
		Campaign ground transportation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/24/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.12	1515 Third Street
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LAPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign ground transportation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 112/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	02/24/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1.12	1515 Third Street
		San Francisco, CA 94158
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign ground transportation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/24/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.12	1515 Third Street
		San Francisco, CA 94158
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign ground transportation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/19/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$6.46	1515 Third Street
		San Francisco, CA 94158
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign ground transportation
		Sampaign ground transportation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Vertising Expense Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

	Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				OTHER (enter a category not listed above)				
		_			lide explains now	to com	pie	te this form.	_			
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission I	Filers)
	Sch: 113/128 Rpt:		Abbott, Gre	g (The Honorab	le)					00019652		
4	Date	5	Payee name									
	04/19/2024		Uber									
6	Amount (\$)	7	Payee addres	ss; City;	State; Zir	Cod	e					
	\$6.46		1515 Third 9									
			Can Francis	co, CA 94158								
Ļ		_				1						
8	PURPOSE OF	(a)			he top of this schedule)	(b)	Description				
	EXPENDITURE		Travel In Dis	strict				=		officeholder livin	nplete Schedule T.	
								Campaign gro				
								p g g				
9	Complete ONLY if direct	<u> </u>		ceholder name	Office	sougl	ht			Office h	eld.	
	expenditure to benefit C/OI		Januluale/Onic	cerioidei riairie	Office	Sougi	111			Office fi	eiu	
_		_										
	Date		Payee name									
	02/22/2024		Victory Text	LLC								
	Amount (\$)		Payee addres	ss; City;	State; Zip	Cod	е					
	\$9,753.92		190 Monroe	Avenue NW								
			Suite 300									
			Grand Rapid	ds, MI 49503								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this schedule)	(1	b)	Description				
	OF EXPENDITURE		Advertising		,			Check if travel of	outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		· ·					ш		officeholder livin	g expense	
								Political adve	rtis	ing		
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Office	sougl	ht			Office h	eld	
	experialture to benefit C/Oi	П										
	Date		Payee name									
	04/20/2024		Warwick Me	elrose								
	Amount (\$)		Payee addres	ss; City;	State; Zip	Cod	e					
	\$167.28		3015 Oak La	awn Avenue								
			Dallas, TX 7	'5219								
	PURPOSE	(2)				10	h)	Description				
	OF	(a)	Travel In Dis		he top of this schedule)	(IJ,	Description Check if travel of	outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		Havel III Dis	Strict						officeholder livin		
								 Lodging to att	ten	d campaigr	event	
	Complete ONLY if direct	(Candidate/Offic	ceholder name	Office	sougl	ht			Office h	eld	
	expenditure to benefit C/OI	Н										
l												

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbur Fees Office Overhead/Rental Expense Polling Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract I	pense Transportation Equipment & Related Expense Travel in District Travel Out of District abor OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 114/128 Rpt:	Abbott, Greg (The Honorable) 00019652					
4	Date	Payee name	•				
	04/20/2024	Warwick Melrose					
6	Amount (\$) \$167.28	Payee address; City; State; Zip Code 3015 Oak Lawn Avenue Dallas, TX 75219					
8	PURPOSE OF EXPENDITURE	Chec	tion k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense g to attend campaign event				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	04/20/2024	Warwick Melrose					
	Amount (\$) \$167.28	Payee address; City; State; Zip Code 3015 Oak Lawn Avenue					
		Dallas, TX 75219					
	PURPOSE OF EXPENDITURE	Chec	tion k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense g to attend campaign event				
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	04/20/2024	Warwick Melrose					
	Amount (\$) \$167.28	Payee address; City; State; Zip Code 3015 Oak Lawn Avenue					
		Dallas, TX 75219					
	PURPOSE OF EXPENDITURE	Chec	tion k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense g to attend campaign event				
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Political Committee Credit Card Payment		Legal Services The Instruction Guide	Salaries	/Wages	s/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 115/128 Rpt:	Abbott, Gre	g (The Honorable)					00019652	
4	Date	5 Payee name							
	04/20/2024	Warwick M	elrose						
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip C	ode				
	\$169.00	3015 Oak L	awn Avenue						
		Dallas, TX	75219						
8	PURPOSE OF		ee Categories listed at the to	p of this schedule)	(b)	Description			
	EXPENDITURE	Travel In Di	strict					de of Texas. Com officeholder living	plete Schedule T.
						Lodging to at			
						Loughig to at		a campaign	Ovone
9	Complete ONLY if direct	Candidate/Off	ceholder name	Office so	uaht			Office he	ald
9	expenditure to benefit C/O		cerioidei riairie	Office so	ugni			Office fit	siu
\vdash	Date	Deves ::-:							
		Payee name	alva a a						
	04/20/2024	Warwick M	eirose						
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$169.00	3015 Oak L	awn Avenue						
		Dallas, TX	75219						
	PURPOSE	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b)	Description			
	OF EXPENDITURE	Travel In Di	strict						plete Schedule T.
						_		officeholder living	
						Lodging to at	lCII	u campaign	event
	Complete ONLY if direct	Candidate/Off	ceholder name	Office so	ught			Office he	old.
	expenditure to benefit C/O		cenoidei name	Office so	ugni			Office fit	aiu
		T							
	Date	Payee name							
	04/20/2024	Warwick M	elrose						
	Amount (\$)	Payee addre	•	State; Zip C	ode				
	\$169.01	3015 Oak L	awn Avenue						
		Dallas, TX	75219						
	PURPOSE	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b)	Description			
	OF EXPENDITURE	Travel In Di	strict						plete Schedule T.
	LAFENDITORE					ш		officeholder living	•
						Lodging to at	ten	d campaign	event
					<u> </u>				
	Complete ONLY if direct expenditure to benefit C/OH		ceholder name	Office so	ught			Office he	eld
	experience to beliefft C/Of								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Cabadula F1:	2 Files ID (Ethics Commission Files)
1	Total pages Schedule F1: Sch: 116/128 Rpt:	2 FILER NAME Abbott, Greg (The Honorable) 3 Filer ID (Ethics Commission Filers) 00019652
4	Date	5 Payee name
	04/20/2024	Warwick Melrose
6	Amount (\$) \$169.01	7 Payee address; City; State; Zip Code 3015 Oak Lawn Avenue
		Dallas, TX 75219
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Lodging to attend campaign event
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/16/2024	Wells Fargo Card Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$730.42	Payment Remittance Center
		PO Box 77033
		Minneapolis, MN 55480-7733
	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
		Campaign credit card payment
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/16/2024	Wells Fargo Card Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$948.20	Payment Remittance Center
		PO Box 77033
		Minneapolis, MN 55480-7733
	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.
	LAI LINDITORL	Check if Austin, TX, officeholder living expense
		Campaign credit card payment
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 117/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	02/20/2024	Wells Fargo Card Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$268.66	Payment Remittance Center
		PO Box 77033
		Minneapolis, MN 55480-7733
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.
		Campaign credit card payment
		Campaign creak eard payment
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/20/2024	Wells Fargo Card Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$578.70	Payment Remittance Center
		PO Box 77033
		Minneapolis, MN 55480-7733
	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.
		Campaign credit card payment
		Campaigh Great Sala payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/20/2024	Wells Fargo Card Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$811.22	Payment Remittance Center
		PO Box 77033
		Minneapolis, MN 55480-7733
	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 Campaign credit card payment
		Campaigh credit card payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 118/128 Rpt:	Abbott, Greg (The Honorable)
4	Date	5 Payee name
	02/20/2024	Wells Fargo Card Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$899.78	Payment Remittance Center
		PO Box 77033
		Minneapolis, MN 55480-7733
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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign credit card payment
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/20/2024	Wells Fargo Card Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,180.36	Payment Remittance Center
		PO Box 77033
		Minneapolis, MN 55480-7733
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Campaign credit card payment
		Campaign credit card payment
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/28/2024	Wells Fargo Card Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,005.83	Payment Remittance Center
		PO Box 77033
		Minneapolis, MN 55480-7733
	PURPOSE	· ·
	OF	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Credit Card Payment
		Campaign credit card payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

Fees

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services

Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1: Sch: 119/128 Rpt:	2 FILER NAME Abbott, Greg (The Honorable)	3 Filer ID (Ethics Commission Filers) 00019652					
4	Date 02/28/2024	5 Payee name Wells Fargo Card Services	•					
6	Amount (\$) \$1,887.54	7 Payee address; City; State; Zip Code Payment Remittance Center PO Box 77033 Minneapolis, MN 55480-7733						
8	PURPOSE OF EXPENDITURE	Check if Aust	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense redit card payment					
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held					
	Date 02/28/2024	Payee name Wells Fargo Card Services						
	Amount (\$) \$4,198.33	Payee address; City; State; Zip Code Payment Remittance Center PO Box 77033 Minneapolis, MN 55480-7733						
	PURPOSE OF EXPENDITURE	Check if Aust	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense credit card payment					
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held					
	Date 03/06/2024	Payee name Wells Fargo Card Services						
	Amount (\$) \$1,190.86	Payee address; City; State; Zip Code Payment Remittance Center PO Box 77033 Minneapolis, MN 55480-7733						
	PURPOSE OF EXPENDITURE	Check if Aust	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense credit card payment					
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 120/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date	5 Payee name
	03/08/2024	Wells Fargo Card Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$411.28	Payment Remittance Center
		PO Box 77033
		Minneapolis, MN 55480-7733
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 Campaign credit card payment
		Campaign creat eard payment
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/21/2024	Wells Fargo Card Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$256.78	Payment Remittance Center
		PO Box 77033
		Minneapolis, MN 55480-7733
	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 Campaign credit card payment
		Campaign creat eara payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/21/2024	Wells Fargo Card Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$484.98	Payment Remittance Center
		PO Box 77033
		Minneapolis, MN 55480-7733
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense Campaign credit card payment
		Campaign creat card payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

Contributions/ Donations Made By-Candidate/Officeholder/Political Committee Credit Card Payment

The Instruction Guide explains how to complete this form.

Total pages Schedule F1: Sch: 121/128 Rpt: Abbott, Greg (The Honorable)

Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above)

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

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

The Instruction Guide explains how to complete this form.

