SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC Instruction	Guide explains how to complete this fo	rm.		ID Commission Filers) 65997		2 Tota 90	al pages file	d:
3 COMMITTEE NAME								SE ONLY
Texans for Charles	s Schwertner							
						Date Red ELEC 07/15	TRONICA	LY FILED
4 COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CI	TY;	STATE;	ZIP COD	E		
ADDRESS	P.O. Box 2448					Date Har	nd-delivered or [Date Postmarked
Change of Address								
	Georgetown, TX 78627-2448					Receipt #	#	Amount
						Date Pro	ocessed	•
						Date Ima	aged	
5 CAMPAIGN	MS / MRS / MR FIRST					MI		
TREASURER NAME	Mrs. Elizabeth	1						
NAME								
	NICKNAME LAST					SUFFIX	······ <	
	Schleder							
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEA	ASE);		APT / SUITE	:#; (CITY;	STAT	E; ZIP CODE
TREASURER STREET	332 Rio Grande Loop							
ADDRESS								
(Residence or Business)	Georgetown, TX 78633							
7 CAMPAIGN	STREET OR PO BOX;			APT / SUITE	:#; C	CITY;	STAT	E; ZIP CODE
TREASURER MAILING	332 Rio Grande Loop							
ADDRESS								
Change of Address	Georgetown, TX 78633							
8 CAMPAIGN	AREA CODE PHONE NUMBER	R	EXTENSI	ON				
	(512) 738-0652							
PHONE								
9 REPORT	January 15	3 0t	h day befor	e election		Exceed	ded modified r	eporting limit
TYPE		- 1 8th	day before	election			ution (Attach F	AC-DR)
	X July 15	_	-					-
		Rui	noff			10th da termina	ay after campa ation	aign treasurer
10 PERIOD	Month Day Year				Month	Day	Year	
COVERED	01/01/2024	TI	HROUGH		06	6/30/2024		
11 ELECTION	ELECTION DATE	7	non			Other		
	Month Day Year		nary	Runof	I	Other		
		Ge	neral	Specia	al			
		GO [.]	ΓΟ ΡΑG	E 2				
Forms provided by Te	xas Ethics Commission ww	ww.e	thics.stat	e.tx.us			Versior	n V4.1.0.d378ab

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texans for Charles Sch	wertner		00065997	
14 COMMITTEE		CANDIDATE / OFFICEHOLDER NAME		
PURPOSE		Dr. Charles Schwertner		
(Attach lists on plain				
paper to complete this	Candidate			
report if necessary.)	X Officeholder	OFFICE SOUGHT (candidate) / OFFICE HEL	D (officeholder)	
		State Senator		
(Candidate or Measure)		BALLOT IDENTIFICATION / #	ELECTI	ON DATE
			Month	Day Year
(Candidate or Measure)				
	Measure			
X ASSIST		DESCRIPTION		
(Officeholder)				
15 CONTRIBUTION		RIBUTIONS OF \$50 OR LESS (OTHER THAI	N PLEDGES,	
TOTALS	ELECTRONICALLY), UNI	ES OF LOANS, OR CONTRIBUTIONS MADE		\$ \$25.00
	^{2.} TOTAL POLITICAL CO	ONTRIBUTIONS		• • • • • • • • • • • • • • • • • •
	(OTHER THAN PLEDGES	S, LOANS, OR GUARANTEES OF LOANS)		\$ \$84,775.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED PO	LITICAL EXPENDITURES		\$ \$0.00
				φ Φ0.00
	4. TOTAL POLITICAL EX			
		APENDITORES		\$ \$178,549.13
CONTRIBUTION	5. TOTAL POLITICAL CONT	RIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE	
BALANCE	REPORTING PERIOD			\$ \$2,570,019.40
L				
OUTSTANDING		UNT OF ALL OUTSTANDING LOANS AS OF	THE LAST	
LOAN TOTALS	DAY OF THE REPORTIN	GPERIOD		\$ \$0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of per	ury, that the acc	ompanying report is true
		and correct and includes all information Title 15, Election Code.	n required to be	reported by me under
		Mrs. Elizab	eth Schleder	
AFFIX NOTARY	STAMP / SEAL ABOVE	Signature of Ca	mpaign Treasure	er
Sworn to and subscribed	before me, by the said	, t	his the	day
		, witness my hand and seal of office.		
	ministoring oath	ad name of officer administration acts		ar administration asth
Signature of officer adr	ministering oath Print	ed name of officer administering oath	THE OF OTHER	er administering oath

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE

FORM SPAC ADDENDUM

			Page 3 of 90	
12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texans for Charles Schu	vertner		00065997	
14 COMMITTEE PURPOSE		CANDIDATE / OFFICE HOLDER NAME		
(Attach lists on plain paper to complete this	X CANDIDATE	Dr. Charles Schwertner		
report if necessary.)		OFFICE SOUGHT (candidate) / OFFICE HE	LD (officeholder)	
X SUPPORT (Candidate or Measure)		State Senator		
		BALLOT IDENTIFICATION		ON DATE
OPPOSE (Candidate or Measure)	MEASURE		MONTH	DAY YEAR
_		DESCRIPTION		
(Officeholders only)				
·				

S	UBT	OTALS - SPAC	C	OVE	FORM SPAC R SHEET PG 3 4 of 90
		EE NAME r Charles Schwertner	18 Filer ID 00065997	(Ethic	s Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	84,775.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$	
7.		SCHEDULE E: LOANS		\$	
8.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	147,453.05
9.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
10.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	1,704,974.86
11.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	31,096.08
12.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
13.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
14.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	1,625,998.15

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 1/7 Rpt: 5/90	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
Texans for C	Charles Schwertner		00065997	
4 Date	5 Full name of contributor x out-of-state PAC (ID#: C	00089136)	7 Amount of Contribution (\$)	
04/15/2024	Altria Group Inc. PAC			\$2,000.00
	6 Contributor address; City; State; Zip Code			
	Washington, DC 20001			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	;)	
Date	Full name of contributor X out-of-state PAC (ID#: C))	Amount of Contribution (\$)	_
03/04/2024	BRISTOL-MYERS SQUIBB COMPANY PAC			\$750.00
	Contributor address; City; State; Zip Code			
	Weshington DC 20004			
Dringing occu	Washington, DC 20004	Employer (See Instructions)	A	
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	•)	
Data		<u> </u>	Amount of Contribution (ft)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	ቀፍ በበብ በበ
01/16/2024	Choctaw Nation of Oklahoma			\$5,000.00
	Contributor address; City; State; Zip Code			
	Durant, OK 74702			
Principal occl	upation / Job title (See Instructions)	Employer (See Instructions) ;)	
-			,	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/28/2024	Comcast Corporation & NBCUniversal Political A	Action Committee		\$3,500.00
	Contributor address; City; State; Zip Code			
	Philadelphia, PA 19013			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	·)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/16/2024	ConocoPhillips Spirit PAC			\$2,500.00
	Contributor address; City; State; Zip Code			
D tractical again	Bartlesville, OK 74004		、 、	
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/7 Rpt: 6/90 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Texans for Charles Schwertner 00065997 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/16/2024 CovestroPAC \$1,000.00 6 Contributor address; City; State; Zip Code Pittsburgh, PA 15205 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/02/2024 \$1,000.00 Denison, Colby (Mr.) Contributor address; City; State; Zip Code Austin, TX 78703 Principal occupation / Job title (See Instructions) Employer (See Instructions) Affordable Housing **Merritt Communities** Full name of contributor X out-of-state PAC (ID#: C00782292 Amount of Contribution (\$) Date 01/16/2024 **DentaQuest PAC** \$1,000.00 Contributor address; City; State; Zip Code Boston, MA 02129 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/04/2024 EXXON MOBIL PAC \$2,500.00 Contributor address; City; State; Zip Code Irving, TX 75039 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/29/2024 \$1,000.00 Germania Farm Mutual Political Action Committee Contributor address; City; State; Zip Code Brenham, TX 77834 Principal occupation / Job title (See Instructions) Employer (See Instructions)

SCHEDULE	A1
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The Inst	ruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 3/7 Rpt: 7/90	
2 FILER NAM	1E		3 Filer ID (Ethics Commission	n Filers)
Texans fo	r Charles Schwertner		00065997	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
01/16/202			\$1	10,000.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78701			
8 Principal o	ccupation / Job title (See Instructions)	9 Employer (See Instructions	\$)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/16/202			(\$1,000.00
	Contributor address; City; State; Zip Code		1	
	Austin, TX 78701	1		
Principal o	ccupation / Job title (See Instructions)	Employer (See Instructions	\$)	
Date)	Amount of Contribution (\$)	
04/15/202			\$	\$2,000.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75201			
Principal or	ccupation / Job title (See Instructions)	Employer (See Instructions		
Fillopa o)	
Deta		<u> </u>	Amount of Contribution (ft)	
Date 03/04/202	4 LYONDELL CHEMICAL COMPANY PAC)	Amount of Contribution (\$)	\$1,000.00
03/04/202				Φ1,000.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77010			
Principal o	cupation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)	
			,	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
01/16/202		/		\$1,000.00
			4	
	Austin, TX 78701			
Principal o	cupation / Job title (See Instructions)	Employer (See Instructions	\$)	

SCHEDULE	A1
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The In	struction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 4/7 Rpt: 8/90	
2 FILER N	AME	3	Filer ID (Ethics Commissio	on Filers)
	for Charles Schwertner		00065997	
4 Date	5 Full name of contributor X out-of-state PAC (ID#: C00225	<u>5342</u>) 7	Amount of Contribution (\$)	
01/18/2	— —			\$5,000.00
	6 Contributor address; City; State; Zip Code			
	Richmond, VA 23219			
8 Principal	occupation / Job title (See Instructions) 9 En	nployer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:	, I	Amount of Contribution (\$)	
01/16/2)		\$500.00
				Φ000.00
	Contributor address; City; State; Zip Code			
	Cranford, NJ 07016			
Principa	occupation / Job title (See Instructions) En	nployer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/18/2	024 NRG Energy Inc Political Action Committee			\$5,000.00
	Contributor address; City; State; Zip Code			
D i voin e	Princeton, NJ 08540			
Principai	occupation / Job title (See Instructions) En	nployer (See Instructions)		
Date	Full name of contributor X out-of-state PAC (ID#: <u>C00420</u>	0950)	Amount of Contribution (\$)	
02/28/2				\$1,500.00
	Contributor address; City; State; Zip Code			
L	Irving, TX 75038			
Principal	occupation / Job title (See Instructions) En	nployer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
05/31/2	024 Political Action Committee of the Independent Insuran	ice Agents of Texas		\$2,500.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78768			
Princina		nployer (See Instructions)		
Гшыра				
<u> </u>				

MONET	ARY POLITICAL CONTRIBUT	SCHEDULE A1	
The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A1: Sch: 5/7 Rpt: 9/90
2 FILER NAME Texans for C	Charles Schwertner		3 Filer ID (Ethics Commission Filers) 00065997
4 Date 01/16/2024	 Full name of contributor out-of-state PAC (IE Southwestern Committee on Political Education Contributor address; City; State; Zip Code 	7 Amount of Contribution (\$) \$1,000.00	
	Amarillo, TX 79101		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)
Date 06/29/2024	Full name of contributor out-of-state PAC (IE TSAPAC Contributor address; City; State; Zip Code)#:)	Amount of Contribution (\$) \$5,000.00
Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)
Date 02/28/2024	Full name of contributorout-of-state PAC (IE Texas Consumers Lenders PAC Contributor address; City; State; Zip Code Arlington, TX 76010		Amount of Contribution (\$) \$5,000.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
Date 05/31/2024	Full name of contributor out-of-state PAC (IE Texas Manufactured Housing Assn. Committ Contributor address; City; State; Zip Code Austin, TX 78759	ee for Responsible	Amount of Contribution (\$) \$2,500.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
Date 02/28/2024	Full name of contributor out-of-state PAC (IE The US Oncology Network PAC Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$5,000.00
Principal occu	The Woodlands, TX 77380 pation / Job title (See Instructions)	Employer (See Instructions)

SCHEDULE A1

		·					
	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/7 Rpt: 10/90	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		Charles Schwertner				00065997	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	05/31/2024	Thomas, Clifton					\$3,000.00
		6 Contributor address; City; S	State; Zip Code		1		
		Victoria, TX 77901					
8		pation / Job title (See Instructions	s)	9 Employer (See Instructions	5)		
	CEO			C. L. Thomas, Inc.			
	Date	Full name of contributor	X out-of-state PAC (ID#:	C00064766)		Amount of Contribution (\$)	
	03/04/2024	UPSPAC					\$5,000.00
		Contributor address; City; S			1		
		Atlanta, GA 30328					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	03/06/2024	USAA Employee Political	Action Committee				\$2,000.00
		Contributor address; City; S	tate; Zip Code				
		San Antonio, TX 78288					
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_			Amount of Contribution (\$)	_
	01/16/2024	Union Pacific Corporation		vernment			\$1,500.00
		Contributor address; City; S					
		Washington, DC 20005	<u> </u>		Ĺ		
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	+
	01/16/2024	Waste Management Emp	-	nent Fund			\$2,500.00
		Contributor address; City; S	tate; Zip Code				
		Washington, DC 20004					
	Dringing occu	_	~	Employer (See Instructions	<u> </u>		
	Phincipai occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 7/7 Rpt: 11/90
2 FILER NAME Texans for Charles Schwertner	3 Filer ID (Ethics Commission Filers) 00065997
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 03/04/2024 Zachry Corporation Political Action Committee 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$)\$2,500.00
San Antonio, TX 78265 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing 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)								
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)								
	Sch: 1/22 Rpt: 12/90	Texans for Charles Schwertner	00065997								
4	Date 01/24/2024	Payee name Amazon									
6	Amount (\$) \$310.00	Payee address; City; State; Zip Code PO Box 81226 Seattle, WA 98108									
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense gift for district staff.								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	01/30/2024	AppFolio, Inc.									
	Amount (\$) \$2.49	Payee address; City; State; Zip Code 70 Castilian Dr. Goleta, CA 93117									
	PURPOSE OF EXPENDITURE	Check if Austin Online proces	outside of Texas. Complete Schedule T. , TX, officeholder living expense ssing fee for property management ustin apartment.								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	05/30/2024	AppFolio, Inc.									
	Amount (\$) \$2.49	Payee address;City;State; Zip Code70 Castilian Dr.									
		Goleta, CA 93117									
	PURPOSE OF EXPENDITURE	Check if Austin Online proces	outside of Texas. Complete Schedule T. , TX, officeholder living expense ssing fee for property management ustin apartment.								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	Off Po bense Pri Sa	nse es/Contract Labor	ad/Rental Expense Transportation Equipment & Related Expense ie Travel in District se Travel Out of District s/Contract Labor OTHER (enter a category not listed above)						
1	Total pages Schedule F1:						3	Filer ID	(Ethics Commission Filers)			
-	Sch: 2/22 Rpt: 13/90		s for Charles Schwertne	er				00065997				
4	Date	Payee	name									
	01/02/2024	AppFo	lio, Inc.									
6	Amount (\$) \$2.49		address; City; stilian Dr. , CA 93117	State; Z	p Code							
8	PURPOSE OF EXPENDITURE	a) Catego Fees	Y (See Categories listed at the to	op of this schedule	_{e)} (b	Description Check if travel X Check if Austin			plete Schedule T. g expense			
							ssir	ng fee for pro	operty management			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidat	e/Officeholder name	Offic	e sough			Office he	eld			
	Date	Payee I	name									
	04/01/2024	AppFo	lio, Inc.									
	Amount (\$) \$2.49		address; City; stilian Dr.	State; Z	p Code							
		Goleta	, CA 93117									
	PURPOSE OF EXPENDITURE	a) Catego Fees	Y (See Categories listed at the t	op of this schedule	₂₎ (b	X Check if Austin	, тх, ssir	officeholder living	operty management			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H						Office held				
	Date	Payee	name									
	03/01/2024		lio, Inc.									
	Amount (\$) \$2.49		address; City; stilian Dr.	State; Z	p Code							
		Goleta	, CA 93117									
	PURPOSE OF EXPENDITURE	a) Catego Fees	Y (See Categories listed at the t	op of this schedule	²⁾ (b	X Check if Austin	, тх, ssir	officeholder living	operty management			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidat	e/Officeholder name	Offic	e sough	:		Office he	eld			

				EXPENDITU	IRE CATEGOI	RIES FOR	во	X 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Expe Gift/Awards/Memoria Legal Services	als Expense	Office Over Polling Exp Printing Ex Salaries/W	rhead pense pense ages/	e Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
_		-		The Instruction	Guide explains	how to cor	npie	te this form.	<u> </u>			
1	Total pages Schedule F1: Sch: 3/22 Rpt: 14/90			≡ Charles Schwe	ertner				3	Filer ID 00065997	(Ethics Commission Filers)	
4	Date	5	Payee name									
	04/30/2024											
6 Amount (\$) \$2.49 7 Payee address; City; State; Zip Code 70 Castilian Dr. Goleta, CA 93117												
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description 									expense operty management			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	(Office sou	ght			Office he	eld	
	Date		Payee name									
	04/09/2024		Austin Ene	rgy								
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$31.45		721 Barton	Springs Road								
			Fifth Floor									
			Austin, TX	78704								
	PURPOSE OF EXPENDITURE			ee Categories listed a 'head/Rental E		nedule)		Description Check if travel o Check if Austin, Check if Austin, Utilities for off	, TX,		expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H						Office held				
	Date		Payee name									
	01/09/2024		Austin Ene	rgy								
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$60.50		721 Barton	Springs Road								
			Fifth Floor									
			Austin, TX	78704								
	PURPOSE OF EXPENDITURE			ee Categories listed a head/Rental E		nedule)			, тх,	de of Texas. Com officeholder living holder Austi	expense	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	C	Office sou	ght			Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense bornitite 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)								
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)								
	Sch: 4/22 Rpt: 15/90	Texans for Charles Schwertner	00065997								
4	Date 02/12/2024	Payee name Austin Energy									
6	Amount (\$) \$61.55	Payee address; City; State; Zip Code 721 Barton Springs Road Fifth Floor Austin, TX 78704									
8	PURPOSE OF EXPENDITURE	Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense ificeholder Austin apartment								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	03/12/2024	Austin Energy									
	Amount (\$) \$67.74	Payee address; City; State; Zip Code 721 Barton Springs Road Fifth Floor Austin, TX 78704									
	PURPOSE OF EXPENDITURE	Check if Austir	outside of Texas. Complete Schedule T. h, TX, officeholder living expense fficeholder Austin apartment								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	05/10/2024	Austin Energy									
	Amount (\$) \$32.36	Payee address; City; State; Zip Code 721 Barton Springs Road Fifth Floor Austin, TX 78704									
	PURPOSE OF EXPENDITURE	X Check if Austir	outside of Texas. Complete Schedule T. h, TX, officeholder living expense fficeholder Austin apartment								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explai	Office Ove Polling Ex Printing E Salaries/V	erhea (pens) (xpens) Vages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2			•		3	Filer ID (Ethics Commission Filers)				
	Sch: 5/22 Rpt: 16/90		Texans for Charles Schwertner					00065997				
4	Date 06/10/2024		Payee name Austin Energy									
6 Amount (\$) 7 Payee address; City; State; Zip Code \$32.36 721 Barton Springs Road Fifth Floor Austin, TX 78704												
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Office Overhead/Rental Expense	schedule)	(b)	X Check if Austin	, TX,	ide of Texas. Complete Schedule T. , officeholder living expense eholder Austin apartment				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held				
	Date		Payee name									
	03/12/2024		Bastrop County Conservatives									
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	ode							
	\$1,000.00		906 Main Street									
			P.O. Box 157									
			Bastrop, TX 78602									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Gift/Awards/Memorials Expense	schedule)	(b)	Check if Austin	, TX,	ide of Texas. Complete Schedule T. , officeholder living expense Conservatives Gala Table Sponsor				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held				
	Date		Payee name									
	02/29/2024		Beckendorf, Micheal (Mr.)									
	Amount (\$) \$150.00		Payee address; City; Sta 2509 River Forest Dr	ate; Zip Co	ode							
			Bryan, TX 77802									
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Salaries/Wages/Contract Labor	schedule)	(b)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense Campaign.				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held				

			EXPENDI	TURE CATEGOR	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage E Gift/Awards/Mem nmittee Legal Services	Expense	Loan Repay Office Over Polling Exp Printing Exp Salaries/Wa	rment/Reimbursement head/Rental Expense ense jense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 6/22 Rpt: 17/90		Texans for Charles Sch	wertner				00065997	
4	Date 01/22/2024		Payee name Bennett, Andrew (Mr.)						
6	Amount (\$)	7	Payee address; City;	State;	; Zip Cod	le			
	\$6,000.00		1507 Elton Lane						
			Unit A						
			Austin, TX 78703						
_					<u> </u>	· · · · ·			
8	PURPOSE OF		Category (See Categories liste		edule)	(b) Description	itei	to of Toyon Com	Cabadula T
	EXPENDITURE		Salaries/Wages/Contrac	st Labor				de of Texas. Comp officeholder living	
						Contract labo			
								,	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder nam	e C	Dffice soug	ht		Office he	ld
	Date		Payee name						
	02/21/2024		Browning, Jessica (Ms.))					
	Amount (\$)	⊢	Payee address; City;	State;	; Zip Cod	le			
	\$2,500.00		1205 W Elm St	-	1-				
	+=,000		1200 11 2 2.						
			Austin, TX 78703						
	PURPOSE OF EXPENDITURE		Category (See Categories liste Salaries/Wages/Contrac		edule)		ı, TX,	de of Texas. Comp , officeholder living Dr campaign	expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder nam	ne O	Office held				
	Date	Γ	Payee name						
	02/01/2024	I	Bryan Noon Lions Club						
	Amount (\$)		Payee address; City;	State:	; Zip Cod				
	\$500.00		3708 East 29th Street	Juic,		ie			
	φουυ.υυ								
			PMB 218						
			Bryan, TX 77802						
	PURPOSE	(a)	Category (See Categories liste	d at the top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Contributions/Donations					de of Texas. Comp	
			Candidate/Officeholder/	Political Comm	ittee			officeholder living	
						Celebration.	srya	an Noon Lior	ns Club for 100th Year
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder nam	e O	Office soug	ht		Office he	ld

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

		E	EXPENDITURE CATEGO	RIES FOR	BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Food Gift/ ommittee Lega	nt Expense ////Beverage Expense //wards/Memorials Expense al Services P Instruction Guide explains	Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
_	Tatal warman Oak adula E4									
1	Total pages Schedule F1: Sch: 7/22 Rpt: 18/90		rles Schwertner			3 Filer ID (Ethics Commission Filers) 00065997 00065997				
4	Date 06/26/2024	Payee name	Station Chamber of Co	mmorco						
_										
6	Amount (\$)	Payee address;		e; Zip Coo	de					
	\$325.00	1733 Briarcrest	. Dr							
		Suite 200								
		Bryan, TX 7780)2							
8	PURPOSE OF) Category (See Ca	tegories listed at the top of this sch	hedule)	(b) Description					
	EXPENDITURE	Fees				outside of Texas. Complete Schedule T. , TX, officeholder living expense				
						Commerce member dues.				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeh	older name	Office soug	ght	Office held				
	Date	Payee name								
	06/26/2024	Bryan/College	Station Chamber of Co	mmerce						
	Amount (\$)	Payee address;	City; State	; Zip Coo	de					
	\$200.00	1733 Briarcrest								
		Suite 200								
		Bryan, TX 7780	12							
_	DUDDOCE	-			(h) = 1 + 1					
	PURPOSE OF		tegories listed at the top of this sch Donations Made By	hedule)	(b) Description	outside of Texas. Complete Schedule T.				
	EXPENDITURE		ceholder/Political Comn	nittee		, TX, officeholder living expense				
					Chamber of (Commerce golf sponsorship.				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeh	older name	Office sou	ght	Office held				
	Date	Payee name								
	03/25/2024	Department of	the Treasury, IRS							
	Amount (\$)	Payee address;	City; State	; Zip Coo	de					
	\$30,075.00	P.O. Box 80250	01							
		Cincinnati, OH	45280							
	PURPOSE OF	•	tegories listed at the top of this sch	hedule)	(b) Description					
	EXPENDITURE	Fees				outside of Texas. Complete Schedule T. , TX, officeholder living expense				
					Tax payment					
-	Complete ONLY if direct	Candidate/Officeh	older name	Office soug	aht	Office held				
	expenditure to benefit C/Oł	- s. la		2	y					
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	nmittee	Event Expense Fees Food/Beverage I Gift/Awards/Men Legal Services	Expense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)	
	Sch: 8/22 Rpt: 19/90		Texans for C	Charles Sch	wertner				00065997		
4	Date	5	Payee name								
	04/03/2024		Fromme, Ka	roline (Ms.))						
6	Amount (\$)	7	Payee addres	s; City;	State	; Zip Co	de				
	\$300.00		2814 Oak S	prings Dr							
			#A								
			Austin, TX 7	8702							
8	PURPOSE	(a)			ed at the top of this sch	a dula)	(b) Description				
-	OF		Salaries/Wa			iedule)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE			5					officeholder living		
							Contract labo	or fo	or campaign	activities.	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder nam	ne (Office sou	jht		Office he	eld	
	Date		Payee name								
	03/26/2024		Georgetown	YMCA							
	Amount (\$)		Payee addres	s; City;	State	; Zip Co	de				
	\$1,000.00		3010 Willian	ns Dr.							
			Suit 210								
			Georgetown	, TX 78628							
	PURPOSE	(a)	Category (Se	e Categories list	ed at the top of this sch	edule)	(b) Description				
	OF EXPENDITURE		Contribution						de of Texas. Com	•	
			Candidate/C	Officeholder	Political Comm	hittee			officeholder living	•	
							Georgetown	TIVI	ICA Gaia Dii		
	Complete ONLY if direct		Candidate/Offic	eholder nan	1e (Dffice sou	nht		Office he	h	
	expenditure to benefit C/Oł						jiit		enice ne		
_	Date	Г	Payee name								
	02/08/2024		Madison Ch	amber of C	ommerce						
	Amount (\$)		Payee addres			; Zip Co	10				
	\$420.00		113 W Trinit		Sidie	, zip co					
	φ 1 20.00		110 W IIIIII	y St							
			Madisonville	e, TX 77864							
	PURPOSE OF	(a)			ed at the top of this sch	edule)	(b) Description				
	EXPENDITURE		Contribution		s Made By /Political Comm				de of Texas. Com officeholder living	•	
			Canuluale/C	mcenoiuer		iiilee				erce annual dinner.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder nam	ne C	Dffice sou	Jht		Office he	eld	

				EXPENDIT	URE CATEGO	RIES FOF	BC	DX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Gift/Awards/Memorials Expense Polling Expense Travel in District Travel of District Travel of District							quipment	& Related Expense		
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics	Commission Filers)
	Sch: 9/22 Rpt: 20/90			Charles Schw	vertner					00065997	,	
4	Date	5	Payee name									
	01/24/2024		Raconteur N	ledia Compa	any							
6	Amount (\$)	7	Payee addres	s; City;	State	; Zip Co	de					
	\$2,475.90		PO Box 265	11								
			Austin, TX 7	8755								
_	51155005						<u> </u>					
8	PURPOSE OF	(a)			at the top of this sch	nedule)	(b)	Description	outoi	de efterres Cam	nlata Caba	adulo T
	EXPENDITURE		Advertising	≤xpense						de of Texas. Com officeholder living		cuule 1.
												nedia and graphic
								design suppo				ioura arra graprilo
9	Complete ONLY if direct		Candidate/Offic	eholder name		Office sou	thr			Office he		
5	expenditure to benefit C/O		candidate/Offic			Onice Sou	Jin			Once he	siu	
	Date		Payee name									
	02/16/2024		Raconteur N	ledia Compa	any							
	Amount (\$)		Payee addres	s; City;	State	; Zip Co	de					
	\$500.00		PO Box 265			•						
	+000100											
			Austin, TX 7	8755								
	PURPOSE	(a)	Category (Se	e Categories listed	at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Advertising	Expense						de of Texas. Com		edule T.
										officeholder living		
								design suppo		II Services, s	social m	nedia and graphic
								doolgii ouppo				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	e (Office sou	ght			Office he	eld	
	Date		Payee name									
	03/12/2024		Raconteur N	ledia Compa	any							
	Amount (\$)		Payee addres	s; City;	State	; Zip Co	de					
	\$151.80		PO Box 265	11								
			Austin, TX 7	8755								
	PURPOSE OF	(a)			at the top of this sch	nedule)	(b)	Description				
	EXPENDITURE		Advertising	Expense						de of Texas. Com		edule T.
										officeholder living		adia and graphia
								design suppo		ii services, s	ocial fi	nedia and graphic
								see.gri suppe				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	e (Office sou	ght			Office he	eld	
	experiatione to benefit C/Of											

			EXPEN	DITURE CATEGOR	RIES FOR	во	X 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee Legal Services	e Expense emorials Expense	Office Over Polling Exp Printing Exp Salaries/Wa	head ense pense ages/	e Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 10/22 Rpt: 21/90		Texans for Charles So	hwertner					00065997	
4	Date	5	Payee name							
	02/22/2024		Ragnar Research Par	tners LLC						
6	Amount (\$)	7	Payee address; City	State;	Zip Coo	de				
	\$37,000.00		1005 Congress Ave							
			Suite 460							
			Austin, TX 78701							
8	PURPOSE	(a)	Category (See Categories lis	sted at the top of this sch	edule)	(b)	Description			
	OF	[``	Advertising Expense		cuuic)			outsi	de of Texas. Comp	blete Schedule T.
	EXPENDITURE		5 .						officeholder living	
							Campaign res	sea	rch and com	nmunications.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder na	me C	Office soug	ght			Office he	ld
	Date		Payee name							
	01/17/2024		Raymond James Fina	ncial Services Ac	dvisors, li	nc				
	Amount (\$)		Payee address; City	State;	Zip Coo	de				
	\$2,481.75		1905 Loop 332							
			St. Petersburg, FL 337	716						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories li: Fees	sted at the top of this sch	edule)			, тх,	de of Texas. Comp officeholder living g investmen	expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder na	Office soug	ght Office held					
	Date		Payee name							
	04/17/2024		Raymond James Fina	ncial Services Ac	dvisors, lı	nc				
	Amount (\$)		Payee address; City	State;	Zip Coo	de				
	\$2,515.50		1905 Loop 332							
			St. Petersburg, FL 337	716						
	PURPOSE OF	(a)		sted at the top of this sch	edule)	(b)	Description			
	EXPENDITURE		Fees						de of Texas. Comp officeholder living	
						1	Fee for mana			
								- <u>-</u>	3	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder na	me C	Office soug	ght			Office he	ld
⊢										

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	rhead bense pens ages	e /Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 11/22 Rpt: 22/90		Texans for Charles Schwertner					00065997
4	Date 03/18/2024	5	Payee name Republican Party of Brazos County					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de			
-	\$2,500.00		1640 Briarcrest Dr					
	+_,000.00		APT 122					
			Bryan, TX 77802					
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	OF EXPENDITURE		Contributions/Donations Made By					ide of Texas. Complete Schedule T.
			Candidate/Officeholder/Political Commi	ittee				, officeholder living expense
						table sponsor		ty of Brazos County Reagan Dinner
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ght			Office held
	Date		Payee name					
	05/20/2024		Sprague, Alexander (Mr.)					
_	Amount (\$)	┝		Zip Co	de			
	\$300.00		3023 Festus Dr	210 000	uc			
	\$300.00		SUZS FESIUS DI					
			Austin, TX 78748					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	OF EXPENDITURE		Salaries/Wages/Contract Labor					ide of Texas. Complete Schedule T.
								, officeholder living expense
						Contract labo	or io	or campaign activities.
	Operation ONITY if all a st		And the second					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	gnt			Office held
		_						
	Date		Payee name					
	04/24/2024		TCI Showroom					
	Amount (\$)		, , , , , , , , , , , , , , , , , , ,	Zip Co	de			
	\$44.39		8801 S 1st St					
			Unit 100					
			Austin, TX 78748					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	OF EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T.
	EXPENDITORE							, officeholder living expense
						TDCJ Padfoli	10S	for Officeholder.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name O	ffice sou	ght			Office held
		•						

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explain	Office Ov Polling Ex Printing E Salaries/	verhea xpens Expens Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	· · · · ·				3	Filer ID (Ethics Commission Filers)
1	Sch: 12/22 Rpt: 23/90	[Texans for Charles Schwertner				ľ	00065997
4	Date	5						
4	02/15/2024		Payee name Texas Department of Criminal Justic	е				
6	Amount (\$)	7	Payee address; City; Sta	te; Zip Co	ode			
	\$9.28		2 Financial Plaza					
			Huntsville, TX 77340					
8	PURPOSE	(a)	Category (See Categories listed at the top of this	cohodulo)	(b)	Description		
-	OF		Office Overhead/Rental Expense	schedule)			outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE					Check if Austin	, TX,	, officeholder living expense
						TDCJ Padfol	ios	for Officeholder.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	02/07/2024		Texas Department of Criminal Justic	е				
	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode			
	\$259.80		2 Financial Plaza	· •				
			Huntsville, TX 77340					
	PURPOSE OF		Category (See Categories listed at the top of this	schedule)	(b)	Description		
	EXPENDITURE		Gift/Awards/Memorials Expense					ide of Texas. Complete Schedule T. , officeholder living expense
								Rhinestones on the River Gala for
						Bastrop		
	Complete ONLY if direct		candidate/Officeholder name	Office sou	Indht			Office held
	expenditure to benefit C/Oł			Chiec Sol	agin			
_	Data	-						
	Date 03/13/2024		Payee name	•				
			Texas Department of Criminal Justic					
	Amount (\$)			te; Zip Co	ode			
	\$742.60		2 Financial Plaza					
			Huntsville, TX 77340					
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description		
	OF EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T.
								, officeholder living expense
						TDCJ Padfoli	10S	TOT UTTICE.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught			Office held

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)
1	Sch: 13/22 Rpt: 24/90	Texans for Charles Schwertner	00065997
4	Date 03/09/2024	Payee name Texas Senate	
6	Amount (\$) \$22.25	Payee address; City; State; Zip Code PO Box 12068 Austin, TX 78711	
8	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	outside of Texas. Complete Schedule T. TX, officeholder living expense for Robertson County GOP Auction Item
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	04/18/2024	Texas Senate	
	Amount (\$) \$22.25	Payee address; City; State; Zip Code PO Box 12068	
	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	outside of Texas. Complete Schedule T. TX, officeholder living expense for the Brazos County GOP Auction
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	04/18/2024	Texas Senate	
	Amount (\$) \$22.25	Payee address; City; State; Zip Code PO Box 12068	
		Austin, TX 78711	
	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	outside of Texas. Complete Schedule T. . TX, officeholder living expense for the Bastrop County Conservatives
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbu Fees Office Overhead/Rental E Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract The Instruction Guide explains how to complete this f	xpense Transportation Equipment & Related Expense Travel in District Travel Out of District Labor OTHER (enter a category not listed above)					
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)					
-	Sch: 14/22 Rpt: 25/90	Texans for Charles Schwertner	00065997					
4	Date 01/31/2024	Payee name Texas Senate						
6	Amount (\$) \$50.00	Payee address; City; State; Zip Code PO Box 12068 Austin, TX 78711						
8	PURPOSE OF EXPENDITURE		otion ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense Senate Media Photo Rights					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	05/16/2024	Texas Senate						
	Amount (\$) \$22.25	Payee address; City; State; Zip Code PO Box 12068 Austin, TX 78711						
	PURPOSE OF EXPENDITURE		otion :k if travel outside of Texas. Complete Schedule T. :k if Austin, TX, officeholder living expense Or district event.					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	05/16/2024	Texas Senate						
	Amount (\$) \$22.25	Payee address; City; State; Zip Code PO Box 12068						
		Austin, TX 78711						
	PURPOSE OF EXPENDITURE	Che	otion ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense or district event.					
ļ	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Lab	ense bor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2					2	Filer ID	(Ethics Commission Filers)
-	Sch: 15/22 Rpt: 26/90		Texans for Charles Schwertner					00065997	(
4	Date	5	Payee name						
	05/16/2024		Texas Senate						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
	\$22.25		PO Box 12068						
			Austin, TX 78711						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Descriptio	on			
	OF EXPENDITURE		Contributions/Donations Made By	,			ıtsid	le of Texas. Com	plete Schedule T.
	EXPENDITORE		Candidate/Officeholder/Political Comm	ittee				officeholder living	
					Flag for	waike	r C	County distr	ict event.
								011	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght			Office he	ad
	Date		Payee name						
	05/16/2024		Texas Senate						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$22.25		PO Box 12068						
			Austin, TX 78711						
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) Description				alata Cabadula T
	EXPENDITURE		Gift/Awards/Memorials Expense					officeholder living	plete Schedule T.
								ill Ranch gi	
						,			
	Complete ONLY if direct	<u>с</u>	Candidate/Officeholder name C)ffice sou	ght			Office he	eld
	expenditure to benefit C/OF	Н							
-	Date		Pavee name						
	05/07/2024		The Bryan-College Station Eagle						
	Amount (\$)			Zip Co	de				
	\$607.90		1729 Briarcrest Drive						
			Bryan, TX 77802						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Office Overhead/Rental Expense						plete Schedule T.
								officeholder living	
					DISTRICT	vewsp	aμ	er subscrip	uun
	Complete ONIL V if direct	Ľ	andidate/Officeholder some)ffice carry	ht.				Nd
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Juit			Office he	tiu (