3 Filer ID (Ethics Commission Filers)

00019652

EXPENDITURE CATEGORIES FOR BOX 8(a)

4	Date 03/21/2024	5 Payee name Wells Fargo Card Services
6	Amount (\$) \$722.00	7 Payee address; City; State; Zip Code Payment Remittance Center PO Box 77033 Minneapolis, MN 55480-7733
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign credit card payment
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 03/21/2024	Payee name Wells Fargo Card Services
	Amount (\$) \$1,421.30	Payee address; City; State; Zip Code Payment Remittance Center PO Box 77033 Minneapolis, MN 55480-7733
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign credit card payment
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 04/10/2024	Payee name Wells Fargo Card Services
	Amount (\$) \$212.41	Payee address; City; State; Zip Code Payment Remittance Center PO Box 77033 Minneapolis, MN 55480-7733
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign credit card payment
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services The Instruction Guide	Salaries	Wage	es/Contract Labor		OTHER (enter a	category not listed above)	
_	T-t-1 O-b F1:	_				Jp.		_	Ell- ID	(Ethias Campaianian Ei	la)
1	Total pages Schedule F1: Sch: 122/128 Rpt:	2		: g (The Honorable)	1			3	Filer ID 00019652	(Ethics Commission Fi	iers)
	•	_		g (The Honorable)	1				00013032		
4	Date	5	Payee name								
	04/10/2024		Wells Fargo	Card Services							
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip C	ode					
	\$676.83		Payment Re	emittance Center							
			PO Box 770	33							
			Minneapolis	, MN 55480-7733							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the t	top of this schedule)	(b)	Description				
	OF EXPENDITURE		Credit Card				Check if travel	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITORE						—		officeholder living		
							Campaign cre	edi	t card paym	ent	
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	ceholder name	Office so	ught			Office h	eld	
		_									
	Date		Payee name								
	04/11/2024		Wells Fargo	Card Services							
	Amount (\$)		Payee addres	ss; City;	State; Zip C	ode					
	\$87.69		Payment Re	emittance Center							
			PO Box 770	33							
			Minneapolis	s, MN 55480-7733							
	PURPOSE	(a)	Category (Se	ee Categories listed at the t	top of this schedule)	(b)	Description				
	OF EXPENDITURE		Credit Card	Payment			<u> </u>			plete Schedule T.	
							ш		officeholder living		
							Campaign cre	eun	i caru payiii	ziii.	
_	Complete ONLY if direct		Candidate/Offic	ceholder name	Office so	<u> </u> ught	<u> </u>		Office h	eld	
	expenditure to benefit C/OI	H									
	Date		Payee name								
	05/16/2024		Wells Fargo	Card Services							
	Amount (\$)		Payee addres		State; Zip C	ode					
	\$95.99		Payment Re	emittance Center							
			PO Box 770								
		_	•	s, MN 55480-7733		1					
	PURPOSE OF	(a) 		ee Categories listed at the t	top of this schedule)	(b)	Description Check if travel	outo:	do of Toyon Com	plete Schedule T.	
	EXPENDITURE		Credit Card	Payment					officeholder living		
							Campaign cre				
							, ₋ g., o.,				
\vdash	Complete ONLY if direct	Щ	 Candidate/Offic	ceholder name	Office so	<u> </u>	<u> </u>		Office h	eld	
	expenditure to benefit C/O					J .					
l											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
TTHER (order a cotogony pet listed above)

Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment		, - I Coi	nmittee	Gift/Awards/Men Legal Services The Instructi				ages/	/Contract Labor		Travel Ou OTHER (strict category not listed above)	
1	Total pages Schedule F1:	2	FII FR NAME							3	Filer ID		(Ethics Commission File	ers)
	Sch: 123/128 Rpt:		Abbott, Gre		orable)					Ľ	00019		(,
4	Date	5	Payee name											
	05/16/2024		Wells Fargo	Card Serv	ices									
6	Amount (\$) \$373.27	7	Payee address Payment Re PO Box 770 Minneapolis	emittance C 033		State;	Zip Co	de						
8	PURPOSE	(a)	Category (Se	e Categories list	ed at the top o	of this sche	dule)	(b)	Description				<u> </u>	
	OF EXPENDITURE		Credit Card						므				plete Schedule T.	
									Campaign cr					
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi	ceholder nar	ne	Ot	office souç	ght			Off	ice he	eld	
	Date		Payee name											
	05/16/2024		Wells Fargo	Card Serv	ices									
	Amount (\$)		Payee addres	ss; City;		State;	Zip Co	de						
	\$473.53		Payment Re	emittance C	enter									
			PO Box 770)33										
			Minneapolis)-7733									
	PURPOSE OF	(a)	Category (Se		ed at the top o	of this sche	dule)	(b)	Description			_		
	EXPENDITURE		Credit Card	Payment					Check if travel Check if Austin				plete Schedule T.	
									Campaign cr					
										_ ===	P	.,		
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder nar	ne	O1	office sou	ght			Off	ice he	eld	
	Date		Payee name											
	05/16/2024		Wells Fargo	Card Serv	ices									
	Amount (\$)		Payee addres	ss; City;		State;	Zip Co	de						
	\$616.10		Payment Re	emittance C	enter									
			PO Box 770)33										
			Minneapolis	s, MN 55480)-7733									
	PURPOSE	(a)	Category (Se	e Categories list	ed at the top o	of this sche	dule)	(b)	Description					
	OF EXPENDITURE		Credit Card				·		ш				plete Schedule T.	
	EXI ENDITORE								Check if Austin					
									Campaign cr	edi	card p	ayme	ent	
	Complete ONLY if direct		Candidate/Offi	ceholder nan	ne	Ot	office sou	ght			Off	ice he	eld	
	expenditure to benefit C/OF	Н					·							
			- 0 : :											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1: Sch: 124/128 Rpt:	2 FILER NAME Abbott, Greg (The Honorable) 3 Filer ID (Ethics Commission Filers) 00019652	
	Date 05/16/2024	5 Payee name Wells Fargo Card Services	
6	Amount (\$) \$732.40	7 Payee address; City; State; Zip Code Payment Remittance Center PO Box 77033 Minneapolis, MN 55480-7733	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign credit card payment	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date 05/16/2024	Payee name Wells Fargo Card Services	
	Amount (\$) \$1,788.95	Payee address; City; State; Zip Code Payment Remittance Center PO Box 77033 Minneapolis, MN 55480-7733	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign credit card payment	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date 06/03/2024	Payee name Wells Fargo Card Services	
	Amount (\$) \$6.16	Payee address; City; State; Zip Code Payment Remittance Center PO Box 77033 Minneapolis, MN 55480-7733	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign credit card payment	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services The Instruction Guide	Salaries	Wage	es/Contract Labor		OTHER (enter a	strict a category not listed above)	
_	T-t-1 O-b1-1- E1.	<u> </u>			e explains non to e	op.		_	Ell ID	(Ethina Commission Eilens)	_
1	Total pages Schedule F1:	2						3	Filer ID	(Ethics Commission Filers)	
	Sch: 125/128 Rpt:		Abbott, Gre	g (The Honorable)					00019652		
4	Date	5	Payee name								
	06/03/2024	l	Wells Fargo	Card Services							
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip C	ode					_
ľ	\$233.34	ľ	•	emittance Center	Otato, Zip o	ouc					
	Ψ233.34	l	-								
		l	PO Box 770	133							
		l	Minneapolis	, MN 55480-7733							
8	PURPOSE	(a)	Category (Se	e Categories listed at the t	op of this schedule)	(b)	Description				_
	OF	l	Credit Card		,		Check if travel	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	l		•			Check if Austin	, TX,	officeholder living	g expense	
		l					Campaign cre	edit	t card paym	ent	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	Office so	ught			Office h	eld	
	experiulture to benefit C/O	П									
	Date		Payee name								
	06/03/2024		Wells Fargo	Card Services							
	Amount (\$)		Payee addres	ss; City;	State; Zip C	ode					
	\$408.15	l	Payment Re	emittance Center							
		l	PO Box 770								
		l									
			Minneapoils	, MN 55480-7733							
	PURPOSE OF	(a)	Category (Se	e Categories listed at the t	top of this schedule)	(b)	Description				
	EXPENDITURE	l	Credit Card	Payment			<u> </u>			plete Schedule T.	
		l					ш		officeholder living		
							Campaign cre	eun	ı caru payın	eni	
											_
	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Office	ceholder name	Office so	ught			Office h	eld	
	experialitate to benefit 6/61										
	Date		Payee name								
	06/03/2024		Wells Fargo	Card Services							
	Amount (\$)		Payee addres	ss; City;	State; Zip C	ode					_
	\$740.47	l	Payment Re	emittance Center							
	******	l	PO Box 770								
		l									
			Minneapolis	, MN 55480-7733							
	PURPOSE	(a)	Category (Se	e Categories listed at the t	top of this schedule)	(b)	Description				
	OF EXPENDITURE	l	Credit Card	Payment						pplete Schedule T.	
		l					_		officeholder living		
							Campaign cre	ean	t card paym	ent	
											_
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office so	ught			Office h	eld	
	expenditure to benefit C/Ol	Н									
I											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)		
	Sch: 126/128 Rpt:	Abbott, Greg	(The Honorable)					00019652			
4	Date	5 Payee name									
	06/03/2024	Wells Fargo	Card Services								
6	Amount (\$)	7 Payee address	s; City;	State; Zip C	ode						
	\$763.88	Payment Re	mittance Center								
		PO Box 7703	33								
		Minneapolis,	MN 55480-7733								
8	PURPOSE	(a) Category (See	Categories listed at the top	of this schedule)	(b)	Description					
	OF EXPENDITURE	Credit Card I	Payment			_		de of Texas. Com			
						Campaign cre		officeholder living			
						Campaign cr	cui	cara payrin	Siit		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Offic	eholder name	Office so	ught			Office he	eld		
	Date	Payee name									
	06/03/2024	Wells Fargo	Card Services								
	Amount (\$)	Payee address	s; City;	State; Zip C	ode						
	\$954.31	Payment Re	mittance Center								
		PO Box 7703	33								
		Minneapolis,	MN 55480-7733								
	PURPOSE	(a) Category (See	Categories listed at the top	of this schedule)	(b)	Description					
	OF EXPENDITURE	Credit Card I	Payment					de of Texas. Com			
						Campaign cre		officeholder living			
						Campaign cre	cui	cara payin	SIIL		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Offic	eholder name	Office so	l ught			Office he	eld		
	experientare to beriefit Great										
	Date	Payee name									
	06/03/2024	Wells Fargo	Card Services								
	Amount (\$)	Payee address	s; City;	State; Zip C	ode						
	\$1,279.52	Payment Re	mittance Center								
		PO Box 7703	33								
		Minneapolis,	MN 55480-7733								
	PURPOSE	(a) Category (See	e Categories listed at the top	of this schedule)	(b)	Description					
	OF EXPENDITURE	Credit Card I	Payment					de of Texas. Com			
	ZAI ZHBITORZ					_		officeholder living			
						Campaign cre	euli	caru payme	ent.		
	Complete ONLY if direct	Candidate/Offic	eholder name	Office so	<u>l</u> uaht			Office he	eld		
	expenditure to benefit C/OI			3,1100 301	- g			200 110			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By - Candidate/Officeholder/Political Comm Credit Card Payment		nmittee	Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Later The Instruction Guide explains how to complete this for			/Contract Labor	, , ,				
1	Total pages Schedule F1:	2	FILER NAME		•				3	Filer ID	(Ethics Commi	ssion Filers)
Ĺ	Sch: 127/128 Rpt:	Ĺ		g (The Honora	able)				<u> </u>	00019652	,	
4	Date	5	Payee name								<u> </u>	
	06/03/2024		Wells Fargo	Card Service	es:							
6	Amount (\$)	7	Payee addres	ss; City;	State	e; Zip Co	de					
	\$2,146.20		Payment Re	emittance Cen	ıter							
			PO Box 770)33								
			Minneapolis	s, MN 55480-7	'733							
8	PURPOSE	(a)	Category (Se	ee Categories listed a	at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Credit Card		.,	-/		Check if travel			mplete Schedule T.	
	LAFLINDITORE							Check if Austin				
								Campaign cre	edit	card payr	nent	
_	0		No. 10 10 10 10 10 10 10 10 10 10 10 10 10			Ott.					L - 1.1	
9	Complete ONLY if direct expenditure to benefit C/Oh		andidate/Offi	ceholder name		Office sou	ght			Office	neid	
	Date		Payee name									
	06/05/2024		Wells Fargo	Card Service	es.							
	Amount (\$)		Payee addres	ss; City;	State	e; Zip Co	de					
	\$4,163.31		Payment Re	emittance Cen	ıter							
			PO Box 770)33								
			Minneapolis	s, MN 55480-7	733							
	PURPOSE OF	(a)	Category (Se	ee Categories listed a	at the top of this sch	nedule)	(b)	Description				
	EXPENDITURE		Credit Card	Payment				=			mplete Schedule T.	
								Campaign cre		officeholder livi t card pavr		
								Jampaign on	Jui	. Jai'a payi		
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder name	(Office sou	ght			Office	held	
	Date		Payee name				_					
	06/28/2024		•	Card Service	es:							
	Amount (\$)		Payee addres	ss; City;	State	e; Zip Co	de					
	\$45.27		Payment Re	emittance Cen								
			PO Box 770	133								
				s, MN 55480-7	'733							
	PURPOSE	(a)		ee Categories listed a		redule)	(b)	Description				
	OF	` ′	Credit Card		are top or triis 501		.,		outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE			•				Check if Austin				
								Campaign cre	edit	t card payr	nent	
	Complete ONLY if direct	L	Candidate/Offi	ceholder name		Office sou	aht			Office	held	
	expenditure to benefit C/Oh				,	55 550	J r			311100		
	· · · · ·											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 128/128 Rpt:	Abbott, Greg (The Honorable) 00019652
4	Date 06/28/2024	5 Payee name Wells Fargo Card Services
6	Amount (\$) \$46.06	7 Payee address; City; State; Zip Code Payment Remittance Center PO Box 77033 Minneapolis, MN 55480-7733
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign credit card payment
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/28/2024	Wells Fargo Card Services
	Amount (\$) \$168.37	Payee address; City; State; Zip Code Payment Remittance Center PO Box 77033 Minneapolis, MN 55480-7733
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign credit card payment
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 06/28/2024	Payee name Wells Fargo Card Services
	Amount (\$) \$224.52	Payee address; City; State; Zip Code Payment Remittance Center PO Box 77033 Minneapolis, MN 55480-7733
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign credit card payment
	Complete ONLY if direct expenditure to benefit C/OI	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 Insti	ruction Guide explains how	to complete this form.							
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	ics Commiss	sion Filers)				
Sch: 1/46 Rpt:	Abbott, Greg (The I	Honorable)		00019652						
4 CREDIT CARD ISSUER		ncial institution argo Bank	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	12,490.5	51				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid						
	\$41.58	01/14/2024	02/20/2024							
7 PAYEE	(a) Payee name		(b) Payee address; City, State,							
	7-Eleven		408 W. 15th Street							
			Austin, TX 78701							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description							
X Political	Travel In District									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living ex	pense					
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid						
	\$64.41	03/01/2024	03/21/2024							
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	7-Eleven		408 W. 15th Street							
			Austin, TX 78701							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description							
X Political	Travel In District	or this schedule)	Fuel for campaign travel							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living ex	pense					
Complete ONLY if direct	Candidate/Officeholder	name Offic	ffice sought Office held							
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid						
	\$12.00	03/04/2024	04/10/2024							
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
			408 W. 15th Street							
	7-Eleven									
			Austin, TX 78701							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodule)	(b) Description							
	Travel In District	of this schedule)	Fuel for campaign travel							
X Political										
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.		, officeholder living ex	pense					
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 Insti	ruction Guide explains how	to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	ics Commiss	sion Filers)
Sch: 2/46 Rpt:	Abbott, Greg (The I	Honorable)			00019652		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$	12,490.5	51
6 PAYMENT	(a) Amount Charged \$26.85	(b) Date of Charge 03/22/2024	(c) Date(s) 0 04/10/202	Credit Card Issuer 4	Paid		
7 PAYEE	(a) Payee name 7-Eleven		(b) Payee a 408 W. 15 Austin, TX	th Street	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descript				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	pense	
9 Complete ONLY if direct expenditure to benefit C/OH	expenditure to benefit C/OH				Office held		
PAYMENT	(a) Amount Charged \$42.62	(b) Date of Charge 03/25/2024	(c) Date(s) 0 04/10/202	Credit Card Issuer 4	Paid		
PAYEE	7-Eleven		(b) Payee a 408 W. 15 Austin, TX	th Street	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Fuel for campaign travel				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	pense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$65.66	(b) Date of Charge 03/27/2024	(c) Date(s) (04/10/202	Credit Card Issuer 4	Paid		
PAYEE	(a) Payee name 7-Eleven		(b) Payee a 408 W. 15	th Street	City,	State,	Zip Code
PURPOSE OF	(a) Category		(b) Descript				
EXPENDITURE X Political	(See Categories listed at the top Travel In District	of this schedule)	Fuel for ca	ampaign travel			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Г	Check if Austin, TX.	officeholder living exp	pense	
Complete ONLY if direct expenditure to benefit C/OH	Complete ONLY if direct Candidate/Officeholder name Office sought						
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 (Ethic	cs Commis	sion Filers)
	Sch: 3/46 Rpt:	Abbott, Greg (The I	Honorable)				00019652		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	IDI	UNITEMIZED TURES TO A CREDIT	\$	12,490.	51
6	PAYMENT	(a) Amount Charged \$50.87	(b) Date of Charge 04/17/2024	(c) Date(s) 05/20/20		redit Card Issuer	Paid		
7	PAYEE	(a) Payee name 7-Eleven		(b) Payee 408 W. 1 Austin, T	.5tl	n Street	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip	otic				
	Non-Political	`	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense	
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held		
	PAYMENT	(a) Amount Charged \$27.66	(b) Date of Charge 04/20/2024	(c) Date(s) 05/20/20		redit Card Issuer	Paid		
	PAYEE	7-Eleven		(b) Payee 408 W. 1 Austin, T.	.5tl	n Street	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Fuel for campaign travel					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held		
	PAYMENT	(a) Amount Charged \$33.64	(b) Date of Charge 04/20/2024	(c) Date(s) 05/20/20		redit Card Issuer	Paid		
	PAYEE	(a) Payee name 7-Eleven	<u> </u>	(b) Payee 408 W. 1 Austin, T.	.5tl	n Street	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Descrip Fuel for o		npaign travel			
L	Non-Political	(*) L	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense	
e	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 Inst	ruction Guide explains how	v to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commiss	ion Filers)			
Sch: 4/46 Rpt:	Abbott, Greg (The I	Honorable)		00019652				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 12,490.5	1			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$10.76	05/14/2024	06/04/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code			
	7-Eleven		408 W. 15th Street					
			Austin, TX 78701					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
X Political	Travel In District	or this ostrodule)	Fuel for campaign travel					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	TX, officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$2,523.96	05/21/2024	06/05/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code			
	Bright Event Rental	ls	2250 Lion Country Parkw	ay, Bldg 2 Ste 160				
			Grand Prairie, TX 75050					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Campaign equipment rental					
X Political	Event Expense							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 02/20/2024	r Paid				
	\$12.86	01/29/2024	02/20/2024					
PAYEE	(a) Payee name	<u> </u>	(b) Payee address;	City, State,	Zip Code			
			4155 North General Bruce	e Drive				
	Buc-ee's							
			Temple, TX 76501					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description					
	Travel In District	or triis scrieddie)	Fuel for campaign travel					
X Political								
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.	<u> </u>	officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	ee 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 Inst	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	nics Commiss	sion Filers)
Sch: 5/46 Rpt:	Abbott, Greg (The I	Honorable)		00019652		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRE CARD	\$	12,490.5	51
6 PAYMENT	(a) Amount Charged \$34.20	(b) Date of Charge 03/03/2024	(c) Date(s) Credit Card Is 03/06/2024	ssuer Paid		
7 PAYEE	(a) Payee name Buc-ee's		(b) Payee address; 4155 North General B Temple, TX 76501	City, Bruce Drive	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Fuel for campaign trav	vel		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living ex	kpense	
expenditure to benefit C/OH			e sought	Office held		
PAYMENT	(a) Amount Charged \$19.39	(b) Date of Charge 03/18/2024	(c) Date(s) Credit Card Is 04/10/2024	ssuer Paid		
PAYEE	Buc-ee's		(b) Payee address; 4155 North General B Temple, TX 76501	City, Bruce Drive	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe	•	(b) Description Campaign travel food and beverage			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living ex	kpense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held		
PAYMENT	(a) Amount Charged \$6.39	(b) Date of Charge 04/11/2024	(c) Date(s) Credit Card Is 05/20/2024	ssuer Paid		
PAYEE	(a) Payee name Buc-ee's		(b) Payee address; City, State, Zip C 4155 North General Bruce Drive Temple, TX 76501			Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Campaign travel food and beverage			
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		n, TX, officeholder living ex	kpense	
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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 6/46 Rpt:	Abbott, Greg (The I	Honorable)		00019652			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 12,490.51			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$59.18	05/22/2024	06/04/2024				
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
	Buc-ee's		4155 North General Bruce	e Drive			
0 DUDDOCE OF	(a) Category		Temple, TX 76501 (b) Description				
8 PURPOSE OF EXPENDITURE	(See Categories listed at the top	of this schedule)	Fuel for campaign travel				
X Political	Travel In District		, as is sampaign as				
Non-Political	`	of Texas. Complete Schedule T.		officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
TATILLE!		05/24/2024	06/04/2024	. i did			
	\$44.82	05/24/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	1		4155 North General Bruce	e Drive			
			Temple, TX 76501				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Fuel for campaign travel				
X Political							
Non-Political	`	of Texas. Complete Schedule T.		officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$35.01	04/19/2024	05/20/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Canopy by Hilton		2950 Cityplace West Blvd	l.			
			Dallas, TX 75204				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Meeting to discuss campa	aign issues			
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	ics Commiss	sion Filers)
Sch: 7/46 Rpt:	Abbott, Greg (The I	Honorable)			00019652		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED VITURES ED TO A CREDIT	\$	12,490.5	51
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	Paid		
	\$180.81	04/20/2024	05/20/202	4			
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Canopy by Hilton			olace West Blvd.	•		
	(a) Catamani		Dallas, TX				
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descripti	on attend campaiç	gn event		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$180.81	(b) Date of Charge 04/20/2024	(c) Date(s) (05/20/202	Credit Card Issuer 4	Paid		
PAYEE	PAYEE (a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Canopy by Hilton			place West Blvd.			
PURPOSE OF	(a) Category		Dallas, TX (b) Descripti				
EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Lodging to attend campaign event				
X Political			_				
Non-Political	`	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	pense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought				
PAYMENT	(a) Amount Charged \$180.81	(b) Date of Charge 04/20/2024	(c) Date(s) (05/20/202	Credit Card Issuer 4	Paid		
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Canopy by Hilton		2950 Cityplace West Blvd.				
	(a) Oata wa		Dallas, TX				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti	ion i attend campaiç	an event		
X Political	Travel In District		Louging to	σιιστιά σαπιμαίζ	jii ev e llt		
Non-Political		of Towns Committee Coloradula T		7 Observation TV	-#b-ldlb-d		
Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T. name Office	<u>L</u> e sought	Cneck if Austin, TX,	officeholder living exp	vense	
expenditure to benefit C/OH	Sanadato, Sinceriolder						