			EXPENDITURE CATE	GORIES FO	R B	OX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide expla	Office Ov Polling E Printing E Salaries/	verhea xpens Expens Wage	se s/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 16/22 Rpt: 27/90		Texans for Charles Schwertner					00065997	
4	Date	5	Payee name						
-	04/24/2024		Twelve Rivers Property Manageme	ent					
6	Amount (\$)	7	Payee address; City; S	tate; Zip C	ode				
	\$3,000.00		700 Rio Grande						
			SUITE 200						
			Austin, TX 78701						
8	PURPOSE	(a)	Category (See Categories listed at the top of th	ic cohodulo)	(b)	Description			
	OF	Ľ	Office Overhead/Rental Expense	is scriedule)	Ľ		outsi	de of Texas. Comp	plete Schedule T.
	EXPENDITURE					X Check if Austin			
							ehc	older Austin a	apartment for Legislative
						work			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ught			Office he	ld
	Date		Payee name						
	04/30/2024		Twelve Rivers Property Manageme	ent					
	Amount (\$)		Payee address; City; S	tate; Zip C	ode				
	\$3,000.00		700 Rio Grande	·					
			SUITE 200						
			Austin, TX 78701						
L	DUDDOCE				(4)				
	PURPOSE OF	(a)	Category (See Categories listed at the top of th Office Overhead/Rental Expense	is schedule)	(0)	Description	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE		Once Overneau/Rental Expense			X Check if Austin			
						Rent for office	ehc	older Austin a	apartment for Legislative
						work			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ught			Office he	ld
⊨	Data	_							
	Date 01/30/2024		Payee name Twelve Rivers Property Manageme	ant					
					! -				
	Amount (\$)		, , , , , , , , , , , , , , , , , , ,	tate; Zip C	ode				
	\$3,000.00		700 Rio Grande						
			SUITE 200						
			Austin, TX 78701		_				
	PURPOSE	(a)	Category (See Categories listed at the top of th	is schedule)	(b)	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Comp	
						Check if Austin			apartment for Legislative
						work	CIIC		apartment for Legislative
_	Complete ONLY if direct	Ľ	Candidate/Officeholder name	Office co				Office he	ld
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			Office sou	uynt			Unice he	iu I
_									

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	erhea pense kpens /ages	se s/Contract Labor		Travel in District Travel Out of Distric	ipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 17/22 Rpt: 28/90		Texans for Charles Schwertner					00065997	, ,
4	Date	5	Payee name						
	01/02/2024		Twelve Rivers Property Management						
6	Amount (\$)	7	Payee address; City; State;	; Zip Co	de				
	\$3,000.00		700 Rio Grande						
			SUITE 200						
			Austin, TX 78701						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	adula)	(b)	Description			
	OF		Office Overhead/Rental Expense	ieuuie)	()		outsi	de of Texas. Comple	ete Schedule T.
	EXPENDITURE					X Check if Austin	, TX,	officeholder living ex	kpense
						Rent for office work	ehc	older Austin ap	partment for Legislative
9	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	aht			Office held	1
Ľ	expenditure to benefit C/O				giit			Office field	
	Date		Payee name						
	04/01/2024		Twelve Rivers Property Management						
	Amount (\$)		Payee address; City; State;	; Zip Co	de				
	\$3,000.00		700 Rio Grande						
			SUITE 200						
			Austin, TX 78701						
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense	,				de of Texas. Comple	
	EXPENDITORE							officeholder living ex	
						Rent for office work	ehc	older Austin ap	partment for Legislative
_	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	aht			Office held	1
	expenditure to benefit C/Oł				5				
F	Date		Payee name						
	05/30/2024		Twelve Rivers Property Management						
	Amount (\$)		Payee address; City; State;	; Zip Co	de				
	\$3,000.00		700 Rio Grande						
			SUITE 200						
			Austin, TX 78701						
_	PURPOSE				(h)	Description			
	OF	(a)	Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	iedule)	(u)	Description	outsi	de of Texas. Comple	te Schedule T.
	EXPENDITURE		Once Overhead/Rental Expense					officeholder living ex	
						Rent for office	ehc	older Austin ap	partment for Legislative
						work			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	ght			Office held	1
		•							

			EXPENDITURE CATEGOR	RIES FOR	в	DX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	rhead bense pens ages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 18/22 Rpt: 29/90		Texans for Charles Schwertner					00065997
4	Date	5	Payee name					
	03/01/2024		Twelve Rivers Property Management					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de			
	\$3,000.00		700 Rio Grande					
			SUITE 200					
			Austin, TX 78701					
8	PURPOSE	(a)			(h)	Description		
ľ	OF	(")	Category (See Categories listed at the top of this sche Office Overhead/Rental Expense	edule)	()		outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE					X Check if Austin	, TX,	, officeholder living expense
						Rent for office work	eho	older Austin apartment for Legislative
_								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	gnt			Office held
	Date		Payee name					
	01/05/2024		USAA Visa Credit Card					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$5,000.00		10750 McDermott Freeway					
			San Antonio, TX 78288					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Credit Card Payment	edule)	(b)	Check if Austin	, тх, red	ide of Texas. Complete Schedule T. , officeholder living expense dit card statement for expenses
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Dffice sou	ght			Office held
	Data	_						
	Date 05/22/2024		Payee name USAA Visa Credit Card					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$2,779.61		10750 McDermott Freeway	·				
			San Antonio, TX 78288					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Credit Card Payment	edule)	(b)	Check if Austin	, тх, red	ide of Texas. Complete Schedule T. , officeholder living expense dit card statement for expenses
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Dffice sou	ght			Office held

			EXPENDITURE (CATEGOR	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp mittee Legal Services The Instruction Guide		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor	nt e	Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 19/22 Rpt: 30/90		Texans for Charles Schwertne	er				00065997	
4	Date 02/28/2024		Payee name USAA Visa Credit Card						
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	de			
	\$9,660.91		10750 McDermott Freeway San Antonio, TX 78288						
8	PURPOSE				r	(b) Description			
0	OF		Category (See Categories listed at the to Credit Card Payment	op of this sch	iedule)	Check if Au	stin, TX	side of Texas. Com K, officeholder living dit card state	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	Jht		Office he	eld
	Date		Payee name						
	04/17/2024		USAA Visa Credit Card						
	Amount (\$)		Payee address; City;	State;	; Zip Co	de			
	\$1,450.30		10750 McDermott Freeway San Antonio, TX 78288						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the to Credit Card Payment	op of this sch	iedule)	Check if Au	stin, TX	side of Texas. Com (, officeholder living dit card state	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	jht		Office he	eld
	Date		Payee name						
	05/02/2024		USAA Visa Credit Card						
	Amount (\$) \$2,171.23		Payee address; City; 10750 McDermott Freeway	State;	; Zip Co	de			
			San Antonio, TX 78288						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the to Credit Card Payment	op of this sch	edule)	Check if Au	stin, TX	side of Texas. Com K, officeholder living dit card state	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	Jht		Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage E Gift/Awards/Memo Legal Services The Instructio		Office Ove Polling Ex Printing Ex Salaries/W	rhead pense pens (ages	e /Contract Labor		Travel in Distric Travel Out of Di	Equipr t istrict	ng Expense nent & Related Expense gory not listed above)
1	Total pages Schedule F1:	2	FILER NAME	-					3	Filer ID	(Et	hics Commission Filers)
	Sch: 20/22 Rpt: 31/90			Charles Sch	wertner					00065997		
4	Date	5	Payee name									
	01/10/2024		USAA Visa	Credit Card								
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de					
	\$4,376.69		10750 McD	ermott Freev	vay							
			San Antoni	o, TX 78288								
8	PURPOSE	(a)	Category (S	ee Categories liste	d at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Credit Card			ŗ				de of Texas. Con	•	
										officeholder livin		
								Payment of c reported on F		it card state	emei	nt for expenses
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	ceholder nam	e (Office sou	ght			Office h	eld	
	Date		Payee name									
	01/29/2024			Credit Card								
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$3,667.20		-	ermott Freev		, <u>Lip</u> 00	uo					
	\$3,007.20		10750 MICL	ennourreev	vay							
			San Antoni	o, TX 78288								
	PURPOSE OF	(a)			d at the top of this sch	nedule)	(b)	Description				
	EXPENDITURE		Credit Card	Payment						de of Texas. Con officeholder livin	•	
												nt for expenses
								reported on F				
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Off	ceholder nam	e (Office sou	ght			Office h	eld	
	Date		Payee name									
	06/04/2024			Credit Card								
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de					
	\$2,788.20			ermott Freev		,						
	+=,::::::::::::::::::::::::::::::::::::		2010002									
			San Antoni	o, TX 78288								
	PURPOSE OF			-	d at the top of this sch	nedule)	(b)	Description	outo:	do of Toylog Com	nnlete	Sabadula T
	EXPENDITURE		Credit Card	Payment						de of Texas. Con officeholder livin		
												nt for expenses
								reported on F				
	Complete ONLY if direct	L	andidate/Off	ceholder nam	<u>م</u> (Office sou	aht			Office h	eld	
	expenditure to benefit C/OI			CONTRACT HAIL		500 SUU	giit				Ciù	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		C C		Office Overh Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2					2	Filer ID	(Ethics Commission Filers)
-	Sch: 21/22 Rpt: 32/90		Texans for Charles Sch	wertner				00065997	
4	Date	5	Payee name						
	05/10/2024		Vacation Liberty Schoo	of Georgetowr	า				
6	Amount (\$)	7	Payee address; City;	State;	; Zip Cod	е			
	\$250.00		P.O. Box 1694						
			Georgetown, TX 78627						
_			_						
8	PURPOSE OF	(a)	Category (See Categories liste		edule)	b) Description			
	EXPENDITURE		Contributions/Donations					ide of Texas. Com , officeholder living	
			Candidate/Officeholder	Political Comm	littee			-	y School in the district.
						Donation for	vu		y School in the district.
9	Complete ONLY if direct		Candidate/Officeholder nam	e (Office soug	nt		Office he	h
Ĵ	expenditure to benefit C/OI				Shice Sough	n		Onice in	
	Date		Payee name						
	04/24/2024		Villarreal, Faith (Ms.)						
	Amount (\$)		Payee address; City;	State:	; Zip Cod	е			
	\$83.34		5521 Springdale Road						
	+00101		Apt 4304						
			•						
			Austin, TX 78723						
	PURPOSE OF	(a)	Category (See Categories liste	d at the top of this sch	edule)	b) Description			
	EXPENDITURE		Loan Repayment/Reim	oursement				ide of Texas. Com , officeholder living	
						Reimbursem		-	
						Reinbursein	CIII		
	Complete ONLY if direct		Candidate/Officeholder nam		Dffice soug	at		Office he	ald
	expenditure to benefit C/OI				Shiec Sough	it.		Onice ne	
⊨	Data	_							
	Date 02/26/2024		Payee name Walker County Republic						
	Amount (\$)		Payee address; City;	State;	; Zip Cod	e			
	\$350.00		Post Office Box 7382						
			Huntsville, TX 77342						
	PURPOSE	(a)	Category (See Categories liste	d at the top of this sch	iedule)	b) Description			
	OF EXPENDITURE		Contributions/Donations	s Made By		Check if travel	outs	ide of Texas. Com	plete Schedule T.
			Candidate/Officeholder	Political Comm	nittee			, officeholder living	
						Sponsorship	for	Walker Cou	nty Veterans dinner.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder nam	e C	Office soug	nt		Office he	eld
		_					_		

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 22/22 Rpt: 33/90	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Texans for Charles Schwertner 00065997
4	Date 031122722 Rpt. 33790	5 Payee name
	05/28/2024	Williamson County A&M Club
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code PO Box 1164
		Georgetown, TX 78627
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wilco A&M Foundation Scholarship Fish Fry Donation
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS

	The Instruc	tion Guide explains how to complete this form.	1 Total pages Schedule F3: Sch: 1/3 Rpt: 34/90
	FILER NAME Texans for Charles S	Schwertner	3 Filer ID (Ethics Commission Filers) 00065997
	Date 01/02/2024 Date 01/18/2024	 5 Name of person from whom investment is purchased Raymond James Financial Services Advisors, Inc 6 Address of person from whom investment is purchased; City 1905 Loop 332 St. Petersburg, FL 33716 7 Description of investment Purchased 1,310.500 shares of INVESCO STIT TREA 8 Amount of investment (\$) 1,310.50 Name of person from whom investment is purchased Raymond James Financial Services Advisors, Inc Address of person from whom investment is purchased; City 1905 Loop 332 	SURY PORTFOLIO INSTL CL M/M (TRPXX)
		St. Petersburg, FL 33716 Description of investment Purchased 4,029 shares of ISHARES TR IBONDS DE Amount of investment (\$) 100,031.61	C25 ETF (IBDQ)
	Date 01/18/2024	Name of person from whom investment is purchased Raymond James Financial Services Advisors, Inc Address of person from whom investment is purchased; City 1905 Loop 332	; State; Zip Code
		St. Petersburg, FL 33716 Description of investment Purchased 4,008 shares of ISHARES TR IBONDS DE Amount of investment (\$) 99,990.78	C24 ETF (IBDP)
	Date 01/18/2024	Name of person from whom investment is purchased Raymond James Financial Services Advisors, Inc Address of person from whom investment is purchased; City 1905 Loop 332	; State; Zip Code
		St. Petersburg, FL 33716 Description of investment Purchased 4,295 shares of ISHARES TR IBONDS 24 Amount of investment (\$) 99,927.47	TRM HG (IBHD)

PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS

The Instruc	tion Guide explains how to complete this form.	1 Total pages Schedule F3: Sch: 2/3 Rpt: 35/90
FILER NAME Texans for Charles S	Schwertner	3 Filer ID (Ethics Commission Filers) 00065997
Date 01/18/2024 Date 01/23/2024	 5 Name of person from whom investment is purchased Raymond James Financial Services Advisors, Inc 6 Address of person from whom investment is purchased; City 1905 Loop 332 St. Petersburg, FL 33716 7 Description of investment Purchased 4,288 shares of ISHARES TR IBONDS 25 8 Amount of investment (\$) 99,885.53 Name of person from whom investment is purchased Raymond James Financial Services Advisors, Inc 	TRM HG (IBHE)
	Address of person from whom investment is purchased; City 1905 Loop 332 St. Petersburg, FL 33716 Description of investment Purchased 2,000 shares of INVESCO WILDERHILL O Amount of investment (\$) 45,859.80	
Date 02/01/2024	Name of person from whom investment is purchased Raymond James Financial Services Advisors, Inc Address of person from whom investment is purchased; City 1905 Loop 332 St. Petersburg, FL 33716 Description of investment Purchased 1560.850 shares of INVESCO STIT TREA Amount of investment (\$) 1,560.85	
Date 03/01/2024	Name of person from whom investment is purchased Raymond James Financial Services Advisors, Inc Address of person from whom investment is purchased; City 1905 Loop 332 St. Petersburg, FL 33716 Description of investment Purchased 1461.62 shares of INVESCO STIT TREAS Amount of investment (\$) 1,461.62	

PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS

	The Instruct	ion Guide explains how to complete this form.	1 Total pages Schedule F3: Sch: 3/3 Rpt: 36/90			
	FILER NAME Texans for Charles So	chwertner	3 Filer ID (Ethics Commission Filers) 00065997			
	Date 04/08/2024	5 Name of person from whom investment is purchased Raymond James Financial Services Advisors, Inc				
		 6 Address of person from whom investment is purchased; City 1905 Loop 332 St. Petersburg, FL 33716 	y; State; Zip Code			
		 7 Description of investment Purchased 800000 shares of INVESCO STIT TREAS 8 Amount of investment (\$) 800,000.00 	URY PORTFOLIO INSTL CL M/M (TRPXX)			
	y; State; Zip Code					
		St. Petersburg, FL 33716 Description of investment Purchased 9456 shares of INVESCO SENIOR LOAN Amount of investment (\$) 199,947.12	ETF (BKLN)			
	Date	Name of person from whom investment is purchased				
	05/15/2024	Raymond James Financial Services Advisors, Inc Address of person from whom investment is purchased; City 1905 Loop 332	y; State; Zip Code			
		St. Petersburg, FL 33716				
		Description of investment Purchased 10,101 shares of INNOVATOR EQUITY D	EFINED PROTECTION			
		Amount of investment (\$) 249,859.35				
	Date	Name of person from whom investment is purchased				
	06/03/2024	Raymond James Financial Services Advisors, Inc Address of person from whom investment is purchased; City 1905 Loop 332	y; State; Zip Code			
		St. Petersburg, FL 33716 Description of investment				
		Purchased 5140.23 shares of INVESCO STIT TREAS	SURY PORTFOLIO INSTLCL M/M (TRPXX)			
		Amount of investment (\$)				

			ENDITURE CATEGOR		.,			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards	rage Expense s/Memorials Expense	Loan Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra	I Expense Tra Tra Tra	blicitation/Fundraisin ansportation Equipn avel in District avel Out of District THER (enter a categ	ient & Related I	
		The Inst	ruction Guide explains I	how to complete this	s form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Et	hics Commiss	sion Filers)
	Sch: 1/44 Rpt: 37/90	Texans for Charles	Schwertner			00065997		
4	CREDIT CARD ISSUER		ncial institution SAA	EXPENDI	= UNITEMIZED TURES D TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$15.89	(b) Date of Charge 01/02/2024	., .,	redit Card Issuer 01/05/2024	r Paid		
7	PAYEE	(a) Payee name Hill Country Springs	5		5 Frontage Ro	City,	State,	Zip Code
		(a) Catagony		Austin, TX (b) Description				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent	,	· · ·	apitol office			
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	ет.	Check if Austin, TX,	officeholder living e	xpense	
	Complete <u>ONLY</u> if direct spenditure to benefit C/OH	Candidate/Officeholder		Office sought		Office held		
	PAYMENT	(a) Amount Charged \$16.23	(b) Date of Charge 01/02/2024		redit Card Issuer 01/05/2024	r Paid		
	PAYEE	(a) Payee name Amazon		(b) Payee ad 410 Terry A Seattle, WA	ve N	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description	(b) Description Amazon prime membership for campaign purchases		ses	
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	ет.	Check if Austin, TX,	officeholder living e	xpense	
e>	Complete <u>ONLY</u> if direct penditure to benefit C/OH	Candidate/Officeholder	name C	Office sought		Office held		
	PAYMENT	(a) Amount Charged \$1,500.00	(b) Date of Charge 01/08/2024	., .,	redit Card Issue 01/10/2024	r Paid		
	PAYEE	(a) Payee name Norfleet Strategies		(b) Payee ad 504 W 12th	St	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Consulting Expense	of this schedule)	Austin, TX (b) Descriptic Campaign (ns consulting		
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	эт.	Check if Austin, TX,	officeholder living e	xpense	
e>	Complete <u>ONLY</u> if direct penditure to benefit C/OH	Candidate/Officeholder	name C	Office sought		Office held		
_	· · ·							