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 Inst	ruction Guide explains how	to complete	this form.	(* ** *********************************	.,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	nics Commiss	sion Filers)
	Sch: 8/46 Rpt:	Abbott, Greg (The I	Honorable)			00019652		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	12,490.5	51
6	PAYMENT	(a) Amount Charged \$180.81	(b) Date of Charge 04/20/2024	(c) Date(s) 05/20/20) Credit Card Issuel 124	r Paid		
7	PAYEE	(a) Payee name Canopy by Hilton		(b) Payee 2950 City Dallas, T	yplace West Blvd	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri		gn event		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	kpense	
9	Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought		Office held		
e	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$157.41	(b) Date of Charge 02/27/2024	(c) Date(s) 03/21/20) Credit Card Issue 124	r Paid		
	PAYEE	(a) Payee name Choctaw Resort		(b) Payee 1516 Hw	y. 271 S	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	Grant, OK 74738 (b) Description Lodging to attend campaign event				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	ı	Check if Austin, TX,	officeholder living ex	kpense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$174.90	(b) Date of Charge 02/28/2024	(c) Date(s) 03/21/20) Credit Card Issuel 124	r Paid		
	PAYEE	(a) Payee name Choctaw Resort		(b) Payee 1516 Hw Grant, O	y. 271 S	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Lodging	ption to attend campai	gn event		
	Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
l								

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

Printing Expense Salaries/Wages/Contract Labor

	Candidate/Officeriolder/Folitica	•	ruction Guide explains how	•	TTIER (enter a catego	ry not listed a	bove)	
1	Total pages Schedule F4:		·	·	3 Filer ID (Ethi	cs Commiss	sion Filers)	
	Sch: 9/46 Rpt:	Abbott, Greg (The I	Honorable)		00019652		,	
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	12,490.5	51	
6	PAYMENT	(a) Amount Charged \$174.90	(b) Date of Charge 02/28/2024	(c) Date(s) Credit Card Issuer 03/21/2024	r Paid			
7	PAYEE	(a) Payee name Choctaw Resort		(b) Payee address; 1516 Hwy. 271 S Grant, OK 74738	City,	State,	Zip Code	
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Lodging to attend campaig	gn event			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		officeholder living exp	oense		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	PAYMENT	(a) Amount Charged \$150.35	(b) Date of Charge 02/01/2024	(c) Date(s) Credit Card Issue 03/21/2024	r Paid			
	PAYEE	(a) Payee name Embassy Suites		(b) Payee address; 550 S. Buchanan Street S Amarillo, TX 79101	City, SE	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaig	gn event			
	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	Office held			
	PAYMENT	(a) Amount Charged \$147.43	(b) Date of Charge 02/02/2024	(c) Date(s) Credit Card Issue 02/20/2024	r Paid			
	PAYEE	(a) Payee name Embassy Suites		(b) Payee address; 550 S. Buchanan Street S Amarillo, TX 79101	City, SE	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Lodging to attend campaign event				
L	Non-Political	(c) Check if travel outside	_	officeholder living exp	oense			
е	Complete ONLY if direct expenditure to benefit C/OH							
l								

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 Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 10/46 Rpt:	Abbott, Greg (The I	Honorable)		00019652			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 12,490.51			
6 PAYMENT	(a) Amount Charged \$166.54	(b) Date of Charge 02/02/2024	(c) Date(s) Credit Card Issuer 02/20/2024	Paid			
7 PAYEE	(a) Payee name Embassy Suites		(b) Payee address; 550 S. Buchanan Street S	City, State, Zip Code SE			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	Amarillo, TX 79101 (b) Description Lodging to attend campai	gn event			
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 Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$189.67	(b) Date of Charge 02/02/2024	(c) Date(s) Credit Card Issuer 02/20/2024	r Paid			
PAYEE	(a) Payee name Embassy Suites		(b) Payee address; City, State, Zip Cod 550 S. Buchanan Street SE Amarillo, TX 79101				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign event				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged \$343.72	(b) Date of Charge 01/13/2024	(c) Date(s) Credit Card Issuer 02/20/2024	r Paid			
PAYEE	(a) Payee name Hampton Inn and Suites (a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Payee address; 3650 Plano Parkway The Colony, TX 75056	City, State, Zip Code			
PURPOSE OF EXPENDITURE X Political			(b) Description Lodging to attend campaign event				
Non-Political	`	of Texas. Complete Schedule T.		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 Inst	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	ics Commiss	sion Filers)		
Sch: 11/46 Rpt:	Abbott, Greg (The I	Honorable)		00019652				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CREE CARD	\$	12,490.5	51		
6 PAYMENT	(a) Amount Charged \$157.39	(b) Date of Charge 02/06/2024	(c) Date(s) Credit Card Iss 03/21/2024	uer Paid				
7 PAYEE	(a) Payee name Hampton Inn and S	uites	(b) Payee address; 4601 Cowhorn Road Texarkana, TX 75503	City,	State,	Zip Code		
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend camp	oaign event				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living expense				
expenditure to benefit C/OH			e sought	Office held				
PAYMENT	(a) Amount Charged \$169.15	(b) Date of Charge 02/06/2024	(c) Date(s) Credit Card Iss 03/21/2024	uer Paid				
PAYEE	Hampton Inn and Suites		(b) Payee address; 4601 Cowhorn Road Texarkana, TX 75503	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign event					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living ex	pense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$231.88	(b) Date of Charge 04/09/2024	(c) Date(s) Credit Card Iss 05/20/2024	uer Paid				
PAYEE	(a) Payee name Holiday Inn Express & Suites		(b) Payee address; 900 South Loop 35 Alvin, TX 77511	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend camp	oaign event				
Non-Political					pense			
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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	cs Commiss	sion Filers)	
Sch: 12/46 Rpt:	Abbott, Greg (The I	Honorable)		00019652			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	12,490.5	51	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$138.99	04/10/2024	05/20/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Holiday Inn Express	s & Suites	900 South Loop 35				
			Alvin, TX 77511				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	an avent			
X Political	Travel In District		Lodging to attend campai	gn event			
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 Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$297.95	05/23/2024	06/04/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Home2Suites by Hi	lton	13923 South Freeway				
			Houston, TX 77047				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Lodging to attend campaign event				
X Political	Traver in District						
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 Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$114.76	01/13/2024	02/20/2024				
PAYEE	(a) Payee name	<u> </u>	(b) Payee address;	City,	State,	Zip Code	
	(a) rayce name		455 N Central Expresswa	-	Otato,	Zip Code	
	Homewood Suites		400 N Central Expressiva	.y			
			Allen, TX 75013				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Lodging to attend campai	gn event			
X Political	Travel In District						
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 Offic	fice sought Office held				
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 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 (Etl	nics Commiss	sion Filers)	
	Sch: 13/46 Rpt:	Abbott, Greg (The I	Honorable)			00019652			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	12,490.5	51	
6	PAYMENT	(a) Amount Charged \$44.62	(b) Date of Charge 02/21/2024	(c) Date(s) 03/06/20) Credit Card Issuer 24	r Paid			
7	PAYEE	(a) Payee name Homewood Suites		(b) Payee 455 N Ce Allen, TX	entral Expresswa	City, Y	State,	Zip Code	
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip		gn event			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living e	xpense		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
_	PAYMENT	(a) Amount Charged	(b) Date of Charge	(a) Data(s)	Credit Card Issue	r Doid			
	PATMENT	\$44.62	02/21/2024	03/06/20		i Faiu			
	PAYEE	(a) Payee name Homewood Suites		(b) Payee 455 N Ce Allen, TX	entral Expresswa	City, y	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign event					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living e	xpense		
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT	(a) Amount Charged \$44.62	(b) Date of Charge 02/21/2024	(c) Date(s) 03/06/20) Credit Card Issuei 24	r Paid			
	PAYEE	(a) Payee name Homewood Suites		(b) Payee 455 N Ce Allen, TX	entral Expresswa	City, Y	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	,	(b) Descrip Lodging	to attend campai				
L	Ш	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living 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 Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission			sion Filers)		
Sch: 14/46 Rpt:	Abbott, Greg (The I	Honorable)	00019652				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITED EXPENDITURES CHARGED TO A CONTROL CARD	 \$	12,490.	51	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Car	d Issuer Paid			
	\$106.63	01/28/2024	02/20/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Hotel Engine		950 South Cherry S	Street 10th Floo	or		
			Denver, CO 80246				
8 PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)			(b) Description				
X Political	(See Categories listed at the top of this schedule) Travel In District Lodging to attend ca			campaign event			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if A	Austin, TX, officeholder li	iving expense		
9 Complete ONLY if direct Candidate/Officeholder name Office			e sought	Office h	eld		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Car	d Issuer Paid			
	\$106.64	01/28/2024	02/20/2024				
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
	Hotel Engine		950 South Cherry Street 10th Floor				
			Denver, CO 80246				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign event				
X Political	Traver in District						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if A	Austin, TX, officeholder li	iving expense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office h	eld		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Car	d Issuer Paid			
	\$111.35	01/28/2024	02/20/2024				
PAYEE	(a) Payee name	<u> </u>	(b) Payee address;	City,	State,	Zip Code	
			950 South Cherry S	Street 10th Floo	or		
	Hotel Engine						
			Denver, CO 80246				
PURPOSE OF	(a) Category (See Categories listed at the top	of this cahadula)	(b) Description				
EXPENDITURE	Travel In District	of this scriedule)	Lodging to attend o	campaign event			
X Political							
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.		Austin, TX, officeholder li			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office h	eld		
expenditure to benefit C/OH	<u> </u>						