EXPENDITURES MADE BY CREDIT CARD

Forms provided by Texas Ethics Commission

EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards	erage Expense s/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Ex Transportation Equipment Travel in District Travel Out of District OTHER (enter a category of	& Related I		
	The Inst	ruction Guide explains h	ow to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	Commiss	sion Filers)	
Sch: 2/44 Rpt: 38/90	Texans for Charles	Schwertner		00065997			
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZE				
ISSUER	see pi	revious	EXPENDITURES CHARGED TO A CRED CARD	NT \$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss				
	\$38.84	01/08/2024	01/10/2024 01/10/2024	1			
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	GoDaddy		2155 E. GoDaddy Way				
			Tempe, AZ 85284				
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top of this schedule) Advertising Expense		Campaign Website maintenance				
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living exper	ise		
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held							
PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid							
	\$2,500.00	01/08/2024	01/10/2024 01/10/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	The Law Offices of Kevin Stewart		4303 Russell Dr				
			Austin, TX 78704				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description				
	Consulting Expense	or this schedule)	Campaign communicati	ons consulting			
X Political							
Non-Political		of Texas. Complete Schedule		FX, officeholder living exper	ise		
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss 01/10/2024 01/10/2024				
	\$12.74	01/09/2024	01/10/2024 01/10/2024	T			
PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code	
			7500 WEST HWY 29	City,	Siulo,		
	ExxonMobil		1000 WEST HWT 25				
			Liberty Hill, TX 78642				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Fuel for out of district of	ficeholder travel.			
X Political	Transportation Equipr Expense	ment and Related					
Non-Political		of Texas. Complete Schedule		TX, officeholder living exper	ise		
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held			
expenditure to benefit C/OH	<u> </u>						

EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Accounting/Banking Fees Consulting Expense Food/Beverage Expense Contributions/ Donations Made By - Gift/Awards/Memorials Expense Candidate/Officeholder/Political Committee 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 Inst	ruction Guide explains h	ow to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 3/44 Rpt: 39/90	Texans for Charles	Schwertner		00065997			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRED CARD	\$			
6 PAYMENT	(a) Amount Charged \$4.86	(b) Date of Charge 01/09/2024	(c) Date(s) Credit Card Issu 01/10/2024 01/10/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	ExxonMobil		7500 WEST HWY 29				
			Liberty Hill, TX 78642				
8 PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule) X Political		., .	(b) Description Officeholder beverage while traveling to attend campaign event				
			Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct				Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
	\$306.55	01/11/2024	01/29/2024 01/29/2024	l.			
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Roaring Fork Austin	1	701 Congress Ave				
			Austin, TX 78701				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	eholders to discuss issues			
X Political	Food/Beverage Expe						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	rX, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss 01/29/2024 01/29/2024				
	\$8.54	01/12/2024	01/29/2024 01/29/2024	•			
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Amozon		410 Terry Ave N				
	Amazon						
			Seattle, WA 98109				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	for officeholder phone			
X Political	Office Overhead/Ren		Capitol Office supplies f	or omicenoider phone.			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	rX, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held			
expenditure to benefit C/OH							

	EXPE	NDITURE CATEGOR	IES FOR BOX 10(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards	rage Expense s/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Transportation Equipm Travel in District Travel Out of District OTHER (enter a categ	ent & Related E	
	The Instr	uction Guide explains h	now to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	nics Commiss	ion Filers)
Sch: 4/44 Rpt: 40/90	Texans for Charles	Schwertner		00065997		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZ EXPENDITURES	\$		
	See pi	evious	CHARGED TO A CRE CARD	DIT		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is			
	\$82.26	01/13/2024	01/29/2024 01/29/202	24		
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			P.O. Box 5014			
	AT&T					
			Carol Stream, IL 6019	7		
8 PURPOSE OF	(a) Category		(b) Description			
	(See Categories listed at the top of Office Overhead/Rent	,	Mobile phone service	for campaign/offic	ceholder pi	urposes
X Political		i i i				
Non-Political	(C) Check if travel outside of	of Texas. Complete Schedule	T. Check if Austin	n, TX, officeholder living ex	kpense	
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is 01/29/2024 01/29/202			
	\$94.27	01/16/2024	01/23/2024 01/23/202			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Deering Forld Austin		701 Congress Ave			
	Roaring Fork Austin	I				
			Austin, TX 78701			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	of this schedule)	(b) Description Meeting with other offi	aphaldars to disa		
X Political	Food/Beverage Exper	ise			135 155065	
Non-Political	(c) Check if travel outside of Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin ffice sought	n, TX, officeholder living ex Office held	kpense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Onicendiden	name O	nice sought	Office field		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid		
	\$475.12	01/16/2024	01/29/2024 01/29/202			
	Ψ 4 73.12	01/10/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			114 W 7th St			-
	Perrys Steak House	9				
			Austin, TX 78701			
PURPOSE OF	(a) Category (See Categories listed at the top of	of this schodule)	(b) Description			
	Food/Beverage Exper		Meeting with other office	ceholders to disc	uss issues	
X Political						
Non-Political		of Texas. Complete Schedule		n, TX, officeholder living ex	kpense	
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held		
expenditure to benefit C/OH						

EXPENDITURES MADE BY CREDIT CARD

Forms provided by Texas Ethics Commission

EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Accounting/Banking				Loan Repayment/Reimbursement Office Overhead/Rental Expense Transportation Equipment & Related Expense			
Consulting Expense	Food/Beve	erage Expense	Polling Expense	Travel in District	eni a Reialeu i	Expense	
Contributions/ Donations Made By Candidate/Officeholder/Politica	l Committee Legal Serv	s/Memorials Expense rices	Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a catego	ry not listed al	oove)	
	The Inst	ruction Guide explains I	how to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	ics Commiss	sion Filers)	
Sch: 5/44 Rpt: 41/90	Texans for Charles	Schwertner		00065997			
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZ				
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CRE	\$			
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid			
	\$24.89	01/26/2024	01/29/2024 01/29/202	24			
	φ24.05	01/20/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			410 Terry Ave N		,		
	Amazon						
			Seattle, WA 98109	Seattle WA 98109			
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top of this schedule)		Capitol Office supplies, keyboard for office				
X Political	Office Overhead/Ren	tal Expense					
				n, TX, officeholder living ex	nense		
9 Complete <u>ONLY</u> if direct				Office held	penae		
expenditure to benefit C/OH			shiel bought	emee nord			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid			
	\$178.96 01/29/2024		01/29/2024 02/28/202	24			
	φ170.00	01/20/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			2155 E. GoDaddy Wa	y		-	
	GoDaddy			-			
			Tempe, AZ 85284				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Campaign Website ma	Campaign Website maintenance			
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	e T. Check if Austir	n, TX, officeholder living exp	pense		
Complete ONLY if direct	Candidate/Officeholder	name C	Diffice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid			
	\$217.97	01/29/2024	01/29/2024 02/28/202	24			
	+==						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			50 Beale Street				
	Instacart		Suite 600				
			San Fransico, CA 941	.05			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Campaign District Offi	ce supplies			
X Political	Office Overhead/Ren	lai ⊏xpense					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austir	n, TX, officeholder living ex	pense		
Complete <u>ONLY</u> if direct	Candidate/Officeholder	· · · · · · · · · · · · · · · · · · ·	Diffice sought	Office held			
expenditure to benefit C/OH			-				
	I						

EXPENDITURES	MADE BY	CREDIT	CARD
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EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Accounting/Banking Fees Consulting Expense Food/Beverage Expense Contributions/ Donations Made By - Gift/Awards/Memorials Expense Candidate/Officeholder/Political Committee Legal Services		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Transportation Equipme Travel in District Travel Out of District OTHER (enter a catego	ent & Related E	
		ruction Guide explains h	now to complete this form.			
1 Total pages Schedule F4:				3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 6/44 Rpt: 42/90	Texans for Charles	Schwertner		00065997		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CREI CARD	\$		
6 PAYMENT	(a) Amount Charged \$79.01	(b) Date of Charge 01/30/2024	(c) Date(s) Credit Card Iss 02/28/2024 02/28/202			
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
Youtube TV			1600 Amphitheatre Pk			
			Mountain View, CA 940	043		
8 PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			(b) Description TV for officeholder and	office.		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. X Check if Austin,	TX, officeholder living exp	oense	
9 Complete <u>ONLY</u> if direct	office sought	Office held				
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss			
	\$462.13	01/30/2024	02/28/2024 02/28/202	4		
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Toscafino Grill and	Bar	3001 Pablo Kisel Blvd Brownsville, TX 78526			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top	of this schedule)	Meeting with other offic	eholders to discu	iss issues	5
X Political	Food/Beverage Expe					
Non-Political		of Texas. Complete Schedule		TX, officeholder living exp	oense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name O	ffice sought	Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss			
	\$33.89	02/01/2024	02/28/2024 02/28/202	4		
PAYEE	(a) Payee name	-	(b) Payee address;	City,	State,	Zip Code
Hill Country Springs		10019 S I-35 Frontage Austin, TX 78747	Rd			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Office Overhead/Ren		Water for Capitol office			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin.	TX, officeholder living exp	oense	
Complete <u>ONLY</u> if direct	Candidate/Officeholder	· · · · · · · · · · · · · · · · · · ·	office sought	Office held		
expenditure to benefit C/OH		-				

EXPENDITURES	MADE BY	CREDIT	CARD
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EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Award	rage Expense s/Memorials Expense	Polling Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
		ruction Guide explains h	ow to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Sch: 7/44 Rpt: 43/90	Texans for Charles	Schwertner		00065997		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CRED CARD	\$		
6 PAYMENT	(a) Amount Charged \$163.93	(b) Date of Charge 02/01/2024	(c) Date(s) Credit Card Issu 02/28/2024 02/28/2024			
7 PAYEE	(a) Payee name Last Stand Brewing	1	(b) Payee address; 7601 S Congress Ave Building 6 Austin, TX 78745	City, State, Zip Code		
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description X Political Meeting with staff to discuss campaign/ office		cuss campaign/ officeholder issues				
Non-Political (c) Check if travel outside of Texas. Complete Schedule T		T. Check if Austin, T	X, officeholder living expense			
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				Office held		
PAYMENT	(a) Amount Charged \$438.33	(b) Date of Charge 02/05/2024	(c) Date(s) Credit Card IssL 02/28/2024 02/28/2024			
PAYEE	(a) Payee name HEB		(b) Payee address; 2652 LAKE AUSTIN BL Austin, TX 78703	City, State, Zip Code VD		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Capitol Office supplies, groceries.			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held		
PAYMENT	(a) Amount Charged \$100.51	(b) Date of Charge 02/06/2024	(c) Date(s) Credit Card Issu 02/28/2024 02/28/2024			
PAYEE	(a) Payee name	02/00/2024	(b) Payee address;	City, State, Zip Code		
	Spectrum		12405 Powerscourt Dr Des Peres, MO 63131			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rem		(b) Description Internet for officeholder	Austin apartment		
Non-Political		of Texas. Complete Schedule		X, officeholder living expense		
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						

EXPENDITURES MADE BY CREDIT CARD

EXPENDITURE CATEGORIES FOR BOX 10(a)								
Advertising Expense Accounting/Banking	Event Expe Fees		Office Overhead/Rental Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense				
Consulting Expense Food/Beverage Expense Contributions/ Donations Made By - Gift/Awards/Memorials Expe			Printing Expense	Travel in District Travel Out of District				
Candidate/Officeholder/Politica	5		Salaries/Wages/Contract Labor ow to complete this form.	OTHER (enter a category not listed above)				
1 Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)				
Sch: 8/44 Rpt: 44/90	Texans for Charles	Schwertner		00065997				
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZED					
ISSUER		revious	EXPENDITURES	\$				
	300 p		CHARGED TO A CREDI CARD	T				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid				
	\$3,500.00	02/06/2024	02/28/2024 02/28/2024					
	,							
7 PAYEE	(a) Payee name	l	(b) Payee address;	City, State, Zip Code				
	Norfloot Stratagios		504 W 12th St					
	Norfleet Strategies							
			Austin, TX 78701					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Campaign communication	ons consulting				
X Political	Consulting Expense		Campaign communicatio	sha consulting				
Non-Political		of Touron, Complete Cabadula		V. officeholder living overcoop				
9 Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	X, officeholder living expense Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid				
	\$467.87	02/06/2024	02/28/2024 02/28/2024					
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code				
	The Post Oak Hote	I	1600 W Loop S					
	The Fost Oak Hote							
PURPOSE OF	(a) Category		Houston, TX 77027 (b) Description					
EXPENDITURE	(See Categories listed at the top	of this schedule)	., .	aff to attend legislative meeting				
X Political	Travel Out of District							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T Check if Austin T	X, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder		ffice sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu					
	\$408.33	02/06/2024	02/28/2024 02/28/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
	The Post Oak Hote	I	1600 W Loop S					
			Houston TV 77007					
PURPOSE OF	(a) Category		Houston, TX 77027 (b) Description					
EXPENDITURE	(See Categories listed at the top	of this schedule)		aff to attend legislative meeting				
X Political	Travel Out of District			. .				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin. T	X, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder		ffice sought	Office held				
expenditure to benefit C/OH								

	Advertising Expense	EXPI Event Exp	ENDITURE CATEGOR ense	IES FOR BOX 10(a) Loan Repayment/Reimbursement	Solicitation/Fundraising	Expense		
	Accounting/Banking Consulting Expense	Fees	erage Expense	Office Overhead/Rental Expense Polling Expense	Transportation Equipme Travel in District		Expense	
	Contributions/ Donations Made B Candidate/Officeholder/Politica		Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a catego	ry not listed ab	ove)		
		The Inst	ruction Guide explains h	ow to complete this form.				
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	ion Filers)	
	Sch: 9/44 Rpt: 45/90	Texans for Charles	Schwertner		00065997			
4		Name of fina	ncial institution	5 TOTAL OF UNITEM	IIZED			
	ISSUER	see p	revious	EXPENDITURES	\$			
		F		CHARGED TO A CH CARD	REDIT			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid			
		\$408.33	02/06/2024	02/28/2024 02/28/2	2024			
		\$ 100100	02/00/2021					
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Coo	
				1600 W Loop S				
		The Post Oak Hote						
				Houston, TX 77027				
8	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Hotel room for Capit	ol staff to attend leg	islative m	eeting	
	X Political							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Au	stin, TX, officeholder living ex	oense		
9	Complete ONLY if direct	Candidate/Officeholder	r name Of	ffice sought	ice sought Office held			
e	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card				
		\$408.33	02/06/2024	02/28/2024 02/28/2	2024			
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Coo	
		The Post Oak Hote	.1	1600 W Loop S				
			•1					
⊢				Houston, TX 77027				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Hotel room for Capitol staff to attend legislative meeting				
	X Political	Travel Out of District						
⊢	Non-Political		of Texas. Complete Schedule					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Onice neid			
È	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid			
				02/28/2024 02/28/2				
		\$12.99	02/06/2024					
_	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Coo	
				1600 W Loop S	Oity,	Oluie,	210 000	
		The Post Oak Hotel		1000 W 2000 0				
				Houston, TX 77027				
F	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Hotel room for Capit	ol staff to attend leg	islative m	eeting	
	X Political	Travel Out of District						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Au	stin, TX, officeholder living ex	oense		
⊢	Complete <u>ONLY</u> if direct	Candidate/Officeholder	•	ffice sought	Office held			
e	expenditure to benefit C/OH							
⊢		<u>ı</u>						
Fo	rms provided by Texas E	thics Commission	www.ethics.st	ate.tx.us	Vers	ion V4.1.0).d378al	
						-		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

Zip Code

Zip Code

Zip Code

.0.d378aba0 ersior

	EXPENDITURE CATEGORIES FOR BOX 10(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards	rage Expense s/Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense T	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
		The Inst	ruction Guide explains h	ow to complete this form.				
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
	Sch: 10/44 Rpt: 46/90	Texans for Charles	Schwertner		00065997			
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$			
6	PAYMENT	(a) Amount Charged \$12.99	(b) Date of Charge 02/06/2024	(c) Date(s) Credit Card Issue 02/28/2024 02/28/2024	er Paid			
7	PAYEE	(a) Payee name The Post Oak Hote	I	(b) Payee address; 1600 W Loop S Houston, TX 77027	City, State, Zip Code			
8	PURPOSE OF EXPENDITURE	PENDITURE (See Categories listed at the top of this schedule) Travel Out of District Travel Out of District			aff to attend legislative meeting			
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	K, officeholder living expense			
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged \$108.93	(b) Date of Charge 02/07/2024	(c) Date(s) Credit Card Issue 02/28/2024 02/28/2024	er Paid			
	PAYEE	(a) Payee name The Post Oak Hote	I	(b) Payee address; 1600 W Loop S Houston, TX 77027	City, State, Zip Code			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expen	,	(b) Description Capitol staff meal while traveling to attend officeholder even				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	K, officeholder living expense			
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held			
	PAYMENT	(a) Amount Charged \$51.46	(b) Date of Charge 02/08/2024	(c) Date(s) Credit Card Issue 02/28/2024 02/28/2024	er Paid			
	PAYEE	(a) Payee name ExxonMobil		(b) Payee address; 7500 WEST HWY 29 Liberty Hill, TX 78642	City, State, Zip Code			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Transportation Equips Expense	ment And Related	(b) Description Fuel for transportation in Austin, TX for officeholder meeting.				
	Non-Political		of Texas. Complete Schedule		K, officeholder living expense			
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held			
Foi	rms provided by Texas E	thics Commission	www.ethics.st	ate.tx.us	Version V4.1.0.d378aba0			

EXPENDITURES MADE BY CREDIT CARD

EXPENDITURES MADE BY CREDIT CARD

	EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Accounting/Banking	Event Exp Fees	ense	Loan Repayment/Reimbursement Office Overhead/Rental Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense				
Consulting Expense	Food/Beverage Expense Po		Polling Expense	Travel in District				
Contributions/ Donations Made By Candidate/Officeholder/Politica		ls/Memorials Expense ⁄ices	Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)				
	The Inst	ruction Guide explains l	how to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)			
Sch: 11/44 Rpt: 47/90	Texans for Charles	Schwertner		00065997				
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZ	ED				
ISSUER	see n	revious	EXPENDITURES	\$				
	P		CHARGED TO A CRE CARD					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid				
	\$3.09	02/08/2024	02/28/2024 02/28/202					
	\$3.09	02/06/2024						
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Co	ode			
			7500 WEST HWY 29					
	ExxonMobil							
			Liberty Hill, TX 78642					
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top		Officeholder beverage	while traveling.				
X Political	Food/Beverage Expe	nse						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T Check if Austin	n, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	•	Office sought	Office held				
expenditure to benefit C/OH			Ũ					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	(c) Date(s) Credit Card Issuer Paid				
	\$66.21	02/12/2024	02/28/2024 02/28/202	24				
	\$00.21	02,12,2024						
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Co	ode			
			7500 WEST HWY 29					
	ExxonMobil							
			Liberty Hill, TX 78642					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Transportation Equip		-	in Austin, TX for officeholder				
X Political	Expense		meeting.					
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	r name C	Office sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is					
	\$82.03	02/13/2024	02/28/2024 02/28/202	24				
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Co	de			
	4707		P.O. Box 5014					
	AT&T							
			Carol Stream, IL 6019	7				
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Office Overhead/Ren		Mobile phone service	for campaign/officeholder purposes	S			
X Political								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin	n, TX, officeholder living expense				
Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name C	Office sought	Office held				
expenditure to benefit C/OH								