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 Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 15/46 Rpt:	Abbott, Greg (The I	Honorable)	00019652				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 12,490.51			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$135.77	01/28/2024	02/20/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Hotel Engine	10th Floor					
8 PURPOSE OF	(a) Category (b) Description						
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Lodging to attend campaig			gn event			
Non-Political	(c) Check if travel outside	officeholder living expense					
9 Complete ONLY if direct Candidate/Officeholder name Off			e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$148.63	01/28/2024	02/20/2024				
PAYEE (a) Payee name		(b) Payee address;	City, State, Zip Code				
	Hotel Engine		950 South Cherry Street	10th Floor			
			Denver, CO 80246				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
X Political	Travel In District	,	Lodging to attend campaign event				
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 Office	e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid			
	\$154.91	01/28/2024	02/20/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Hotel Engine		950 South Cherry Street	10th Floor			
			Denver, CO 80246				
PURPOSE OF	(a) Category	-£4b:bd-1-\	(b) Description				
EXPENDITURE	(See Categories listed at the top Travel In District	or this schedule)	Lodging to attend campaig	gn event			
X Political							
Non-Political	(*) —	of Texas. Complete Schedule T.		officeholder living expense			
Complete <u>ONLY</u> 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 Commission	on Filers)			
Sch: 16/46 Rpt:	Abbott, Greg (The I	Honorable)	00019652					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 12,490.52	1			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$205.58	02/19/2024	02/28/2024					
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State,	Zip Code			
	Hotel Engine		950 South Cherry Street	10th Floor				
	() 2 :		Denver, CO 80246					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	an avant				
X Political	Travel In District Lodging to attend campaig			girevent				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense				
9 Complete ONLY if direct Candidate/Officeholder name Offi			e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$89.72	(b) Date of Charge 03/02/2024	(c) Date(s) Credit Card Issuel 04/10/2024	r Paid				
PAYEE	(a) Payee name	L	(b) Payee address;	City, State,	Zip Code			
	Hotel Engine		950 South Cherry Street	10th Floor				
			Denver, CO 80246					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign event					
X Political								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	Check if Austin, TX, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held				
expenditure to benefit C/OH		I	T					
PAYMENT	(a) Amount Charged \$133.76	(b) Date of Charge 03/15/2024	(c) Date(s) Credit Card Issuel 04/10/2024	r Paid				
PAYEE	(a) Payee name	I	(b) Payee address;	City, State,	Zip Code			
			950 South Cherry Street	10th Floor				
	Hotel Engine							
			Denver, CO 80246					
PURPOSE OF	(a) Category (See Categories listed at the top		(b) Description					
EXPENDITURE	Travel In District	of this schedule)	Lodging to attend campaig	gn event				
X Political								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		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 Insti	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Sch: 17/46 Rpt:	Abbott, Greg (The F	Honorable)	00019652			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 12,490.51		
6 PAYMENT	(a) Amount Charged \$138.64	(b) Date of Charge 04/08/2024	(c) Date(s) Credit Card Issue 05/20/2024	r Paid		
7 PAYEE	(a) Payee name Hotel Engine		(b) Payee address; 950 South Cherry Street Denver, CO 80246	City, State, Zip Code 10th Floor		
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campai	ign event		
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 Candidate/Officeholder name Officeholder name			e sought	Office held		
PAYMENT	(a) Amount Charged \$106.12	(b) Date of Charge 05/09/2024	(c) Date(s) Credit Card Issue 06/04/2024	r Paid		
PAYEE	(a) Payee name Hotel Engine		(b) Payee address; 950 South Cherry Street Denver, CO 80246	City, State, Zip Code 10th Floor		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campai	ign event		
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		
PAYMENT	(a) Amount Charged \$140.66	(b) Date of Charge 05/09/2024	(c) Date(s) Credit Card Issue 06/04/2024	er Paid		
PAYEE	(a) Payee name Hotel Engine		(b) Payee address; 950 South Cherry Street Denver, CO 80246	City, State, Zip Code 10th Floor		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campai	ign event		
Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.	—	, 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 (Eth	ics Commis	sion Filers)
	Sch: 18/46 Rpt:	Abbott, Greg (The I	Honorable)			00019652		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	12,490.5	51
6	PAYMENT	(a) Amount Charged \$229.61	(b) Date of Charge 05/09/2024	(c) Date(s 06/04/20) Credit Card Issue)24	r Paid		
7	PAYEE	(a) Payee name Hotel Engine			address; th Cherry Street CO 80246	City, 10th Floor	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri		gn event		
	Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX,			officeholder living ex	pense		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$229.61	(b) Date of Charge 05/09/2024	(c) Date(s 06/04/20) Credit Card Issue)24	r Paid		
	PAYEE	(a) Payee name Hotel Engine			address; th Cherry Street CO 80246	City, 10th Floor	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri		gn event		
	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 \$138.83	(b) Date of Charge 06/12/2024	(c) Date(s 06/28/20) Credit Card Issue)24	r Paid		
	PAYEE	(a) Payee name Hotel Engine			address; th Cherry Street CO 80246	City, 10th Floor	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political Non-Political	(a) Category (See Categories listed at the top Travel In District	,	(b) Descri Lodging	to attend campai			
L	Ш	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	office held	pense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	name Office	e sougiil		Onice nelu		
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 (Ethics Commission F					
Sch: 19/46 Rpt:	Abbott, Greg (The I	Honorable)		00019652				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$ 12,490.51				
6 PAYMENT	(a) Amount Charged \$291.54	(b) Date of Charge 05/08/2024	(c) Date(s) Credit Card Issue 06/05/2024	er Paid				
7 PAYEE	(a) Payee name Hotels.com		(b) Payee address; City, State, Zip C 5400 LBJ Freeway Suite 500 Dallas, TX 75240					
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign event					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	K, officeholder living expense				
expenditure to benefit C/OH			e sought	Office held				
PAYMENT	(a) Amount Charged \$168.37	(b) Date of Charge 05/10/2024	(c) Date(s) Credit Card Issue 06/05/2024	er Paid				
PAYEE	(a) Payee name Hotels.com		(b) Payee address; 5400 LBJ Freeway Suite Dallas, TX 75240	City, State, Zip Code e 500				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campa	uign event				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	K, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	r name Offic	e sought	Office held				
PAYMENT	(a) Amount Charged \$3.20	(b) Date of Charge 02/09/2024	(c) Date(s) Credit Card Issue 03/21/2024	er Paid				
PAYEE	(a) Payee name i360, LLC		(b) Payee address; 2300 Clarendon Blvd. S Arlington, VA 22201	City, State, Zip Code te. 800				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Ren		(b) Description Campaign mobile applica					
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.		K, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	r 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 Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Comm	ission Filers)		
Sch: 20/46 Rpt:	Abbott, Greg (The I	Honorable)	00019652				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 12,490).51		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$253.58	03/07/2024	03/21/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State	, Zip Code		
	i360, LLC		2300 Clarendon Blvd. Ste	e. 800			
			Arlington, VA 22201				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Campaign mobile appl						
X Political				tion			
Non-Political	(c) Check if travel outside	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX,					
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$95.99	04/12/2024	05/20/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State	, Zip Code		
	i360, LLC		2300 Clarendon Blvd. Ste	e. 800			
			Arlington, VA 22201				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description				
l <u>—</u>	Office Overhead/Rent		Campaign mobile application				
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuel 06/04/2024	r Paid			
	\$11.52	05/11/2024	00/04/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State	, Zip Code		
			2300 Clarendon Blvd. Ste	e. 800			
	i360, LLC						
			Arlington, VA 22201				
PURPOSE OF	(a) Category (See Categories listed at the top	of this cahadula)	(b) Description				
EXPENDITURE	Office Overhead/Rent	•	Campaign mobile applicat	tion			
X Political		1					
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

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

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 21/46 Rpt:	Abbott, Greg (The I	Honorable)	00019652				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES \$ 12,490.51 CHARGED TO A CREDIT CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$45.27	06/07/2024	06/28/2024				
7 PAYEE	(a) Payee name	•	(b) Payee address; City, State, Zip Coo 2300 Clarendon Blvd. Ste. 800				
	i360, LLC						
0 DUDDOCE OF	(a) Category		Arlington, VA 22201 (b) Description				
8 PURPOSE OF EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaign mobile applicat	tion			
X Political	Office Overhead/Ren	Office Overhead/Rental Expense					
Non-Political				officeholder living expense			
9 Complete ONLY if direct Candidate/Officeholder name Offi expenditure to benefit C/OH			e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
TATMENT			06/04/2024	. i did			
	\$137.54	05/24/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	La Quinta Inn & Suites		689 East Interstate 30				
			Rockwall, TX 75087				
PURPOSE OF	(a) Category	of this cahadula)	(b) Description				
EXPENDITURE	(See Categories listed at the top Travel In District	of this scriedule)	Lodging to attend campaign event				
X Political							
Non-Political	`	of Texas. Complete Schedule T.		officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$137.54	05/24/2024	06/04/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	La Quinta Inn & Su	ites	689 East Interstate 30				
			Rockwall, TX 75087				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	an avant			
<u> </u>	Travel In District	 ,	Lodging to attend campaid	gri everit			
X Political Non-Political	() [
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense Office held			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	Titalile Office	o 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 Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME	2 FILER NAME			mmission Filers)		
Sch: 22/46 Rpt:	Abbott, Greg (The I	Honorable)	00019652				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		190.51		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$2,134.68	05/22/2024	06/04/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, Sta	ate, Zip Code		
	Mobile Grandstand	s and Stages,	405 E. College Street				
	Lewisville, TX 75057						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	tal			
X Political	Event Expense Campaign equipment rent			ıaı			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	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	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$101.80	02/24/2024	02/28/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, Sta	ate, Zip Code		
	Omni		1300 Houston Street				
			Fort Worth, TX 76102				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description				
l <u>—</u>	Travel In District	of this scriedule)	Lodging to attend campaign events				
X Political							
Non-Political	\(\frac{1}{2}\) \(\frac{1}{2}\)	of Texas. Complete Schedule T.		officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH	() 4	L (1) D (1) (1)	1/25//20 5:0 11	B : I			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 02/28/2024	r Paid			
	\$101.80	02/24/2024	02/20/2024				
PAYEE	(a) Payee name	<u> </u>	(b) Payee address;	City, Sta	ate, Zip Code		
			1300 Houston Street	- 3,	, p		
	Omni						
			Fort Worth, TX 76102				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Lodging to attend campai	gn events			
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)	
Sch: 23/46 Rpt:	Abbott, Greg (The I	Honorable)	00019652				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	12,490.5	51	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$101.80	02/24/2024	02/28/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Omni		1300 Houston Street				
			Fort Worth, TX 76102				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Lodging to attend campaig						
X Political				gn events			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	oense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$101.80	02/24/2024	02/28/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Omni		1300 Houston Street				
			Fort Worth, TX 76102				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description				
X Political	Travel In District	or triis scriedule)	Lodging to attend campaign events				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	officeholder living exp	oense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$101.80	02/24/2024	02/28/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			1300 Houston Street				
	Omni						
			Fort Worth, TX 76102				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
	Travel In District	of this schedule)	Lodging to attend campai	gn events			
X Political							
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.	<u> </u>	officeholder living exp	oense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
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

l	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 24/46 Rpt:	Abbott, Greg (The I	Honorable)			00019652		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF U EXPENDITU CHARGED CARD		\$	12,490.5	51
6	PAYMENT	(a) Amount Charged \$101.80	(b) Date of Charge 02/24/2024	(c) Date(s) Cre 02/28/2024	dit Card Issuer	Paid		
7	PAYEE	(a) Payee name Omni	1300 Houston Street			City,	State,	Zip Code
Ļ	DUDDOG 05	(a) Cataman		Fort Worth, T	X 76102			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Lodging to attend campaig			gn events			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense	
9	9 Complete ONLY if direct Candidate/Officeholder name Offi			e sought		Office held		
E	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$101.80	(b) Date of Charge 02/24/2024	(c) Date(s) Cre 02/28/2024	dit Card Issuer	Paid		
	PAYEE (a) Payee name		(b) Payee addr	ess;	City,	State,	Zip Code	
		Omni		1300 Houston	n Street			
L				Fort Worth, T	X 76102			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to at	tend campaiç	gn events		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Theck if Austin TX	officeholder living exp	nense	
H	Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	TICON II AUGUII, 174,	Office held	Jense .	
6	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$101.80	(b) Date of Charge 02/24/2024	(c) Date(s) Cre 02/28/2024	dit Card Issuer	Paid		
	PAYEE	(a) Payee name Omni		(b) Payee addr 1300 Housto Fort Worth, T	n Street	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Lodging to at	tend campaiç	gn events		
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense	
Complete ONLY if direct expenditure to benefit C/OH Complete ONLY 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 Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)	
Sch: 25/46 Rpt:	Abbott, Greg (The I	Honorable)		00019652			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	12,490.5	51	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$101.80	02/24/2024	02/28/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Omni		1300 Houston Street				
			Fort Worth, TX 76102				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Lodging to attend campaig						
X Political				gn events			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living exp	oense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$101.80	02/24/2024	02/28/2024				
PAYEE (a) Payee name			(b) Payee address;	City,	State,	Zip Code	
	Omni		1300 Houston Street				
			Fort Worth, TX 76102				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description				
X Political	Travel In District	or tris scriedule)	Lodging to attend campaign events				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living exp	pense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$101.81	02/24/2024	02/28/2024				
PAYEE	(a) Payee name	<u> </u>	(b) Payee address;	City,	State,	Zip Code	
			1300 Houston Street				
	Omni						
			Fort Worth, TX 76102				
PURPOSE OF	(a) Category	of this schodule)	(b) Description				
EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Lodging to attend campai	gn events			
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	, officeholder living exp	pense		
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 Insti	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 26/46 Rpt:	Abbott, Greg (The F	Honorable)		00019652			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 12,490.51			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$101.81	02/24/2024	02/28/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Omni		1300 Houston Street				
			Fort Worth, TX 76102				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
X Political	Travel In District	of this soficulary	Lodging to attend campaig	gn events			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	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	(b) Date of Charge	(c) Date(s) Credit Card Issuel 02/28/2024	r Paid			
	\$101.81	02/24/2024	02/28/2024				
PAYEE	(a) Payee name (b) Payee address;			City, State, Zip Code			
	Omni						
			Fort Worth, TX 76102				
PURPOSE OF	(a) Category	-falci	(b) Description				
EXPENDITURE	(See Categories listed at the top Travel In District	of trils scriedule)	Lodging to attend campaign events				
X Political							
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$101.81	02/24/2024	02/28/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Omni		1300 Houston Street				
	Onni		Fort Worth, TX 76102				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Lodging to attend campaig	gn events			
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	nics Commiss	sion Filers)
	Sch: 27/46 Rpt:	Abbott, Greg (The I	Honorable)			00019652		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	12,490.5	51
6	PAYMENT	(a) Amount Charged \$101.81	(b) Date of Charge 02/24/2024	(c) Date(s) 02/28/20) Credit Card Issue 24	r Paid		
7	PAYEE	(a) Payee name Omni			address; uston Street th, TX 76102	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri		gn events		
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	rpense	
	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$101.81	(b) Date of Charge 02/24/2024	(c) Date(s) 02/28/20) Credit Card Issue 24	r Paid		
	PAYEE	(a) Payee name Omni			address; uston Street th, TX 76102	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri		gn events		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	rpense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$113.49	(b) Date of Charge 02/24/2024	(c) Date(s) 02/28/20) Credit Card Issue 24	r Paid		
	PAYEE	(a) Payee name Omni			address; uston Street th, TX 76102	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Lodging to attend campaign events				
\vdash	<u> </u>	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Cneck if Austin, TX,	officeholder living ex	kpense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeriolder	name Office	o sougni		Onice Held		
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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 Inst	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Et	hics Commiss	sion Filers)		
Sch: 28/46 Rpt:	Abbott, Greg (The I	Honorable)		00019652				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRI CARD	\$	12,490.5	51		
6 PAYMENT	(a) Amount Charged \$113.49	(b) Date of Charge 02/24/2024	(c) Date(s) Credit Card I: 02/28/2024	ssuer Paid				
7 PAYEE	(a) Payee name Omni		(b) Payee address; 1300 Houston Street Fort Worth, TX 76102	City,	State,	Zip Code		
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign events					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living e	TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office so			e sought	Office held				
PAYMENT	(a) Amount Charged \$113.49	(b) Date of Charge 02/24/2024	(c) Date(s) Credit Card I: 02/28/2024	ssuer Paid				
PAYEE	Omni 1300		(b) Payee address; 1300 Houston Street Fort Worth, TX 76102	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign events					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living e	xpense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held				
PAYMENT	(a) Amount Charged \$113.49	(b) Date of Charge 02/24/2024	(c) Date(s) Credit Card I: 02/28/2024	ssuer Paid				
PAYEE	(a) Payee name Omni		(b) Payee address; 1300 Houston Street Fort Worth, TX 76102	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign events					
Non-Political Complete ONLY if direct expenditure to benefit C/OH	\(\frac{1}{2}\) \(\frac{1}{2}\)	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office 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 Insti	ruction Guide explains how	to complete th	nis form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	ics Commiss	sion Filers)
	Sch: 29/46 Rpt:	Abbott, Greg (The I	Honorable)			00019652		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$	12,490.5	51
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid		
		\$113.49	02/24/2024	02/28/202	24			
7	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
		Omni		1300 Hou	ston Street			
		Omni						
				<u> </u>	n, TX 76102			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript				
	X Political	Travel In District	I Loughly to attenu campaid			gn events		
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense	
9	Complete ONLY if direct				Office held			
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid		
		\$113.49	02/24/2024	02/28/202	24			
	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
		Omni		1300 Hou	ston Street			
		Onnii						
L	DUDDOS 05	(a) Cataman			n, TX 76102			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Lodging to attend campaign events				
	X Political	Travel In District		Loughig	σαιτεπα σαπραίζ	girevents		
	Non-Political				_			
L		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	<u>L</u> e sought	Check if Austin, TX,	officeholder living exp	oense	
۱	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeriolder	name Onice	e sougrit		Office field		
-	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
	.,	.,	,	02/28/202		. a.a		
		\$113.49	02/24/2024					
\vdash	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
					ston Street	- 3,	,	
		Omni						
				Fort Worth	n, TX 76102			
Г	PURPOSE OF	(a) Category		(b) Descript				
	EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Lodging to	attend campaiq	gn events		
	X Political	Traver in District						
L	Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living				officeholder living exp	pense	
	Complete ONLY if direct	Candidate/Officeholder	Candidate/Officeholder name Office sought Office held					
e	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 Inst	ruction Guide explains how	to complete	this form.	(* ** *********************************	. ,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	sion Filers)
	Sch: 30/46 Rpt:	Abbott, Greg (The I	Honorable)			00019652		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	12,490.5	51
6	PAYMENT	(a) Amount Charged \$113.49	(b) Date of Charge 02/24/2024	(c) Date(s) 02/28/20) Credit Card Issuei 124	r Paid		
7	PAYEE	(a) Payee name Omni			address; uston Street th, TX 76102	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri		gn events		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
9	Complete ONLY if direct expenditure to benefit C/OH	enefit C/OH				Office held		
	PAYMENT	(a) Amount Charged \$113.49	(b) Date of Charge 02/24/2024	(c) Date(s) 02/28/20) Credit Card Issuei 124	r Paid		
	PAYEE				uston Street	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri	th, TX 76102 ption to attend campaiq	gn events		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$113.49	(b) Date of Charge 02/24/2024	(c) Date(s) 02/28/20) Credit Card Issuei 124	r Paid		
	PAYEE	(a) Payee name Omni			address; uston Street th, TX 76102	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign events				
L	Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder					pense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
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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 Inst	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	nics Commiss	sion Filers)
	Sch: 31/46 Rpt:	Abbott, Greg (The I	Honorable)			00019652		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	12,490.5	51
6	PAYMENT	(a) Amount Charged \$113.49	(b) Date of Charge 02/24/2024	(c) Date(s 02/28/20) Credit Card Issue 124	r Paid		
7	PAYEE	(a) Payee name Omni			address; uston Street th, TX 76102	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri		gn events		
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	rpense	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$113.49	(b) Date of Charge 02/24/2024	(c) Date(s) 02/28/20) Credit Card Issue)24	r Paid		
	PAYEE	(a) Payee name Omni			address; uston Street th, TX 76102	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri		gn events		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living ex	kpense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$113.50	(b) Date of Charge 02/24/2024	(c) Date(s) 02/28/20) Credit Card Issue)24	r Paid		
	PAYEE	(a) Payee name Omni			address; uston Street th, TX 76102	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Lodging to attend campaign events				
L		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	office held	rpense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	name Office	e souyni		Onice Held		
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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 Insti	ruction Guide explains how	to co	mplete thi	s form.				
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethi	cs Commiss	sion Filers)	
	Sch: 32/46 Rpt:	Abbott, Greg (The F	Honorable)				00019652			
4	CREDIT CARD ISSUER		ncial institution revious	E (EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$	12,490.5	51	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge			redit Card Issuer	Paid			
		\$113.50	02/24/2024	02	:/28/2024	1				
7	PAYEE	(a) Payee name		(b)	Payee ac	ldress;	City,	State,	Zip Code	
		Omni		13	00 Hous	ton Street				
		Onnii				, TX 76102				
8	PURPOSE OF	(a) Category		1 ' '	Description					
	EXPENDITURE X Political	(See Categories listed at the top Travel In District	of this schedule)	Lodging to attend campai			gn events			
	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					
е	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge			redit Card Issuer	Paid			
		\$113.50	02/24/2024	02	1/28/2024	1				
	PAYEE	(a) Payee name (b) Payee address;			City,	State,	Zip Code			
				00 Hous	ton Street					
				Fo	rt Worth	, TX 76102				
	PURPOSE OF	(a) Category		1 ' '	Description					
	EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Lodging to attend campaign events						
	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 sou	ght		Office held			
е	xpenditure to benefit C/OH			,						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	1 ` ′	Date(s) C 2/28/2024	redit Card Issuer	Paid			
		\$113.50	02/24/2024	02	.12012022	•				
\vdash	PAYEE	(a) Payee name		(h)	Payee ac	ldress:	City,	State,	Zip Code	
		(a) r ayou name		1 ` ′	-	ton Street	Oity,	Otato,	Zip Code	
		Omni								
				Fo	rt Worth	, TX 76102				
	PURPOSE OF	(a) Category			Description					
	EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Lo	dging to	attend campai	gn events			
	X Political	Traver in District	Travel in district							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•		Check if Austin, TX,	TX, officeholder living expense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sou	ght		Office held			
е	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Et	hics Commiss	sion Filers)
	Sch: 33/46 Rpt:	Abbott, Greg (The I	Honorable)			00019652		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	12,490.5	51
6	PAYMENT	(a) Amount Charged \$189.28	(b) Date of Charge 04/20/2024	(c) Date(s 05/20/20) Credit Card Issue)24	r Paid		
7	PAYEE	(a) Payee name ReservationCounte	er.com		address; Daybreak Parkw ordan, UT 84095	City, ay	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign event				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living e	xpense	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
L	PAYMENT	(a) Amount Charged	(b) Data of Charge	(a) Data(a	Cradit Card Issue	r Doid		
	PATMENT	(a) Amount Charged \$189.28	(b) Date of Charge 04/20/2024	05/20/20) Credit Card Issue)24	i Palu		
	PAYEE	(a) Payee name ReservationCounter.com			address; Daybreak Parkw ordan, UT 84095	City, ay	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri		gn event		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living e	xpense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$189.28	(b) Date of Charge 04/20/2024	(c) Date(s) 05/20/20) Credit Card Issue)24	r Paid		
	PAYEE	(a) Payee name ReservationCounte	er.com	(b) Payee address; 4700 W. Daybreak Parkwa South Jordan, UT 84095		City, ay	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District		(b) Descri Lodging	to attend campai			
\vdash	Non-Political	(7)	of Texas. Complete Schedule T.	o cought	Check if Austin, TX,	Office hold	xpense	
e	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 Inst	ruction Guide explains how	to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	sion Filers)
Sch: 34/46 Rpt:	Abbott, Greg (The I	Honorable)			00019652		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED ITURES ED TO A CREDIT	\$	12,490.5	51
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	[·] Paid		
	\$189.28	04/20/2024	05/20/202	4			
7 PAYEE	(a) Payee name	I	(b) Payee a	ddress;	City,	State,	Zip Code
	ReservationCounte	r.com	4700 W. D	aybreak Parkwa	ay		
				lan, UT 84095			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti				
X Political	Travel In District	or this seriedate)	Loaging to	attend campaiç	gn event		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
9 Complete ONLY if direct	Complete ONLY if direct Candidate/Officeholder name Office sought			Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid		
	\$328.95	04/13/2024	05/20/202	4			
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Dacidonas Inn		3761 S I-3	5 E			
	Residence Inn						
			Denton, T				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
l <u> </u>	Travel In District	,	Lodging to attend campaign event				
X Political							
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		
expenditure to benefit C/OH	(a) Amount Charged	(h) Data of Charge	(a) Data(a) (Cradit Card Issuer	Doid		
PAYMENT	(a) Amount Charged	(b) Date of Charge	03/21/202	Credit Card Issuer 4	Palu		
	\$26.98	02/08/2024					
PAYEE	(a) Payee name	<u> </u>	(b) Payee a	ddress:	City,	State,	Zip Code
	(a) i ayee name		513 State		Oity,	otate,	Zip Code
	Shell		010 Glato	,			
			Bastrop, T	X 78602			
PURPOSE OF	(a) Category		(b) Descripti	ion			
EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Fuel for ca	ımpaign travel			
X Political	Traver in District						
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin				officeholder living ex	pense	
Complete ONLY if direct	Candidate/Officeholder name Office sought				Office held		
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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Et	hics Commiss	sion Filers)	
Sch: 35/46 Rpt:	Abbott, Greg (The I	Honorable)		00019652			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRE CARD	\$	12,490.5	51	
6 PAYMENT	(a) Amount Charged \$26.70	(b) Date of Charge 05/01/2024	(c) Date(s) Credit Card Is 06/05/2024	ssuer Paid			
7 PAYEE	(a) Payee name Shell		(b) Payee address; 513 State Hwy 71 Bastrop, TX 78602	City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Fuel for campaign trav	vel			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living e	xpense		
expenditure to benefit C/OH			e sought	Office held			
PAYMENT	(a) Amount Charged \$86.10	(b) Date of Charge 05/14/2024	(c) Date(s) Credit Card Is 06/05/2024	ssuer Paid			
PAYEE	(a) Payee name (b) Payee address; 513 State Hwy 71 Bastrop, TX 78602		City,	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Fuel for campaign trav	vel			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living e	xpense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged \$52.21	(b) Date of Charge 05/25/2024	(c) Date(s) Credit Card Is 06/05/2024	ssuer Paid			
PAYEE	(a) Payee name Shell		(b) Payee address; 513 State Hwy 71 Bastrop, TX 78602	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Fuel for campaign trav	vel			
Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sougni	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