EXPENDITURE CATEGORIES FOR BOX 10(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	/ - Gift/Award	rage Expense s/Memorials Expense	Loan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Polling Expense Travel in District Printing Expense Travel Out of District Salaries/Wages/Contract Labor OTHER (enter a category not listed above)						
	The Inst	ruction Guide explains h	ow to complete this form.						
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)			
Sch: 12/44 Rpt: 48/90	Texans for Charles	Schwertner		00065997					
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZED						
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CREDI CARD	T \$					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid					
	\$2,126.46	02/28/2024	02/28/2024 04/17/2024						
7 PAYEE	(a) Payee name	l	(b) Payee address;	City,	State,	Zip Code			
			901 S I-35 Frontage Rd						
	Hobby Lobby		Suite 100						
			Georgetown, TX 78626						
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this askadula)	(b) Description						
	Gift/Awards/Memorial		Framing of Texas Capito	ol Gift shop photo	os for cor	nstituents.			
X Political		•							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living exp	ense				
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Of	fice sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid 04/17/2024 04/17/2024						
	\$79.01 02/29/2024		04/1//2024 04/1//2024						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Voutube TV		1600 Amphitheatre Pkwy						
	Youtube TV		Mountain View, CA 94043						
PURPOSE OF	(a) Category		(b) Description						
	(See Categories listed at the top Office Overhead/Ren		TV for officeholder and c	office.					
X Political		F							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule							
Complete ONLY if direct	Candidate/Officeholder	name Of	fice sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu 04/17/2024 04/17/2024						
	\$90.72	02/29/2024	04/1//2024 04/1//2024						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	X (Formerly Twitter)	1355 Market Street						
		/	Suite 900						
			San Francisco, CA 9410	3					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Campaign advertisment	foo					
X Political	Advertising Expense	,	Campaign adventisment	iee.					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living exp	ense				
Complete ONLY if direct	Candidate/Officeholder	name Of	fice sought	Office held					
expenditure to benefit C/OH			expenditure to benefit C/OH						

EXPENDITURE CATEGORIES FOR BOX 10(a)								
Advertising Expense Event Expense Accounting/Banking Fees Consulting Expense Food/Beverage Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Gift/Awards/Memorials Exper			.oan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Polling Expense Travel in District Training Expense Travel Out of District Salaries/Wages/Contract Labor OTHER (enter a category not listed above)					
	The Inst	ruction Guide explains I	how to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	ics Commiss	sion Filers)		
Sch: 13/44 Rpt: 49/90	Texans for Charles	Schwertner		00065997				
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZ					
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CRE CARD	DIT \$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid				
	\$45.39	03/01/2024	04/17/2024 04/17/202	24				
7 PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code		
			10019 S I-35 Frontage	Rd				
	Hill Country Spring	S						
			Austin, TX 78747					
8 PURPOSE OF	(a) Category	of this school (a)	(b) Description					
	(See Categories listed at the top Office Overhead/Ren		Water for Capitol office					
X Political		•						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin	ı, TX, officeholder living exp	pense			
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name C	Office sought	Office held				
	expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged (b) Date of Charge		(c) Date(s) Credit Card Is 04/17/2024 04/17/202					
	\$100.51	03/06/2024	04/11/2024 04/11/202	_4				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Spectrum		12405 Powerscourt Dr					
			Des Peres, MO 63131					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodule)	(b) Description					
	Office Overhead/Ren		Internet for officeholde	er Austin apartmer	nt			
X Political		•						
Non-Political		of Texas. Complete Schedule		ı, TX, officeholder living exp	oense			
Complete ONLY if direct	Candidate/Officeholder	r name C	Office sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is 04/17/2024 04/17/202					
	\$1,500.00	03/06/2024	0					
PAYEE				City	Ctata	Zin Codo		
PATEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Norfleet Strategies		504 W 12(11 5)	504 W 12th St				
			Austin, TX 78701					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaign communica	tions consulting				
X Political	Consulting Expense							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin	ı, TX, officeholder living exp	pense			
Complete ONLY if direct	Candidate/Officeholder	r name C	Office sought	Office held				
expenditure to benefit C/OH								

	EXPENDITURE CATEGORIES FOR BOX 10(a)								
	Advertising Expense Accounting/Banking	Event Expe Fees	ense		Loan Repayment/Reimbursement Solicitation/Fundraising Ex Office Overhead/Rental Expense Transportation Equipment				Evnansa
Consulting Expense Contributions/ Donations Made B		Food/Beverage Expense P		Polling Expe	olling Expense T		Transportation Equipment & Related Expense Travel in District Travel Out of District		Lypense
	Candidate/Officeholder/Political Committee						OTHER (enter a category not listed above)		oove)
		how to com	nplete this	form.					
1	Total pages Schedule F4:				3 Filer ID (Ethi	cs Commiss	sion Filers)		
	Sch: 14/44 Rpt: 50/90	Texans for Charles				00065997			
4	CREDIT CARD	Name of final	ncial institution	5 T	OTAL OF	UNITEMIZED	>		
	ISSUER	see n	revious		XPENDIT		_ \$		
		000 p			CHARGED TO A CREDIT CARD				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) D	Date(s) Cr	edit Card Issu	 er Paid		
						04/17/2024			
		\$500.00	03/07/2024						
-	PAYEE	(a) Payee name		(b) E	Payee add	Irocc.	City,	State,	Zip Code
ľ		(a) T ayee hame		` ´	0 Hackb	-	City,	State,	
		Las Huellas, Inc.		294		eny			
				Bro	wnsville	TX 78521			
8	PURPOSE OF	(a) Category			Description				
ľ	EXPENDITURE	(See Categories listed at the top		` ´	•	Wildlife Con:	servation.		
	X Political	Contributions/Donations Made By							
	Non-Political	Candidate/Officeholde							
L			of Texas. Complete Schedule			Check if Austin, T	X, officeholder living exp	oense	
e	xpenditure to benefit C/OH						D-id		
	PAYMENT	(a) Amount Charged	(b) Date of Charge		(c) Date(s) Credit Card Issuer Paid 04/17/2024 04/17/2024				
		\$77.03 03/13/2024			11/2024	04/11/2024			
	BAX/55					-			
	PAYEE	(a) Payee name			Payee add		City,	State,	Zip Code
		AT&T		P.0	P.O. Box 5014				
					Carol Stream, IL 60197				
		(a) Catagony							
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)		Description		compoint/offic	oboldor n	urnococ
	V Dolition	Office Overhead/Rental Expense			Mobile phone service for campaign/officeholder purposes				
	X Political								
	Non-Political		of Texas. Complete Schedule			Check if Austin, T	X, officeholder living exp	oense	
	Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	Office soug	int		Office held		
e	xpenditure to benefit C/OH						D-id		
	PAYMENT	(a) Amount Charged	(b) Date of Charge		• •	edit Card Issu 04/17/2024	er Pald		
		\$206.28	03/13/2024	047.	11/2024	0-1/11/202-			
									
	PAYEE	(a) Payee name		` ´	Payee add	-	City,	State,	Zip Code
		Knights of Columbu	IS	610	Round I	Rock West D	Drive		
			-			T) 7000 -			
⊢		(a) Catagon:				k, TX 78601			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)		Description		rting Clay Tours	amont	
		Contributions/Donatio	ns Made By		nsorsnip	JULING SHOL	rting Clay Tourn	anen	
	X Political	Candidate/Officeholde							
	Non-Political		of Texas. Complete Schedule			Check if Austin, T	X, officeholder living exp	oense	
	Complete ONLY if direct	Candidate/Officeholder	name O	Office soug	ht		Office held		
e	expenditure to benefit C/OH								

EXPENDITURE CATEGORIES FOR BOX 10(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Award	rage Expense s/Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising Expen Transportation Equipment & R Travel in District Travel Out of District OTHER (enter a category not I	elated Expense
	The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Co	mmission Filers)
Sch: 15/44 Rpt: 51/90	Texans for Charles	Schwertner		00065997	
4 CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZED)	
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CRED CARD	⊤ \$	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu		
	\$32.46	03/14/2024	04/17/2024 04/17/2024		
7 PAYEE	(a) Payee name		(b) Payee address;	City, St	ate, Zip Code
	Amazon		410 Terry Ave N		
			Seattle, WA 98109		
8 PURPOSE OF	(a) Category		(b) Description		
	(See Categories listed at the top Office Overhead/Rent		Capitol Office supplies		
X Political					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expense	
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held	
expenditure to benefit C/OH					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu 04/17/2024 04/17/2024		
	\$38.84	03/14/2024	04/11/2024 04/11/2024		
PAYEE				0.4	The Oak
PATEE	(a) Payee name		(b) Payee address; 2155 E. GoDaddy Way	City, St	ate, Zip Code
	GoDaddy		2135 E. Gobaudy Way		
			Tempe, AZ 85284		
PURPOSE OF	(a) Category		(b) Description		
EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaign Website mair	ntenance	
X Political	Advertising Expense				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held	
expenditure to benefit C/OH					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu		
	\$21.57	03/21/2024	04/17/2024 04/17/2024		
PAYEE	(a) Payee name		(b) Payee address;	City, St	ate, Zip Code
	Amozon		410 Terry Ave N		
	Amazon				
			Seattle, WA 98109		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	at office	
X Political	Office Overhead/Ren		Office supplies for distric	ct onice.	
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expense	
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held	
expenditure to benefit C/OH					

EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By	r - Gift/Award	rage Expense s/Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District		
Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (er The Instruction Guide explains how to complete this form.				OTHER (enter a category not listed above)		
1 Total pages Schedule F4:				3 Filer ID (Ethics Commission Filer	rs)	
Sch: 16/44 Rpt: 52/90	Texans for Charles	Schwertner		00065997	5)	
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZED			
ISSUER		revious	EXPENDITURES	\$		
			CHARGED TO A CREDI CARD			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
	\$60.00	03/23/2024	04/17/2024 04/17/2024			
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Co	ode	
	Edinburg Rotary Cl	ub	1903 S Closner Blvd			
		ub				
	(a) Category		Edinburg, TX 78539 (b) Description			
8 PURPOSE OF EXPENDITURE	(See Categories listed at the top	of this schedule)	Donation for officeholder	event.		
X Political	Contributions/Donation Candidate/Officehold					
Non-Political		of Texas. Complete Schedule		K, officeholder living expense		
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder		iffice sought	Office held		
expenditure to benefit C/OH			J. J			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
	\$79.01	03/30/2024	04/17/2024 04/17/2024			
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Co	ode	
	Youtube TV		1600 Amphitheatre Pkwy			
PURPOSE OF	(a) Category		(b) Description	-3		
EXPENDITURE	(See Categories listed at the top		TV for officeholder and c	ffice.		
X Political	Office Overhead/Ren	tal Expense				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. X Check if Austin, T	K, officeholder living expense		
Complete ONLY if direct	Candidate/Officeholder		office sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
	\$50.15	04/01/2024	04/17/2024 04/17/2024			
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Co	ode	
	Hill Country Spring	6	10019 S I-35 Frontage Rd			
			Austin, TX 78747			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top		Water for Capitol office			
X Political	Office Overhead/Ren	tai Expense				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	K, officeholder living expense		
Complete <u>ONLY</u> if direct	Candidate/Officeholder		office sought	Office held		
expenditure to benefit C/OH						

EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Award	rage Expense s/Memorials Expense	Polling Expense	Transportation Equipmen Travel in District Travel Out of District	nt & Related I	
	The Inst	ruction Guide explains h	now to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethio	cs Commiss	sion Filers)
Sch: 17/44 Rpt: 53/90	Texans for Charles	Schwertner		00065997		
4 CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZED			
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CRED CARD			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu			
	\$155.00	04/01/2024	04/17/2024 04/17/2024			
7 PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code
			7650 TX-29	nse Transportation Equipment & Related Expense Travel District OTHER (enter a category not listed above) n. 3 Filer ID (Ethics Commission Filers) 00065997 ITEMIZED ES A CREDIT S: City, State, Zip Code (A 78628 campaign supplies. sk if Austin, TX, officeholder living expense Office held Card Issuer Paid /17/2024 s; City, State, Zip Code (A 78628 campaign supplies. sk if Austin, TX, officeholder living expense Office held Card Issuer Paid /17/2024 s; City, State, Zip Code (A 78628 campaign supplies. sk if Austin, TX, officeholder living expense Office held Card Issuer Paid /17/2024 s; City, State, Zip Code (A 78628 campaign supplies. sk if Austin, TX, officeholder living expense City, State, Zip Code (A 78628 campaign supplies. sk if Austin, TX, officeholder living expense City, State, Zip Code		
	RightSpace Self St	orage				
			Georgetown, TX 78628			
8 PURPOSE OF	(a) Category		(b) Description			
	(See Categories listed at the top Office Overhead/Rent		Storage unit for campaig	yn supplies.		
X Political		I				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living exp	ense	
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu			
	\$37.00	04/01/2024	04/17/2024 04/17/2024			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			7650 TX-29			
	RightSpace Self St	orage				
			Georgetown, TX 78628			
PURPOSE OF	(a) Category	of this school (10)	(b) Description			
	(See Categories listed at the top Office Overhead/Rent		Storage unit for campaig	yn supplies.		
X Political		·				
Non-Political		of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held		
expenditure to benefit C/OH		[4				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu 04/17/2024 04/17/2024			
	\$16.24	04/01/2024	04/11/2024 04/11/2024			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	RightSpace Self St	orade	7650 TX-29			
		J -	Coorgotown TV 70000			
PURPOSE OF	(a) Category		Georgetown, TX 78628 (b) Description			
EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	., .	n supplies		
X Political	Office Overhead/Ren	tal Expense				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held		
expenditure to benefit C/OH						

EXPENDITURES	MADE BY	CREDIT	CARD
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EXPENDITURE CATEGORIES FOR BOX 10(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	erage Expense s/Memorials Expense rices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Travel in District Travel Out of District OTHER (enter a category not listed a	
		ruction Guide explains h	now to complete this form.		
1 Total pages Schedule F4:				3 Filer ID (Ethics Commis	sion Filers)
Sch: 18/44 Rpt: 54/90	Texans for Charles	Schwertner		00065997	
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CRED CARD	\$	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu		
	\$100.51	04/06/2024	04/17/2024 04/17/2024	l	
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State,	Zip Code
	Spectrum		12405 Powerscourt Dr		
			Des Peres, MO 63131		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Ren		(b) Description Internet for officeholder	Austin apartment	
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. X Check if Austin, T	X, officeholder living expense	
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	office sought	Office held	
expenditure to benefit C/OH					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu		
	\$1,500.00	04/09/2024	04/17/2024 04/17/2024	l.	
PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code
	Norfleet Strategies		504 W 12th St Austin, TX 78701		
PURPOSE OF	(a) Category		(b) Description		
EXPENDITURE	(See Categories listed at the top	of this schedule)	Campaign communication	ons consulting	
X Political	Consulting Expense			5	
Non-Political		of Texas. Complete Schedule			
	(C) Check if travel outside Candidate/Officeholder		Iffice sought	CX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid	
			04/17/2024 04/17/2024		
	\$1,183.82	04/15/2024			
PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code
			901 S I-35 Frontage Rd		
	Hobby Lobby		Suite 100		
			Georgetown, TX 78626		
PURPOSE OF	(a) Category		(b) Description		
EXPENDITURE	(See Categories listed at the top Gift/Awards/Memorial			ol Gift shop photos for co	nstituents.
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin T	X, officeholder living expense	
Complete <u>ONLY</u> if direct	Candidate/Officeholder		office sought	Office held	
expenditure to benefit C/OH		· · · · · · · · · · · · · · · · · · ·			
	l				

EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	y - Gift/Award	erage Expense Is/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Transportation Equipme Travel in District Travel Out of District OTHER (enter a catego	ent & Related I	
	The Inst	ruction Guide explains h	now to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	ics Commiss	sion Filers)
Sch: 19/44 Rpt: 55/90	Texans for Charles	Schwertner		00065997		
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRED CARD	\$		
6 PAYMENT	(a) Amount Charged \$370.20	(b) Date of Charge 04/25/2024	(c) Date(s) Credit Card Iss 05/02/2024 05/02/2024			
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	НЕВ		2652 LAKE AUSTIN BL	VD		
			Austin, TX 78703			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Ren		(b) Description Capitol Office supplies			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living ex	oense	
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder		uffice sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$79.01	(b) Date of Charge 04/30/2024	(c) Date(s) Credit Card Iss 05/02/2024 05/02/2024			
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code
	Youtube TV		1600 Amphitheatre Pkw	-		
PURPOSE OF	(a) Category		Mountain View, CA 940 (b) Description	143		
EXPENDITURE	(See Categories listed at the top	of this schedule)	TV for officeholder and	office		
X Political	Office Overhead/Ren					
Non-Political		of Texas. Complete Schedule		TX, officeholder living exp	oense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name O	ffice sought	Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss			
	\$63.13	05/01/2024	05/02/2024 05/02/2024	4		
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Hill Country Spring	S	10019 S I-35 Frontage Austin, TX 78747	Rd		
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Office Overhead/Ren		Water for Capitol office			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living exp	oense	
Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name O	ffice sought	Office held		
expenditure to benefit C/OH						

EXPENDITURES	MADE BY	CREDIT	CARD
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EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Award	rage Expense s/Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense	Transportation Equipment Travel in District Travel Out of District	& Related I	
	The Inst	ruction Guide explains h	now to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	s Commiss	sion Filers)
Sch: 20/44 Rpt: 56/90	Texans for Charles	Schwertner		00065997		
4 CREDIT CARD	Name of final	ncial institution				
ISSUER	see p	revious				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge				
	\$155.00	05/01/2024	05/02/2024 05/02/2024			
7 PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code
			aan Regament/Reiming Expense oling Expense mining Expense alaries/Wages/Contract Labor x to complete this form. 3 Filer ID (Ethics Commission Filers) 00065997 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARED (c) Date(s) Credit Card Issuer Paid 05/02/2024 05/02/2024 (b) Payee address; City, State, Zip Code 7650 TX-29 Georgetown, TX 78628 (b) Description Storage unit for campaign supplies. (c) Date(s) Credit Card Issuer Paid 05/02/2024 05/02/2024 (b) Payee address; City, State, Zip Code 7650 TX-29 Georgetown, TX 78628 (b) Description Storage unit for campaign supplies. (c) Date(s) Credit Card Issuer Paid 05/02/2024 05/02/2024 (b) Payee address; City, State, Zip Code 7650 TX-29 Georgetown, TX 78628 (b) Description Storage unit for campaign supplies. (c) Date(s) Credit Card Issuer Paid 05/02/2024 05/02/2024 (b) Payee address; City, State, Zip Code 7650 TX-29 Georgetown, TX 78628 (b) Description Storage unit for campaign supplies. (c) Date(s) Credit Card Issuer Paid 05/02/2024 05/02/2024 (b) Payee address; City, State, Zip Code 7650 TX-29 Georgetown, TX 78628 (b) Description Storage unit for campaign supplies. (c) Date(s) Credit Card Issuer Paid 05/02/2024 05/02/2024 (b) Payee address; City, State, Zip Code 7650 TX-29 Georgetown, TX 78628 (b) Description Storage unit for campaign supplies. (c) Date(s) Credit Card Issuer Paid 05/22/2024 05/22/2024 (b) Payee address; City, State, Zip Code 12405 Powerscourt Dr Des Peres, MO 63131 (b) Description Internet for officeholder Austin apartment			
	RightSpace Self St	orage				
			Georgetown, TX 78628			
8 PURPOSE OF	(a) Category		., .			
	(See Categories listed at the top Office Overhead/Rent		Storage unit for campaig	yn supplies.		
X Political		I				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expe	nse	
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	office sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge				
	\$88.00	05/01/2024	05/02/2024 05/02/2024			
PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code
			7650 TX-29			
	RightSpace Self St	orage				
			_			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)				
	Office Overhead/Rent		Storage unit for campaig	gn supplies.		
X Political						
Non-Political		of Texas. Complete Schedule			nse	
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	Office sought	Office held		
expenditure to benefit C/OH				Deid		
PAYMENT	(a) Amount Charged	(b) Date of Charge				
	\$100.51	05/06/2024				
PAYEE					01.1	i o -
PATEE	(a) Payee name			City,	State,	Zip Code
	Spectrum		12405 Powerscourt Dr			
			Des Peres MO 62121			
PURPOSE OF	(a) Category					
EXPENDITURE	(See Categories listed at the top			Austin apartment		
X Political	Office Overhead/Ren	tal Expense				
Non-Political		of Texas. Complete Schedule			nse	
Complete ONLY if direct	Candidate/Officeholder	name O	Office sought	Office held		
expenditure to benefit C/OH						