1 Total pages Schedule F4: Sch: 36/46 Rpt: Abbott, Greg (The Honorable) 4 CREDIT CARD ISSUER Name of financial institution see previous 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD (a) Amount Charged \$80.79 (b) Date of Charge 06/05/2024 7 PAYEE (a) Payee name (b) Payee address; City, State 2067 Summer Lee Drive #105).51					
4 CREDIT CARD Name of financial institution SEXPENDITURES See previous SEXPENDITURES CHARGED TO A CREDIT CARD CARD CARD CARD CARD CARD COMMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid 06/05/2024 Card Issuer Paid 06/05/2024 Card Issuer Paid Card						
See previous EXPENDITURES CHARGED TO A CREDIT CARD (a) Amount Charged \$80.79 (b) Date of Charge 06/05/2024 (c) Date(s) Credit Card Issuer Paid 06/05/2024 7 PAYEE (a) Payee name (b) Payee address; City, State 2067 Summer Lee Drive #105						
\$80.79 05/23/2024 06/05/2024 7 PAYEE (a) Payee name (b) Payee address; City, State 2067 Summer Lee Drive #105	, Zip Code					
\$80.79 05/23/2024 7 PAYEE (a) Payee name (b) Payee address; City, State 2067 Summer Lee Drive #105	, Zip Code					
2067 Summer Lee Drive #105	, Zip Code					
Sideways BBQ						
Rockwall, TX 75032						
8 PURPOSE OF (a) Category (b) Description EXPENDITURE (See Categories listed at the top of this schedule) Meeting to discuss campaign issues						
X Political Food/Beverage Expense						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
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 Issuer Paid 02/28/2024						
\$191.23 02/17/2024						
PAYEE (a) Payee name (b) Payee address; City, State	, Zip Code					
Southwest Airlines 2702 Love Field Drive						
Dallas, TX 75235						
PURPOSE OF (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Airfare to attend campaign event						
X Political Travel In District						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OH						
PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid 02/28/2024						
\$191.23 02/17/2024						
PAYEE (a) Payee name (b) Payee address; City, State	, Zip Code					
2702 Love Field Drive						
Southwest Airlines						
Dallas, TX 75235						
PURPOSE OF (a) Category (b) Description EXPENDITURE (See Categories listed at the top of this schedule) Airfare to attend campaign event						
Travel In District						
X Political						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OH	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 Insti	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 37/46 Rpt:	Abbott, Greg (The F	Honorable)		00019652		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	12,490.5	51
6 PAYMENT	(a) Amount Charged \$3.00	(b) Date of Charge 05/24/2024	(c) Date(s) Credit Card Issuer 06/05/2024	Paid		
7 PAYEE	(a) Payee name Springhill Suites		(b) Payee address; 2601 Lakefront Trail	City,	State,	Zip Code
0 00000000	(a) Cataman		Rockwall, TX 75032			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe	*	(b) Description Campaign travel food and	beverage		
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 expenditure to benefit C/OH Candidate/Officeholder name Office sought				Office held		
PAYMENT	(a) Amount Charged \$123.91	(b) Date of Charge 05/24/2024	(c) Date(s) Credit Card Issuer 06/04/2024	[*] Paid		
PAYEE	(a) Payee name Springhill Suites		(b) Payee address; 2601 Lakefront Trail Rockwall, TX 75032	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaiq	gn event		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$128.86	(b) Date of Charge 05/24/2024	(c) Date(s) Credit Card Issuer 06/04/2024	Paid		
PAYEE	(a) Payee name Springhill Suites		(b) Payee address; 2601 Lakefront Trail Rockwall, TX 75032	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campai	gn event		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	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 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 Inst	ruction Guide explains how	to complete	this form.	(*	. ,	,		
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethics Commission Filers)			
	Sch: 38/46 Rpt:	Abbott, Greg (The I	Honorable)			00019652				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$ 12,490.51				
6	PAYMENT	(a) Amount Charged \$187.58	(b) Date of Charge 05/24/2024	(c) Date(s) Credit Card Issuer Paid 06/04/2024						
7	PAYEE	(a) Payee name Springhill Suites			address; sefront Trail , TX 75032	Trail				
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip		gn event				
	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	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$237.66	(b) Date of Charge 05/24/2024	(c) Date(s) 06/04/20) Credit Card Issuer 24	Paid				
	PAYEE	(a) Payee name Staybridge Suites		(b) Payee address; 6301 North Freeway Fort Worth, TX 76131		City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign event						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living ex	pense			
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$237.66	(b) Date of Charge 05/24/2024	(c) Date(s) 06/04/20) Credit Card Issuer 24	Paid				
	PAYEE	(a) Payee name Staybridge Suites			address; rth Freeway th, TX 76131	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip Lodging	otion to attend campaiç	gn event				
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense			
e	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 (Ethics Commission Filers)						
Sch: 39/46 Rpt:	Abbott, Greg (The Honorable)									
4 CREDIT CARD ISSUER	1	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	12,490.5	51				
6 PAYMENT	(a) Amount Charged \$237.68	(b) Date of Charge 05/24/2024	(c) Date(s) Credit Card Issue 06/04/2024	er Paid						
7 PAYEE	(a) Payee name (b) Payee address; 6301 North Freeway			City,	State,	Zip Code				
	(a) Catamani		Fort Worth, TX 76131							
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Lodging to attend campaig			ign event						
Non-Political	(c) Check if travel outside	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 \$66.17	(b) Date of Charge 02/23/2024	(c) Date(s) Credit Card Issue 03/21/2024	er Paid						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	The Ashton Hotel		610 Main Street							
			Fort Worth, TX 76102							
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign event							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin TY	officeholder living ev	nense					
Complete ONLY if direct	Candidate/Officeholder	•	Check if Austin, TX, officeholder living expense ce sought Office held							
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged \$66.18	(b) Date of Charge 02/23/2024	(c) Date(s) Credit Card Issue 03/21/2024	er Paid						
PAYEE (a) Payee name The Ashton Hotel		(b) Payee address; City, State, Zip Co 610 Main Street Fort Worth, TX 76102								
PURPOSE OF EXPENDITURE X Political	EXPENDITURE (See Categories listed at the top of this schedule) Travel In District		(b) Description Lodging to attend campaign event							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	, officeholder living ex	pense					
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 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	ics Commiss	sion Filers)		
	Sch: 40/46 Rpt:	Abbott, Greg (The F	Honorable)		00019652					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$	51			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	[·] Paid				
		\$66.18	02/23/2024	03/21/202	4					
7	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
		The Ashton Hotel 610 Main Stre			Street					
				Fort Worth	n, TX 76102					
8	PURPOSE OF	(a) Category		(b) Descripti						
	EXPENDITURE X Political	(See Categories listed at the top Travel In District	of this schedule)	Lodging to	attend campai	gn event				
	Non-Political	(c) Check if travel outside	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				
ex	penditure to benefit C/OH									
PAYMENT		(a) Amount Charged	(b) Date of Charge		Credit Card Issue	Paid				
		\$66.18	02/23/2024	03/21/202	4					
PAYEE (a) Payee name			(b) Payee a	ddress;	City,	State,	Zip Code			
		The Ashton Hotel		610 Main 5	Street					
				Fort Worth, TX 76102						
	PURPOSE OF	(a) Category		(b) Descripti	ion					
	EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Lodging to attend campaign event						
	x Political									
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	, officeholder living expense				
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
ex	kpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (03/21/202	Credit Card Issuer	Paid				
		\$66.18	02/23/2024	03/21/202	4					
\vdash	PAYEE	(a) Payee name	<u> </u>	(b) Payee a	ddress;	City,	State,	Zip Code		
				610 Main 9		•		·		
		The Ashton Hotel								
				Fort Worth, TX 76102						
	PURPOSE OF	(a) Category	6 11: 1 1 1 1	(b) Description						
	EXPENDITURE	(See Categories listed at the top Travel In District	or this schedule)	Lodging to attend campaign event						
	X Political									
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	pense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
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 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 Filers)						
Sch: 41/46 Rpt:	Abbott, Greg (The F	Honorable)		00019652				
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED	40,400,54				
ISSUER	see pi	revious	EXPENDITURES CHARGED TO A CREDIT CARD	\$ 12,490.51				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid				
	\$66.18	02/23/2024	03/21/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Z	Zip Code			
	The Ashton Hotel		610 Main Street					
			Fort Worth, TX 76102					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cohodula)	(b) Description					
X Political	Travel In District	or this scriedule)	Lodging to attend campai	gn event				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	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	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid					
	\$66.18	02/23/2024	03/21/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Z	Zip Code			
	The Ashton Hotel		610 Main Street					
			Fort Worth, TX 76102					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
<u></u>	Travel In District	or this soriedate)	Lodging to attend campaign event					
X Political								
Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid				
	\$66.18	02/23/2024	03/21/2024	i r aiu				
	Ψ00.10	02/23/2024						
PAYEE	(a) Payee name		(b) Payee address;	City, State, Z	Zip Code			
			610 Main Street					
	The Ashton Hotel							
			Fort Worth, TX 76102					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description					
<u> </u>	Travel In District	of this schedule)	Lodging to attend campaig	gn event				
X Political								
Non-Political	(*) 	of Texas. Complete Schedule T.	_	officeholder living expense				
Complete <u>ONLY</u> 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 (Et	hics Commiss	sion Filers)			
	Sch: 42/46 Rpt:	Abbott, Greg (The Honorable)			00019652					
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNIT EXPENDITURES CHARGED TO A CARD	S \$					
6	PAYMENT	(a) Amount Charged \$66.18	(b) Date of Charge 02/23/2024	(c) Date(s) Credit C 03/21/2024	ard Issuer Paid					
7	PAYEE	(a) Payee name The Ashton Hotel		(b) Payee address; 610 Main Street	City,	State,	Zip Code			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Travel In District Fort Worth, TX 76102 (b) Description Lodging to attend campaig								
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check i	f Austin, TX, officeholder living e	ς, officeholder living expense				
	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held					
	PAYMENT	(a) Amount Charged \$66.18	(b) Date of Charge 02/23/2024	(c) Date(s) Credit C 03/21/2024	ard Issuer Paid					
		(a) Payee name The Ashton Hotel		(b) Payee address; 610 Main Street Fort Worth, TX 76	City, 6102	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check i	f Austin, TX, officeholder living e	, officeholder living expense				
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held					
	PAYMENT	(a) Amount Charged \$66.18	(b) Date of Charge 02/23/2024	(c) Date(s) Credit C 03/21/2024	ard Issuer Paid					
PAYEE (a) Payee name The Ashton Hotel		(b) Payee address; City, State, Zip Co 610 Main Street Fort Worth, TX 76102								
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign event						
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		f Austin, TX, officeholder living e	expense				
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	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 (Etl	hics Commiss	sion Filers)		
	Sch: 43/46 Rpt:	Abbott, Greg (The I	Honorable)			00019652				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$ 12,490.51				
6	PAYMENT	(a) Amount Charged \$66.18	(b) Date of Charge 02/23/2024	(c) Date(s) (03/21/202	Credit Card Issuer 4	Paid				
7	PAYEE	(a) Payee name The Ashton Hotel		(b) Payee address; City, State, Z 610 Main Street Fort Worth, TX 76102			Zip Code			
ŀ	PURPOSE OF	(a) Category		(b) Descripti						
8	EXPENDITURE X Political	(See Categories listed at the top Travel In District	of this schedule)	1	attend campai	gn event				
	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			e sought		Office held				
	PAYMENT	(a) Amount Charged \$66.18	(b) Date of Charge 02/23/2024	(c) Date(s) 0 03/21/202	Credit Card Issuer 4	Paid				
	PAYEE (a) Payee name The Ashton Hotel			(b) Payee at	Street	City,	State,	Zip Code		
L		() 0 :		Fort Worth, TX 76102 (b) Description						
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	Lodging to attend campaign event						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Г	Check if Austin, TX,	officeholder living e	xpense			
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$66.18	(b) Date of Charge 02/23/2024	(c) Date(s) 0 03/21/202	Credit Card Issuer 4	· Paid				
	PAYEE	(a) Payee name The Ashton Hotel		(b) Payee at 610 Main S		City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descripti Lodging to	on attend campaiç	gn event				
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,		xpense			
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 Inst	ruction Guide explains how	to complete	this form.	(* ** *********************************	,	,		
1 Total pages Schedule F4	2 FILER NAME	2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
Sch: 44/46 Rpt:	Abbott, Greg (The	Honorable)			00019652				
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$ 12,490.51				
6 PAYMENT	(a) Amount Charged \$66.18	(b) Date of Charge 02/23/2024	(c) Date(s) Credit Card Issuer Paid 03/21/2024						
7 PAYEE	(a) Payee name The Ashton Hotel		610 Mair	b) Payee address; City, State, Z 610 Main Street					
	(-) O-t		+	th, TX 76102					
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign event						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OF			_						
PAYMENT	(a) Amount Charged \$66.18	(b) Date of Charge 02/23/2024	(c) Date(s) 03/21/20) Credit Card Issue 124	r Paid				
PAYEE (a) Payee name			(b) Payee	address;	City,	State,	Zip Code		
	The Ashton Hotel		610 Mair						
	1		Fort Worth, TX 76102						
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign event						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living ex	xpense			
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder	name Offic	e sought		Office held				
PAYMENT	(a) Amount Charged \$394.37	(b) Date of Charge 01/31/2024	(c) Date(s) 02/28/20) Credit Card Issue 124	r Paid				
PAYEE	(a) Payee name The Crazy Water H	lotel	(b) Payee address; 401 N. Oak Avenue Mineral Wells, TX 76067		City,	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description	otion to attend campai	gn event				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	xpense			
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

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 Filers)				
	Sch: 45/46 Rpt:	Abbott, Greg (The Honorable)			00019652					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$ 12,490.51				
6	PAYMENT	(a) Amount Charged \$101.70	(b) Date of Charge 02/02/2024	(c) Date(s 02/20/20) Credit Card Issue 024	r Paid				
7	PAYEE	(a) Payee name Tru by Hilton		(b) Payee address; City, State, Zi 1500 Weyland Drive North Richland Hills, TX 76180				Zip Code		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description						
	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 Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$209.05	(b) Date of Charge 02/02/2024	(c) Date(s 02/20/20) Credit Card Issue)24	r Paid				
	PAYEE	(a) Payee name Tru by Hilton			address; eyland Drive chland Hills, TX 7	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	, officeholder living expense				
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$183.10	(b) Date of Charge 04/20/2024	(c) Date(s) 05/20/20) Credit Card Issue)24	r Paid				
	PAYEE	(a) Payee name Warwick Melrose		(b) Payee 3015 Oa Dallas, T	k Lawn Avenue	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	,	(b) Descri	to attend campai					
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	o coucht	Check if Austin, TX,	Office hold	xpense			
e	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 (Ethics Commission Filers)				
	Sch: 46/46 Rpt:	Abbott, Greg (The Honorable)			00019652					
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL EXPEN CHARG CARD	\$ 12,490.51					
6	PAYMENT	(a) Amount Charged \$183.10	(b) Date of Charge 04/20/2024	(c) Date(s 05/20/20) Credit Card Issue)24	r Paid				
7	PAYEE	(a) Payee name Warwick Melrose			k Lawn Avenue	City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Travel In District Dallas, TX 75219 (b) Description Lodging to attend campaign			aign event					
	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 Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$183.10	(b) Date of Charge 04/20/2024	(c) Date(s 05/20/20) Credit Card Issue 124	r Paid				
	PAYEE	(a) Payee name Warwick Melrose		(b) Payee 3015 Oa Dallas, T	k Lawn Avenue	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Lodging to attend campaign event						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	, officeholder living expense				
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$183.10	(b) Date of Charge 04/20/2024	(c) Date(s) 05/20/20) Credit Card Issue)24	r Paid				
	PAYEE	(a) Payee name Warwick Melrose		(b) Payee 3015 Oa Dallas, T	k Lawn Avenue	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political Non-Political	(a) Category (See Categories listed at the top Travel In District	,	(b) Descri	to attend campai					
L	Ш	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	officeholder living ex	pense			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	name Office	e souyni		Office Held				
ı										

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: 1/1 Rpt: 190/190 2 FILER NAME Filer ID (Ethics Commission Filers) Abbott, Greg (The Honorable) 00019652 8 Amount (\$) Date 5 Name of person from whom amount is received 03/08/2024 Cross Screen Media, LLC \$608,418.27 6 Address of person from whom amount is received; City; State; Zip Code Alexandria, VA 22314 Purpose for which amount is received Check if political contribution returned to filer Refund Name of person from whom amount is received Amount (\$) Date 06/27/2024 Cross Screen Media, LLC \$223,000.00 Address of person from whom amount is received; City; State; Zip Code Alexandria, VA 22314 Purpose for which amount is received Check if political contribution returned to filer Refund