	Advertising Expense Accounting/Banking	EXPE Event Expe Fees	ENDITURE CATEGOR	Loan Repayn	BOX 10(a) nent/Reimbursement ead/Rental Expense	Solicitation/Fundraisir Transportation Equipr		Expense	
Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee		- Food/Beve Gift/Award	Food/Beverage Expense P Gift/Awards/Memorials Expense P		ense Jes/Contract Labor	Travel in District Travel Out of District	Travel in District		
		The Inst	ruction Guide explains h	now to comp	plete this form.				
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Et	hics Commis	sion Filers)	
	Sch: 21/44 Rpt: 57/90	Texans for Charles	Schwertner			00065997			
4	CREDIT CARD ISSUER		ncial institution revious	EX CH	TAL OF UNITEMIZ PENDITURES IARGED TO A CRE RD	\$			
6	PAYMENT	(a) Amount Charged \$1,500.00	(b) Date of Charge 05/07/2024		ate(s) Credit Card Is 2/2024 05/22/20				
7	PAYEE	(a) Payee name	1	(b) Pa	ayee address;	City,	State,	Zip Code	
				504	W 12th St				
		Norfleet Strategies							
				Austi	in, TX 78701				
8	PURPOSE OF	(a) Category		(b) De	escription				
	EXPENDITURE	(See Categories listed at the top of this schedule)		Cam	Campaign communications consulting				
	X Political	Consulting Expense							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	т.	Check if Austin	n, TX, officeholder living e	expense		
9	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sough	it	Office held			
е	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	• •	ate(s) Credit Card Is				
		\$37.75	05/14/2024	05/2	2/2024 05/22/20	24			
	PAYEE	(a) Payee name		(b) Pa	ayee address;	City,	State,	Zip Code	
		Amazon		410 -	Terry Ave N				
	PURPOSE OF	(a) Category			tle, WA 98109				
	EXPENDITURE	(See Categories listed at the top	of this schedule)	• •	pole for district of	ffice.			
	X Political	Office Overhead/Rent	tal Expense	ag					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т.	Check if Austir	n, TX, officeholder living e	expense		
	Complete ONLY if direct	Candidate/Officeholder	•	ffice sough		Office held	•		
e	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Da	ate(s) Credit Card Is	suer Paid			
		\$239.24	05/15/2024	05/2	2/2024 05/22/20	24			
	PAYEE	(a) Payee name		(b) Pa	ayee address;	City,	State,	Zip Code	
				50 B	eale Street				
		Instacart		Suite	e 600				
				San	Fransico, CA 941	.05			
	PURPOSE OF	(a) Category		(b) De	escription				
	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Offic	e supplies restoc	k for Bryan office			
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	<u> </u>	Check if Austin	n, TX, officeholder living e	expense		
	Complete ONLY if direct	Candidate/Officeholder	•		fice sought Office held				
е	expenditure to benefit C/OH								

EXPENDITURES MADE BY CREDIT CARD

Forms provided by Texas Ethics Commission

EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Event Expense Accounting/Banking Fees Consulting Expense Food/Beverage Expense Contributions/ Donations Made By - Gift/Awards/Memorials Expense Candidate/Officeholder/Political Committee Legal Services		erage Expense Is/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Office Overhead/Rental Expense Transportation Equipment & Related Expense Polling Expense Travel in District Printing Expense Travel Out of District Salaries/Wages/Contract Labor OTHER (enter a category not listed above)			
		how to complete this form.					
, -	L Total pages Schedule F4: 2 FILER NAME			3 Filer ID (Eth	ics Commiss	sion Filers)	
Sch: 22/44 Rpt: 58/90	Texans for Charles	Schwertner		00065997			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CREI CARD	\$			
6 PAYMENT	(a) Amount Charged \$696.78	(b) Date of Charge 05/20/2024	(c) Date(s) Credit Card Iss 05/22/2024 06/04/202				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Amazon		410 Terry Ave N				
			Seattle, WA 98109				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Ren		(b) Description Ice maker for capitol of	ffice.			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T Check if Austin	, TX, officeholder living ex	nense		
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder		Diffice sought	Office held	peneo		
expenditure to benefit C/OH			Ū				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid			
	\$79.01	05/30/2024	06/04/2024 06/04/202	24			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
Youtube TV		1600 Amphitheatre Pk	wy				
			Mountain View, CA 94	043			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
	Office Overhead/Ren		TV for officenoider and	TV for officeholder and office.			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		, TX, officeholder living ex	pense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name C	Office sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss				
	\$155.00	06/01/2024	06/04/2024 06/04/202	24			
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
RightSpace Self Storage		7650 TX-29	2				
PURPOSE OF	(a) Category		Georgetown, TX 78628 (b) Description	כ			
	(See Categories listed at the top Office Overhead/Ren		Storage unit for campa	ign supplies.			
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
Complete <u>ONLY</u> if direct	Candidate/Officeholder		Diffice sought	Office held			
expenditure to benefit C/OH			U ·				

	EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award	erage Expense s/Memorials Expense	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 Inst	ruction Guide explains h	now to complete this form.				
1 Total pages Schedule F4:	1 Total pages Schedule F4: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 23/44 Rpt: 59/90	Texans for Charles	Schwertner		00065997			
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZE				
ISSUER	see previous		EXPENDITURES CHARGED TO A CRED CARD	I⊤ \$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu				
	\$100.00	06/01/2024	06/04/2024 06/04/2024				
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
			7650 TX-29				
	RightSpace Self St	orage					
			Georgetown, TX 78628				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
	Office Overhead/Ren		Storage unit for campaign supplies.				
X Political		-					
Non-Political		of Texas. Complete Schedule		X, officeholder living expense			
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	office sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu 06/04/2024 06/04/2024				
	\$16.23 06/02/2024		00/04/2024 00/04/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	(a) Fayee hame		410 Terry Ave N	City, State, Zip Code			
Amazon							
			Seattle, WA 98109				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Amazon prime members	ship for campaign purchases			
X Political	Office Overhead/Ren	lai Expense					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, 1	X, officeholder living expense			
Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name O	office sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu				
	\$16.23	06/02/2024	06/04/2024 06/04/2024				
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
	Amozon		410 Terry Ave N				
	Amazon						
			Seattle, WA 98109				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	abin for compaign avector			
X Political	Office Overhead/Rental Expense		Amazon prime members	Amazon prime membership for campaign purchases			
Non-Political	n-Political (c) Check if travel outside of Texas. Complete Schedule T.			X, officeholder living expense			
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	office sought	Office held			
expenditure to benefit C/OH							

	EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Mac Candidate/Officeholder/Po	e By - Gift/Award	erage Expense Is/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
	The Instruction Guide explains how							
1 Total pages Schedule F	4: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Sch: 24/44 Rpt: 60/9	0 Texans for Charles	Schwertner		00065997				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CREI CARD	\$				
6 PAYMENT	(a) Amount Charged \$393.94	(b) Date of Charge 02/08/2024	(c) Date(s) Credit Card Iss 02/28/2024 02/28/202					
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code				
	Alonti Catering		12001 Burnet Rd					
			Austin, TX 78754					
8 PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule) Food/Beverage Expense			(b) Description Capitol staff meal while	e traveling to attend officeholder event				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct		r name O	ffice sought	Office held				
expenditure to benefit C/C								
PAYMENT	(a) Amount Charged \$41.95	(b) Date of Charge 02/05/2024	(c) Date(s) Credit Card Iss 02/28/2024 02/28/202					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
	Bucee's		1700 State Hwy 71 Ea Bastrop, TX 78602	st				
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Transportation Equip		Fuel for out of district conference for officeholder meeting.					
Non-Political	Expense	of Texas. Complete Schedule		TX, officeholder living expense				
Complete <u>ONLY</u> if direct		•	ffice sought	Office held				
expenditure to benefit C/C			inco cougin					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid				
	\$13.65	02/05/2024	02/28/2024 02/28/202					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
	Bucee's		1700 State Hwy 71 Ea	st				
PURPOSE OF	(a) Category		Bastrop, TX 78602 (b) Description					
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		., .	while traveling to attend campaign				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin	TX, officeholder living expense				
Complete <u>ONLY</u> if direct		· · · · · · · · · · · · · · · · · · ·	ffice sought	Office held				
expenditure to benefit C/C	•							

EXPENDITURE CATEGORIES FOR BOX 10(a)								
Advertising Expense Event Expense Accounting/Banking Fees Consulting Expense Food/Beverage Expens Contributions/ Donations Made By - Gift/Awards/Memorials Candidate/Officeholder/Political Committee Legal Services		rage Expense s/Memorials Expense ices	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)				
		ruction Guide explains h	now to complete this form.					
1 Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)				
Sch: 25/44 Rpt: 61/90	Texans for Charles	Schwertner		00065997				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CRED CARD	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu					
	\$47.97	02/06/2024	02/28/2024 02/28/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
	Bucee's		1700 State Hwy 71 East	t				
			Bastrop, TX 78602					
8 PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description Fuel for out of district cc	nference for officeholder meeting.					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name C	ffice sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$26.01	(b) Date of Charge 02/06/2024	(c) Date(s) Credit Card Issu 02/28/2024 02/28/2024					
PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code				
	Bucee's		1700 State Hwy 71 East Bastrop, TX 78602	t				
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top	,	., .	hile traveling to attend campaign				
X Political	Food/Beverage Expe	nse	event	event				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name C	office sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu					
	\$61.18	02/04/2024	02/28/2024 02/28/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
	Chevron		3735 N Interstate Hwy 3	5				
			Austin, TX 78723					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
X Political	Transportation Equip Expense		Fuel in Austin, TX for of	liceholder meeting.				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name C	ffice sought	Office held				
expenditure to benefit C/OH								

EXPENDITURES	MADE BY	CREDIT	CARD
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	EXPENDITURE CATEGORIES FOR BOX 10(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	rage Expense s/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Transportation Equipme Travel in District Travel Out of District OTHER (enter a catego	ent & Related E			
		The Inst	now to complete this form.						
1	1 Total pages Schedule F4: 2 FILER NAME				3 Filer ID (Ethi	ics Commiss	sion Filers)		
	Sch: 26/44 Rpt: 62/90	Texans for Charles	Schwertner		00065997				
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZ					
	ISSUER	see previous		EXPENDITURES CHARGED TO A CRE CARD	CHARGED TO A CREDIT				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is					
		\$36.54	02/04/2024	02/28/2024 02/28/202	24				
7	PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code		
		Chevron		3735 N Interstate Hwy	/ 35				
				Austin, TX 78723	Austin, TX 78723				
8	PURPOSE OF	(a) Category		(b) Description					
	EXPENDITURE (See Categories listed at the top of this schedule) X Political Transportation Equipment And Related Expense Expense		Transportation in Aust	Transportation in Austin, TX for officeholder meeting.					
	Non-Political		of Texas. Complete Schedule	T. Check if Austir	n, TX, officeholder living exp	oense			
9	Complete ONLY if direct	Candidate/Officeholder		ffice sought	Office held				
	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid				
		\$72.00	03/26/2024	04/17/2024 04/17/202	24				
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
				503 W Martin Luther K	King Jr Blvd				
		ChickfilA							
				Austin, TX 78701					
	PURPOSE OF	(a) Category		(b) Description					
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Meeting with Capitol s	taff to discuss legi	slative bu	isiness		
	X Political								
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austir	n, TX, officeholder living exp	oense			
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held				
e	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is					
		\$85.50	04/05/2024	04/17/2024 04/17/202	24				
⊢	PAYEE	(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code		
				200 W Cimarron Hills	Trail				
		Cimarron Hills Golf							
				Georgetown, TX 7862	8				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	· · · ·				
	X Political	Food/Beverage Expe		Lunch with staff to dise	cuss campaign.				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austir	n, TX, officeholder living exp	oense			
\vdash	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held				
e	xpenditure to benefit C/OH								
									

EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Award	erage Expense s/Memorials Expense	Office Overhead/Rental Expense T Polling Expense T Printing Expense T	iolicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District NTHER (enter a category not listed above)			
	The Inst	ruction Guide explains h	ow to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 27/44 Rpt: 63/90	Texans for Charles	Schwertner		00065997			
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZED				
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$146.49	05/01/2024	05/02/2024 05/02/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
			113 E 8th St				
	City Post Chophous	se					
			Georgetown, TX 78628				
8 PURPOSE OF	(a) Category		(b) Description				
	(See Categories listed at the top Food/Beverage Expe		Meeting in-district with sta	aff to discuss campaign.			
X Political							
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	Candidate/Officeholder	r name Of	fice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged (b) Date of Charge		(c) Date(s) Credit Card Issue	er Paid			
	\$188.90	05/22/2024	06/04/2024 06/04/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	(a) r ayee hame		303 2ND ST				
DoorDash		SUITE 800 SOUTH ST TOWER					
			SAN FRANCISCO, CA 94107				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Meeting with Capitol staff	to discuss legislative business			
X Political	Food/Beverage Expe	nse					
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 Of	fice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$100.00	03/23/2024	04/17/2024 04/17/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
			1903 S Closner Blvd				
	Edinburg Rotary Club						
			Edinburg, TX 78539				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By		(b) Description				
EXPENDITURE			Donation for officeholder event.				
X Political	Candidate/Officehold		e				
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			, officeholder living expense			
Complete ONLY if direct	Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OH							

EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Event Expense Accounting/Banking Fees Consulting Expense Food/Beverage Expense Contributions/ Donations Made By - Gift/Awards/Memorials Expense Candidate/Officeholder/Political Committee Legal Services		erage Expense Is/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor				
	now to complete this form.	- · · · <u>-</u> · (- · · · · · · · · · · · · · · · · ·		,			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 28/44 Rpt: 64/90	Texans for Charles	Schwertner		00065997			
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZE	ED			
ISSUER	see p	revious	EXPENDITURES \$ CHARGED TO A CREDIT CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss				
	\$18.19	05/28/2024	06/04/2024 06/04/202	-4			
7 PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
			1624 W 5th St				
	El Arroyo						
			Austin, TX 78703				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	off to discuss lasis	lativa hu		
	Food/Beverage Expe		Meeting with Capitol St	I staff to discuss legislative business			
X Political							
Non-Political		of Texas. Complete Schedule		TX, officeholder living expe	ense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name O	ffice sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid			
			05/22/2024 05/22/202				
	\$37.52	05/16/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			PO Box 757				
	Flag.com						
			Brookshire, TX 77423				
PURPOSE OF	(a) Category	of this school ()	(b) Description				
	(See Categories listed at the top Office Overhead/Ren		Flags for district office.	Flags for district office.			
X Political		•					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		TX, officeholder living expe	ense		
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held			
expenditure to benefit C/OH				Deid			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss 04/17/2024 04/17/202				
	\$137.65	03/20/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
···· 			616 W 34th St	City,	State,	Zip Coue	
Foodheads		010 10 0411 01					
			Austin, TX 78705				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Meeting with Capitol st	aff to discuss legis	lative bu	isiness	
X Political	Food/Beverage Expe	1158					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living expe	ense		
Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name O	office sought	Office held			
expenditure to benefit C/OH							

EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Event Expense Accounting/Banking Fees Consulting Expense Food/Beverage Expense Contributions/ Donations Made By - Gift/Awards/Memorials Expense			Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Travel Out of District				
Candidate/Officeholder/Politica	Candidate/Officeholder/Political Committee Legal Services Sal The Instruction Guide explains how			OTHER (enter a category not listed above)			
1 Total pages Schedule E4:	·			3 Filer ID (Ethics Commission Filers)			
Sch: 29/44 Rpt: 65/90	L Total pages Schedule F4: 2 FILER NAME Sch: 29/44 Rpt: 65/90 Texans for Charles Schwertner			00065997			
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZE				
ISSUER		revious	EXPENDITURES CHARGED TO A CRED	\$			
	(a) Amount Charged	CARD					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss 01/29/2024 01/29/2024				
	\$2.12	01/15/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Google Drive		1600 Amphitheatre Par	kway			
			Mountain View, CA 940	43			
8 PURPOSE OF	(a) Category		(b) Description				
	(See Categories listed at the top Office Overhead/Ren		Online data storage ser	Online data storage services for campaign			
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss 02/28/2024 02/28/2024				
	\$2.12	02/15/2024		T			
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
Google Drive			1600 Amphitheatre Parkway				
			Mountain View, CA 940	43			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Online data storage ser	vicos for compaign			
X Political	Office Overhead/Ren	tal Expense	Online data storage ser	vices for campaign			
Non-Political		of Toylog, Complete Cabadula		Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
	\$2.12	03/16/2024	04/17/2024 04/17/2024	1			
	· · · · · ·						
PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code			
			1600 Amphitheatre Parkway				
	Google Drive						
			Mountain View, CA 940	43			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Online data storage ser	vices for campaign			
X Political	Office Overhead/Ren		Chine data storage set	nees to campaign			
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 O	ffice sought	Office held			
expenditure to benefit C/OH							

	EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Event Expense Loar Accounting/Banking Fees Office				Loan Repayment/Reimbursement Office Overhead/Rental Expense	oan Repayment/Reimbursement Solicitation/Fundraising Expense ffice Overhead/Rental Expense Transportation Equipment & Related Expense			
	Consulting Expense	Food/Beve	erage Expense	Polling Expense	Travel in District		Lypense	
	Contributions/ Donations Made By - Gift/Awards/Memorials Expense Pr Candidate/Officeholder/Political Committee Legal Services Sa		Salaries/Wages/Contract Labor	Printing Expense Travel Out of District Salaries/Wages/Contract Labor OTHER (enter a category not listed above)				
	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)	
	Sch: 30/44 Rpt: 66/90	Texans for Charles	Schwertner		00065997			
4	CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZE				
	ISSUER	see p	revious	EXPENDITURES	+			
		F		CHARGED TO A CREI CARD				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid			
		\$2.12	04/16/2024	04/17/2024 04/17/202	4			
		φζ.1ζ	04/10/2024					
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
				1600 Amphitheatre Par		,		
		Google Drive			ittitay			
				Mountain View, CA 940)43			
8	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top		Online data storage se	rvices for campai	gn		
	X Political	Office Overhead/Ren	tal Expense					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		TX, officeholder living exp	nense		
•	Complete <u>ONLY</u> if direct	Candidate/Officeholder		Office sought	Office held	Jense		
	xpenditure to benefit C/OH			inter cought				
-	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid			
		\$2.12	05/16/2024	05/22/2024 05/22/202				
		φ2.12	05/10/2024					
-	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			1600 Amphitheatre Par	rkway				
		Google Drive						
				Mountain View, CA 94043				
	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top Office Overhead/Ren		Online data storage se	rvices for campai	gn		
	X Political							
	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 O	office sought	Office held			
e	xpenditure to benefit C/OH							
Γ	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss				
		\$153.50	04/28/2024	05/02/2024 05/02/202	4			
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
				548 Market Street				
Grammarly.com			#35410					
L				San Francisco, CA 941	.04			
Γ	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top Office Overhead/Ren		Software for officeholde	er computer.			
	X Political		ш слрензе					
	Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
F	Complete ONLY if direct	Candidate/Officeholder	name O	office sought	Office held			
е	xpenditure to benefit C/OH							
—		1						

EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award al Committee Legal Serv	erage Expense Is/Memorials Expense vices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraisin Transportation Equipn Travel in District Travel Out of District OTHER (enter a categ	nent & Related E		
	·	ruction Guide explains l	how to complete this form.				
1 Total pages Schedule F4: 2 FILER NAME				3 Filer ID (Et	hics Commiss	ion Filers)	
Sch: 31/44 Rpt: 67/90	Texans for Charles			00065997			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEM EXPENDITURES CHARGED TO A CF CARD	\$			
6 PAYMENT	(a) Amount Charged \$17.07	(b) Date of Charge 02/05/2024	(c) Date(s) Credit Card 02/28/2024 02/28/2				
	+=						
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			904 W. University Av	ve Bldg. A			
	Jersey Mike's Subs	5	Unit 105				
			Georgetown, TX 787	726			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cohodulo)	(b) Description				
	Food/Beverage Expe		Officeholder meal wi	Officeholder meal while traveling to attend campaign event			
X Political							
Non-Political		of Texas. Complete Schedule		Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name C	Office sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card 05/02/2024 05/02/2				
	\$97.39	04/23/2024	05/02/2024 05/02/2	.024			
PAYEE				0.1		7. 0	
PATEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Jimmy John's		401 A W Holcombe Blvd				
	-		Houston, TX 77021				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Meeting with staff to	discuss campaign	/officeholde	er issues	
X Political	Food/Beverage Expe	nse					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		stin, TX, officeholder living e	vnense		
Complete ONLY if direct	Candidate/Officeholder		Diffice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid			
	\$117.61	01/22/2024	01/29/2024 01/29/2	024			
	· -						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			4516 Burnet Rd				
	La Cocina De Consuelo						
			Austin, TX 78756	Austin, TX 78756			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description				
X Political	Food/Beverage Expe		Meeting with staff to	discuss campaign	/officeholde	erissues	
Non-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							
Complete ONLY II direct	Candidate/Officeholder	r name C	mice sought	Office held			

EXPENDITURE CATEGORIES FOR BOX 10(a)								
Advertising Expense Event Expense Accounting/Banking Fees Consulting Expense Food/Beverage Expense Contributions/ Donations Made By - Gift/Awards/Memorials Expense Candidate/Officeholder/Political Committee Legal Services		erage Expense Is/Memorials Expense vices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Transportation Equipme Travel in District Travel Out of District OTHER (enter a categor	nt & Related I			
		ruction Guide explains h	now to complete this form.					
1 Total pages Schedule F4:				3 Filer ID (Ethi	cs Commiss	sion Filers)		
Sch: 32/44 Rpt: 68/90	Texans for Charles	Schwertner		00065997				
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRED CARD	\$				
6 PAYMENT	(a) Amount Charged \$7.58	(b) Date of Charge 02/13/2024	(c) Date(s) Credit Card Iss 02/28/2024 02/28/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Marriott Hotel		304 E Cesar Chavez St					
			Austin, TX 78701					
8 PURPOSE OF EXPENDITURE	Fees		()	(b) Description Parking fee for officeholder speaking event.				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin.	TX, officeholder living exp	ense			
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder		office sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid				
	\$17.25	02/13/2024	02/28/2024 02/28/2024	1				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
Mesquite Creek Outfitters		704 S Austin Ave						
	(a) Catagan/		Georgetown, TX 78726					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Food for campaign fund	Iraisor				
X Political	Food/Beverage Expe	nse						
Non-Political		of Texas. Complete Schedule		TX, officeholder living exp	ense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name O	ffice sought	Office held				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu					
	\$57.68	04/01/2024	04/17/2024 04/17/2024	1				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Office Depot		1013 W University Ave					
	(a) Catagor:		Georgetown, TX 78628					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Ren		(b) Description Office supplies for distri	ct office.				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin	TX, officeholder living exp	ense			
Complete <u>ONLY</u> if direct	Candidate/Officeholder	· · · · · · · · · · · · · · · · · · ·	Iffice sought	Office held				
expenditure to benefit C/OH				2				

	EXPENDITURE CATEGORIES FOR BOX 10(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic:	y - Gift/Award	erage Expense Is/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	ffice Overhead/Rental Expense Transportation Equipment & Related Expense olling Expense Travel in District rinting Expense Travel Out of District						
	The Inst	ruction Guide explains I	how to complete this form.			,				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	ics Commise	sion Filers)				
Sch: 33/44 Rpt: 69/90	Texans for Charles	Schwertner		00065997						
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZE	D						
ISSUER	see p	revious	EXPENDITURES	CHARGED TO A CREDIT						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid						
	\$6.48	02/14/2024	02/28/2024 02/28/2024	1						
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Peacock TV		30 Rockefeller Plaza							
			New York, NY 10112							
8 PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		TV officeholder and stat	ff in-distrcit.						
X Political										
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	Candidate/Officeholder	r name C	Office sought	Office held						
expenditure to benefit C/OH		_								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss							
	\$6.48	04/14/2024	04/17/2024 04/17/2024	ŧ						
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code				
			30 Rockefeller Plaza	30 Rockefeller Plaza						
	Peacock TV									
			New York, NY 10112							
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)			(b) Description	rr ta alta cati						
Office Overhead/Rental Expense			TV officeholder and stat	it in-distrcit.						
X Political										
Non-Political	(C) Check if travel outside		TX, officeholder living exp	pense						
Complete <u>ONLY</u> if direct	Candidate/Officeholder	Office sought	Office held							
expenditure to benefit C/OH	(a) Amount Charged	(h) Data of Charge	(a) Data (a) Cradit Card Iaa	ver Deid						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss 05/22/2024 05/22/2024							
	\$6.48	05/14/2024								
PAYEE				City	Ctata	Zin Code				
PATEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Peacock TV		30 Rockefeller Plaza							
			New York, NY 10112							
PURPOSE OF	(a) Category			(b) Description						
EXPENDITURE (See Categories listed at the top of this schedule)			TV officeholder and staff in-distrcit.							
X Political	Office Overhead/Ren	tal 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	r name C	Office sought	Office held						
expenditure to benefit C/OH										

EXPENDITURES MADE BY CREDIT CARD

	EXPENDITURE CATEGORIES FOR BOX 10(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Accounting/Banking Fees O Consulting Expense Pr Contributions/ Donations Made By - Gift/Awards/Memorials Expense Pr			oan Repayment/Reimbursement office Overhead/Rental Expense olling Expense rinting Expense alaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
	The Inst	ruction Guide explains h	now to complete this form.						
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	ics Commiss	sion Filers)			
Sch: 34/44 Rpt: 70/90	Texans for Charles	Schwertner		00065997					
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZ						
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CRE CARD	CHARGED TO A CREDIT					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid						
	\$17.00	04/04/2024	04/17/2024 04/17/202	24					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Secure Austin		405 Colorado Garage						
			Austin, TX 78701						
8 PURPOSE OF	(a) Category		(b) Description						
	(See Categories listed at the top Fees	of this schedule)	Parking for officeholde	r meeting					
X Political									
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin	, TX, officeholder living ex	oense				
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name O	ffice sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is 02/28/2024 02/28/202						
	\$21.00	02/09/2024	0212012024 021201202	24					
PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code			
	Charatan Llatal		1101 Woodlawn Ave						
	Sheraton Hotel								
		_	Georgetown, TX 78628						
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)			(b) Description						
EXPENDITURE (See Categories listed at the top of this schedule) Fees			Parking fee for Officeh	older.					
X Political									
Non-Political	(C) Check if travel outside		, TX, officeholder living ex	oense					
Complete <u>ONLY</u> if direct	Candidate/Officeholder	ffice sought	Office held						
expenditure to benefit C/OH		ever Del-I							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is 02/28/2024 02/28/202						
	\$10.00	02/09/2024		- 7					
PAYEE			(b) Dovoo oddrooo	Cite	Ctoto	Zip Cada			
	(a) Payee name		(b) Payee address; 1101 Woodlawn Ave	City,	State,	Zip Code			
	Sheraton Hotel		TTOT WOODIAWN AVE						
			Georgetown, TX 7862	8					
PURPOSE OF	(a) Category		-	(b) Description					
EXPENDITURE	EXPENDITURE (See Categories listed at the top of this schedule)		Parking fee for Officeholder.						
X Political	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		ffice sought	Office held					
expenditure to benefit C/OH		-	U U						
· · · · · · · · · · · · · · · · · · ·									

Markings prozes Considered beam of Considered beam of Con		EXPENDITURE CATEGORIES FOR BOX 10(a)								
1 Total pages Schedule F4: 2 FILER NAME 3 File ID (Ethics Commission Filers) 00055997 4 CREDIT CARD issue francial institution issue previous 5 TOTAL OF UNITEMZED EXPENDITURES Charge 01/16/2024 \$ 6 PAYMENT (a) Amount Charged (b) Date of Charge 01/16/2024 (b) Date of Charge 01/29/2024 01/29/2024 \$ 7 PAYEE (a) Payee name (b) Date of Charge 01/29/2024 (c) Date(s) Credit Card Issuer Paid 01/29/2024 7 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 10/29/2024 8 PURPOSE OF EXPENDITURE expendence to benefit C/OH (a) Category (streamed outside of texast-compute streame Add) 11/09/2024 (b) Description Files 30/2004 9 Complete DALX if direct card instead of texast-compute streame Add) 11/09/2024 (c) Date(s) Credit Card Issuer Paid 01/10/2024 9 Complete DALX if direct Card Issuer Paid 01/09/2024 (b) Date of Charge 01/09/2024 (c) Date(s) Credit Card Issuer Paid 01/10/2024 PAYEE (a) Payee name (b) Date of The sought 01/09/2024 (b) Payee address; City, State, Zip Code 2218 E MAIN ST HWY84 State, Zip Code 2218 E MAIN ST HWY84 (c) Date(s) Credit Card Issuer Paid 02/20/2024 02/20/204 (c) Date(s) Credit Card Issuer Paid 02/20/20/20/20/20/20/20/20/20/20/20/20/2	Accounting/Banking Consulting Expense Contributions/ Donations Made By	Fees Food/Beve / - Gift/Award al Committee Legal Serv	rage Expense s/Memorials Expense ices	office Overhead/Rental Expense Transportation Equipment & Related Expense olling Expense Travel in District rinting Expense Travel Out of District						
Sch: 35/44 Rpt: 71/90 Texans for Charles Schwertner 00065997 4 CREDIT CARD ISSUER Name of linancial institution see previous 5 TOTAL OF UNITEMIZED CHARGED TO A CREDIT CARD \$ 6 PAYMENT (a) Amount Charged \$64.04 (b) Date of Charge 01/16/2024 (c) Date(s) Credit Card Issuer Paid 01/29/2024 \$ 7 PAYEE (a) Payee name Georgetown (b) Payee address; Clear Rd City, State, Zip Code 1006 Learnder Rd 8 PURPOSE OF EXPENDITURE [X] Political (a) Category fee: Cargetown (b) Description 10 Complete ONLY if direct expenditure to benefit C/OH (a) Amount Charged (b) Date of Charge 01/09/2024 Office sought Office sought 9 Complete ONLY if direct expenditure to benefit C/OH (a) Amount Charged (b) Date of Charge 01/09/2024 Office sought Office sought Office held PAYEE (a) Amount Charged S49.36 (b) Date of Charge 01/09/2024 Office sought Office held PAYEE (a) Amount Charged S49.36 (b) Date of Charge 01/09/2024 Office sought Office held PAYEE (a) Cardegory (the: Cargital state at the top of the schedule) Transportation Equipment And Related Expense City, State, Zip Code 2218 E MAIN ST HWY84 State, Zip Code 2218 E MAIN ST HWY84 PAYEE (a) Payee name State Transportation Equipment And Relate		The Inst	ruction Guide explains h	now to complete this form.						
4 CREDIT CARD ISSUER Name of financial institution See previous 5 TOTAL OF UNITEMIZED CHARGED TO A CREDIT CARD \$ 6 PAYMENT (a) Amount Charged \$64.04 (b) Date of Charge 01/16/2024 (c) Date(s) Credit Card Issuer Paid 01/29/2024 \$ 7 PAYEE (a) Payee name Georgetown (b) Payee address; 1006 Leander Rd City, State, Zip Code 8 PURPOSE OF EXPENDITURE (a) Category (fee categories tasks at ne top of this scheate) Transportation Equipment And Related (c) Clock # aved auside of toss, Comptex Scheate) (b) Description 9 Complete QNLY If direct Sunce Candidate/Officeholder name Office sought Office held 01/10/2024 9 Complete QNLY If direct Sunce (a) Payee name (b) Date of Charge (b) Date of Charge 01/10/2024 Office sought Office held 01/10/2024 9 Complete QNLY If direct Sunce (a) Amount Charged (b) Date of Charge (b) Date of Charge 01/10/2024 (b) Datesciption PAYEE (a) Payee name Sunce (b) Date of Charge 01/10/2024 (b) Date of Charge 01/10/2024 City, State, Zip Code 2218 E MAIN ST HWY84 Complete QNLY If direct Sunce Candidate/Officeholder name Office sought Office held 01/10/2024 PAYEE (a) Category (b) Description Candidat					3 Filer ID (Ethics Commission Filers)					
ISSUER see previous EXPENDITURES CHARGED TO A CREDIT CARD \$ 6 PAYMENT (a) Amount Charged S64.04 (b) Date of Charge 01/16/2024 (c) Date(s) Credit Card Issuer Paid 01/29/2024 01/29/2024 7 PAYEE (a) Payee name Georgetown (b) Payee address: 01/06 Leander Rd City, State, Zip Code 8 PURPOSE OF EXPENDITURE For any postation Equipment And Related Expense (a) Category (b) Description City, State, Zip Code 9 Complete OALLY if direct Conditate/Officeholder name Office sought Office hold 9 Complete OALLY if direct Conditate/Officeholder name (b) Date of Charge 01/09/2024 (c) Date(s) Credit Card Issuer Paid O1/10/2024 01/10/2024 PAYEE (a) Payee name Suncco (b) Date of Charge 01/09/2024 (c) Date(s) Credit Card Issuer Paid O1/10/2024 01/10/2024 PAYEE (a) Payee name Suncco (b) Date of Charge 01/09/2024 (c) Date(s) Credit Card Issuer Paid O1/10/2024 01/10/2024 PAYEE (a) Payee name Suncco (b) Payee address; City, State, Zip Code PAYEE (a) Category (see Caegory (b) Date of Charge 01/09/2024 (c) Date(s) Credit Card Issuer Paid O1/10/2024 PAYEE (a) Category (see Caegory (b) Payee address; City, State, Zip Code Complete ONLY if direct Complete ONLY if	Sch: 35/44 Rpt: 71/90	Texans for Charles	Schwertner		00065997					
\$64.04 01/16/2024 01/29/2024 01/29/2024 7 PAYEE (a) Payee name (b) Payee address; City. State, Zip Code 8 PURPOSE OF (a) Category (b) Category (b) Description Fuel for out of district officeholder travel. Y Political (c) Category (c) Category (c) Category (c) Category Y Non-Political (c) Category (c) Category (c) Category (c) Category Y Candidate/Officeholder name Office sought Office hold Office hold PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(S) Credit Card Issuer Paid 01/02/024 PAYEE (a) Payee name (b) Payee address; City. State, Zip Code Sunoco (a) Category (b) Payee address; City. State, Zip Code YepeNitical (c) Category (b) Payee address; City. State, Zip Code YepeNitical (a) Category (b) Payee address; City. State, Zip Code YepeNitical (c) Catek if nawel outside of texas. Complete Schedule Fuel for out				EXPENDITURES CHARGED TO A CREDI	\$					
B PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description 9 Omplete ONLY if direct Candidate/Officeholder name Office sought Office hold 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office hold PAYMENT (a) Payee name Sunco (b) Date of Charge 01/09/2024 (c) Date(s) Credit Card Issuer Paid 01/10/2024 01/10/2024 City, State, Zip Code 2218 E MAIN ST HWY84 PAYEE (a) Payee name Sunco (b) Payee address; City, State, Zip Code 2218 E MAIN ST HWY84 City, State, Zip Code 2218 E MAIN ST HWY84 Complete ONLY if direct Candidate/Officeholder name Office sought Office hold travel. PAYEE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Payee address; City, State, Zip Code VERPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Payee address; City, State, Zip Code (c) Ditted I travel outside of Texas. Complete Schedule T. Check if Austin, TX. officeholder travel. Complete ONLY if direct Candidate/Officeholder name Office sought (c) Ditted I travel outside of Texas. Complete Schedule T. Check if Austin, TX. officeholder fining expense (c) Dittek I travel outside of Texas. Complete Sch	6 PAYMENT	.,								
B PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description 9 Non-Political (c)	7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code					
8 PURPOSE OF EXPENDITURE (a) Category (be categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description 9 Complete QNLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office hold expense 9 Complete QNLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office hold expense 9 Complete QNLY if direct expenditure to benefit C/OH (a) Amount Charged \$49.36 (b) Date of Charge 01/09/2024 (c) Date(s) Credit Card Issuer Paid 01/10/2024 01/10/2024 PAYEE (a) Payee name (b) Payee address; Sunoco City, State, Zip Code 2218 E MAIN ST HWY84 VERPOSE OF EXPENDITURE (a) Category (be categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description 10 Pointical (c) Check if avait outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder travel. 11 Complete QNLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held 12 Pointical (c) Check if avait outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 13 Pointical (c) Check if avait outside of Texas. Complete Schedule T. Check if Aus		Georgetown								
EXPENDITURE Creac categories issted at the top of this schedule) Transportation Equipment And Related Expense Fuel for out of district officeholder travel. Non-Political (c)										
Image: Second		(See Categories listed at the top Transportation Equipt		., .						
expenditure to benefit C/OH PAYMENT (a) Amount Charged \$49.36 (b) Date of Charge 01/09/2024 (c) Date(s) Credit Card Issuer Paid 01/10/2024 PAYEE (a) Payee name Sunoco (b) Payee address; City, State, Zip Code 2218 E MAIN ST HWY84 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Fuel for out of district officeholder travel. Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name \$25.33 Office Schedule T. Ol/21/2024 Check if Austin, TX, officeholder living expense PAYEE (a) Amount Charged \$25.33 (b) Date of Charge 02/21/2024 (c) Date(s) Credit Card Issuer Paid 02/28/2024 02/28/2024 PAYEE (a) Payee name Sweetwaters Coffee & Austin (b) Payee address; City, State, Zip Code 316 W 12th St PURPOSE OF (a) Category (b) Description	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expense					
PAYMENT (a) Amount Charged \$49.36 (b) Date of Charge 01/09/2024 (c) Date(s) Credit Card Issuer Paid 01/10/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code PURPOSE OF EXPENDITURE (a) Category (b) Description GATESVILLE, TX 76528 (b) Description Viscource (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder travel. (b) Description Complete QNLY if direct expenditure to benefit C/OH (a) Amount Charged (b) Date of Charge Office sought Office held PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid Office held PAYMENT (a) Amount Charged (b) Date of Charge Office sought Office held PAYEE (a) Payee name (b) Date of Charge (c) Date(s) Credit Card Issuer Paid O2/28/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code Sweetwaters Coffee Austin, TX 78701 Austin, TX 78701 Austin, TX 78701 Austin, TX 78701	9 Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held					
PAYEE (a) Payee name (b) Payee address; City, State, Zip Code PURPOSE OF Sunoco GATESVILLE, TX 76528 (b) Payee address; City, State, Zip Code PURPOSE OF (a) Category (b) Category (c) Description Fuel for out of district officeholder travel. X Political (c) Check if travel outside of Texas. Complete Schedule) Transportation Equipment And Related Check if Austin, TX, officeholder travel. Complete QNLY if direct Candidate/Officeholder name Office sought Office held PAYEE (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid 02/28/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code PAYEE (a) Payee name (b) Payee address; City, State, Zip Code PAYEE (a) Payee name (b) Payee address; City, State, Zip Code Sweetwaters Coffee & Austin Austin, TX 78701 Austin, TX 78701 PurPOSE OF (a) Category (b) Description	expenditure to benefit C/OH									
Image: construction of the system and the system the system	PAYMENT			., .,						
Sunoco GATESVILLE, TX 76528 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought PAYMENT (a) Amount Charged \$25.33 (b) Date of Charge 02/21/2024 (c) Date(s) Credit Card Issuer Paid 02/28/2024 02/28/2024 PAYEE (a) Payee name Sweetwaters Coffee & Austin (b) Payee address; Austin, TX 78701 City, State, Zip Code 316 W 12th St PURPOSE OF (a) Category (b) Description City, State, Zip Code	PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense (b) Description Fuel for out of district officeholder travel. 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 sought Office held PAYMENT (a) Amount Charged \$25.33 (b) Date of Charge 02/21/2024 (c) Date(s) Credit Card Issuer Paid 02/28/2024 02/28/2024 PAYEE (a) Payee name Sweetwaters Coffee & Austin (b) Payee address; Austin, TX 78701 City, State, Zip Code PURPOSE OF (a) Category (b) Description Description		Sunoco			2218 E MAIN ST HWY84					
EXPENDITURE (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense Fuel for out of district officeholder travel. Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete QNLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held PAYMENT (a) Amount Charged \$25.33 (b) Date of Charge 02/21/2024 (c) Date(s) Credit Card Issuer Paid 02/28/2024 02/28/2024 PAYEE (a) Payee name Sweetwaters Coffee & Austin (b) Payee address; Austin, TX 78701 City, State, Zip Code PURPOSE OF (a) Category (b) Description (b) Description	PURPOSE OF (a) Category				5					
Image: Series in the system of the system					iceholder travel.					
Image: Complete Conception of the conceptic conceptic conceptic conception of the conception of the concept	X Political									
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held PAYMENT (a) Amount Charged \$25.33 (b) Date of Charge 02/21/2024 (c) Date(s) Credit Card Issuer Paid 02/28/2024 02/28/2024 PAYEE (a) Payee name Sweetwaters Coffee & Austin (b) Payee address; City, State, Zip Code Zip Code PURPOSE OF (a) Category (b) Description (b) Description City, State, Zip Code			of Taxas, Complete Schedule		X officeholder living evnense					
expenditure to benefit C/OH (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid PAYMENT (a) Amount Charged 02/21/2024 (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name (b) Payee address; City, State, Zip Code Sweetwaters Coffee & Austin Sweetwaters Coffee & Austin Austin, TX 78701 Austin, TX 78701 PURPOSE OF (a) Category (b) Description (b) Description										
PAYMENT (a) Amount Charged \$25.33 (b) Date of Charge 02/21/2024 (c) Date(s) Credit Card Issuer Paid 02/28/2024 02/28/2024 PAYEE (a) Payee name Sweetwaters Coffee & Austin (b) Payee address; City, State, Zip Code PURPOSE OF (a) Category (b) Date of Charge 02/21/2024 (b) Payee address; City, State, Zip Code 9URPOSE OF (a) Category (b) Description (b) Description										
\$25.33 02/21/2024 02/28/2024 02/28/2024 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code Sweetwaters Coffee & Austin 316 W 12th St Austin, TX 78701 Vertical State Vertical State PURPOSE OF (a) Category (b) Description Vertical State Vertical State		(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid					
PURPOSE OF (a) Category (b) Purpose of the state of										
Sweetwaters Coffee & Austin Austin, TX 78701 PURPOSE OF (a) Category (b) Description	PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code					
PURPOSE OF (a) Category (b) Description		Sweetwaters Coffe	e & Austin							
		(a) Category								
Food/Beverage Expense		(See Categories listed at the top		Staff beverage while trav	Staff beverage while traveling to attend meeting with office					
Image: Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	expenditure to benefit C/OH									
Sweetwaters Coffee & Austin Austin, TX 78701 PURPOSE OF (a) Category (b) Description	PAYEE	(a) Payee name			City, State, Zip Code					
PURPOSE OF (a) Category (b) Description	PAYEE		l e & Austin		City, State, Zip Code					
		(a) Category								
EXPENDITURE I (See Categories listed at the top of this schedule)										
Food/Beverage Expense		Food/Beverage Expense								
	Non-Political		X officeholder living expense							
	Complete ONLY if direct				Office held					
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense										
Food/Beverage Expense										
	Non-Political									
Image: Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense										
Image: Non-Political Image: Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held										

	EXPENDITURE CATEGORIES FOR BOX 10(a)								
	Advertising Expense Accounting/Banking	Event Expe Fees	ense	Loan Repayment/R Office Overhead/R			itation/Fundraising Ex sportation Equipment		znonco
	Consulting Expense	Food/Beve	erage Expense	Polling Expense	ental Expense	Trave	el in District	& Related L	турензе
	Contributions/ Donations Made By Candidate/Officeholder/Politica		s/Memorials Expense ices	Printing Expense Salaries/Wages/Co	ontract Labor		el Out of District ER (enter a category	not listed at	ove)
		The Inst	ruction Guide explains h	low to complete	this form.				
1	Total pages Schedule F4:	2 FILER NAME				3	B Filer ID (Ethics	s Commiss	ion Filers)
	Sch: 36/44 Rpt: 72/90	Texans for Charles	Schwertner			C	00065997		
4	CREDIT CARD	Name of finar	ncial institution		OF UNITEMIZE	ED			
	ISSUER	see p	revious		IDITURES GED TO A CREI	ыт \$	6		
				CARD	JED TO A CREI				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		(c) Date(s) Credit Card Issuer Paid 02/28/2024 02/28/2024				
		\$59.51	02/12/2024	02/28/20					
		\$00.01	02/12/2021						
7	PAYEE	(a) Payee name		(b) Payee	address;		City,	State,	Zip Code
				903 W 1	903 W 12th St				
		ThunderCloud Subs	S						
				Austin, T	X 78701				
8	PURPOSE OF	(a) Category		(b) Descri	ption				
	EXPENDITURE	(See Categories listed at the top	,	Meeting	with staff to dis	scuss	s campaign/ of	fficehold	ler issues
	X Political	Food/Beverage Expe	lise						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т.	Check if Austin,	, TX, off	ficeholder living expe	nse	
9	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought			Office held		
	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Iss		Paid		
		\$13.09	05/29/2024	06/04/20	024 06/04/202	24			
	PAYEE (a) Payee name				address;		City,	State,	Zip Code
				1515 Thi	ird Street				
		Uber Technologies,	, Inc						
				San Frar	nsisco, TX 941	L58			
PURPOSE OF (a) Category			(b) Descri	ption					
	EXPENDITURE	(See Categories listed at the top Transportation Equipr		Transpor	rtation in Austi	n, TX	(for senate sta	ate affaiı	rs hearing.
	X Political	Expense							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т.	Check if Austin,	, TX, off	ficeholder living expe	nse	
	Complete ONLY if direct Candidate/Officeholder name Office			ffice sought			Office held		
е	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Iss		Paid		
		\$45.51	01/10/2024	01/29/20)24 01/29/202	24			
	PAYEE	(a) Payee name		(b) Payee	address;		City,	State,	Zip Code
				5317 WI	LLIAMS DR				
		Walgreens							
					Georgetown, TX 78633				
	PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)			(b) Description					
	Food/Beverage Expense			Meeting with staff to discuss campaign/ officeholder issues				er issues	
	X Political								
	Non-Political	(C) Check if travel outside of Texas. Complete Schedule T.							
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought			Office held		
е	xpenditure to benefit C/OH								
						-			

EXPENDITURES MADE BY CREDIT CARD

EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	y - Gift/Award	erage Expense s/Memorials Expense	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 Inst	now to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Sch: 37/44 Rpt: 73/90	Texans for Charles	Schwertner		00065997		
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZE			
ISSUER	see previous		EXPENDITURES CHARGED TO A CREE CARD	\$ DIT		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss			
	\$38.63	02/04/2024	02/28/2024 02/28/202	4		
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code		
	Walgroops		5317 WILLIAMS DR			
	Walgreens					
			Georgetown, TX 78633			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	scuss campaign/ officeholder issues		
X Political	Food/Beverage Expe	nse	Meeting with staff to discuss campaign/ officeholder issues			
Non-Political						
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living expense Office held		
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
PAYMENT	(a) Amount Charged (b) Date of Charge		(c) Date(s) Credit Card Iss	(c) Date(s) Credit Card Issuer Paid		
	\$44.39	02/14/2024	02/28/2024 02/28/2024	4		
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	Walgreens		5317 WILLIAMS DR			
			Coorgotown TV 79622			
PURPOSE OF	(a) Category		Georgetown, TX 78633 (b) Description			
EXPENDITURE	(See Categories listed at the top	,	()	scuss campaign/ officeholder issues		
X Political	Food/Beverage Expe	nse				
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		office sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss			
	\$17.30	05/28/2024	06/04/2024 06/04/202	4		
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	Whataburger		1392 US-290			
PURPOSE OF	(a) Category		Elgin, TX 78621 (b) Description			
EXPENDITURE	(See Categories listed at the top			aff to discuss legislative business		
X Political	Food/Beverage Expe	nse				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living expense		
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held		
expenditure to benefit C/OH						

EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made I Candidate/Officeholder/Politie	By - Gift/Award	erage Expense Is/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Transportation Equipm Travel in District Travel Out of District OTHER (enter a categ	ent & Related I		
The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	nics Commiss	sion Filers)	
Sch: 38/44 Rpt: 74/90	Texans for Charles	Schwertner		00065997			
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMI				
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CR CARD	EDIT			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid			
	\$61.14	06/03/2024					
7 PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code	
			10019 S I-35 Frontag	ge Rd			
	Hill Country Spring	S					
			Austin, TX 78747				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
	Office Overhead/Ren	,	Water for Capitol offic	ce			
X Political							
Non-Political		of Texas. Complete Schedule		tin, TX, officeholder living ex	pense		
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			
	\$61.14	06/03/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Hill Country Spring	5	10019 S I-35 Frontag	ge Rd			
		5					
	(a) Catagony		Austin, TX 78747 (b) Description				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	Water for Capitol offic	ce			
X Political	Office Overhead/Ren	tal Expense					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		tin, TX, officeholder living ex	mense		
Complete ONLY if direct	Candidate/Officeholder		Office sought	Office held			
expenditure to benefit C/OH			-				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid			
	\$100.51	06/06/2024					
PAYEE	(a) Payee name	-	(b) Payee address;	City,	State,	Zip Code	
	Spectrum		12405 Powerscourt E	Dr			
	opeenan						
PURPOSE OF	(a) Category		Des Peres, MO 6313 (b) Description	5L			
EXPENDITURE	(See Categories listed at the top		Internet for officehold	ler Austin apartme	nt		
X Political	Office Overhead/Ren	tal Expense					
Non-Political		of Texas. Complete Schedule		tin, TX, officeholder living ex	pense		
Complete ONLY if direct	Candidate/Officeholder	r name O	Office sought	Office held			
expenditure to benefit C/OH							

	EXPENDITURE	ES MADE BY C	CREDIT CARD		
	Advertising Expense Accounting/Banking	Event Expe Fees	Offi	n Repayment/Reimbursement ce Overhead/Rental Expense	
	Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee		s/Memorials Expense Prir	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		
	Sch: 39/44 Rpt: 75/90	Texans for Charles	Schwertner		
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMI	
	ISSUER	see pi	EXPENDITURES CHARGED TO A CR CARD		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card I	
		¢1 500 00			

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

		•	•			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Sch: 39/44 Rpt: 75/90	Texans for Charles	Schwertner		00065997		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid		
	\$1,500.00	06/06/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	Norfleet Strategies		504 W 12th St			
			Austin, TX 78701			
8 PURPOSE OF	(a) Category		(b) Description			
	(See Categories listed at the top Consulting Expense	of this schedule)	Campaign communication	is consulting		
X Political						
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	r name Offi	ce sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid		
	\$311.04	06/07/2024				
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code		
	HEB		2652 LAKE AUSTIN BLVI	D		
			Austin, TX 78703			
PURPOSE OF	(a) Category		(b) Description			
	(See Categories listed at the top Office Overhead/Ren		Capitol Office supplies, groceries.			
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	r name Offi	ce sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid		
	\$6.48	06/14/2024				
PAYEE						
PATEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	Peacock TV		30 Rockefeller Plaza			
			New York, NY 10112			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE			TV officeholder and staff in-distrcit.			
X Political	Office Overhead/Ren	lai ⊏xpense				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense		
Complete <u>ONLY</u> if direct	Candidate/Officeholder		ce sought	Office held		
expenditure to benefit C/OH			-			
	I					

EXPENDITURE CATEGORIES FOR BOX 10(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	y - Gift/Award	erage Expense Is/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Sch: 40/44 Rpt: 76/90	Texans for Charles	Schwertner		00065997	
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZE		
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CRED CARD	\$ ⊤	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid	
	\$2.12	06/16/2024			
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	
			1600 Amphitheatre Park	way	
	Google Drive				
			Mountain View, CA 940	43	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	vices for campaign	
X Political	Office Overhead/Ren	tal Expense	Online data storage services for campaign		
Non-Political		of Toylog, Complete Cabadula		TV officeholder living overcoo	
			ffice sought	CX, officeholder living expense Office held	
expenditure to benefit C/OH					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid	
	\$102.21	06/21/2024			
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	
	CoDoddy		2155 E. GoDaddy Way		
	GoDaddy				
			Tempe, AZ 85284		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Campaign Website main	ntenance	
X Political	Advertising Expense			inchance	
Non-Political					
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, 1 ffice sought	CX, officeholder living expense Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Canalate, Onecholael	liane 0	nice sought	onice neu	
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid	
	\$79.01	06/30/2024			
	\$10.01	00/00/2024			
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	
			1600 Amphitheatre Pkw	ry .	
Youtube TV					
			Mountain View, CA 940	43	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description TV for officeholder and	offico	
X Political	Office Overhead/Ren		TV for oncentitider and	onice.	
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. X Check if Austin, T	rX, officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held	
expenditure to benefit C/OH					

		EXP	ENDITURE CATEGO	RIES FOR BOX 10(a)			
	Advertising Expense Accounting/Banking	Event Exp Fees	ense	Loan Repayment/Reimbursement Office Overhead/Rental Expense	Solicitation/Fundraisi Transportation Equip		Expense
	Consulting Expense Contributions/ Donations Made By	Food/Beve	erage Expense Is/Memorials Expense	Polling Expense Printing Expense	Travel in District Travel Out of District		_xponeo
	Candidate/Officeholder/Politica			Salaries/Wages/Contract Labor	OTHER (enter a cate	gory not listed at	oove)
		The Inst	truction Guide explains	how to complete this form.			
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (E	thics Commiss	sion Filers)
	Sch: 41/44 Rpt: 77/90	Texans for Charles	Schwertner		00065997		
4	CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZE			
	ISSUER	see p	revious	EXPENDITURES CHARGED TO A CREE	\$		
				CARD			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid		
		\$87.30	06/04/2024				
		φ07.30	00/04/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
		(u) r uječ name		601 W Martin Luther Ki		Otato,	Lip Couc
		Jimmy John's					
				Austin, TX 78701			
8	PURPOSE OF	(a) Category		(b) Description			
Ů	EXPENDITURE	(See Categories listed at the top	of this schedule)	Lunch for office staff.			
	X Political	Food/Beverage Expe	inse				
	Non-Political						
_			of Texas. Complete Schedule		TX, officeholder living	expense	
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholde	r name C	Office sought	Office held		
е		(a) Amount Channed	(b) Data of Charge	(a) Data(a) Cradit Card las	user Daid		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Palu		
		\$83.84	06/11/2024				
	PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code
		ExxonMobil		3821 TX-29			
				Georgetown, TX 78628	3		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description Fuel for travel to Austin for hearing.			
	X Political						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	e T. Check if Austin,	TX, officeholder living	expense	
	Complete ONLY if direct	Candidate/Officeholde	r name C	Office sought	Office held		
е	xpenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid		
		\$169.36	06/12/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
				7849 Shoal Creek Blvd			
		Cabo Bob's					
				Austin, TX 78757			
	PURPOSE OF	(a) Category		(b) Description			
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Lunch for office staff.			
	X Political	i oourbeverage Expe					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	e T. Check if Austin,	TX, officeholder living	expense	
	Complete ONLY if direct	Candidate/Officeholde		Dffice sought	Office held		
е	xpenditure to benefit C/OH						
		<u> </u>					
Fo	rms provided by Texas E	thics Commission	www.ethics.s	state.tx.us	Ve	rsion V4.1.().d378aba

EXPENDITURES MADE BY CREDIT CARD

EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Event Expense Lo Accounting/Banking Fees Of			Dan Repayment/Reimbursement Solicitation/Fundraising Expense ffice Overhead/Rental Expense Transportation Equipment & Related Expense			
Consulting Expense Food/Beverage Expense Contributions/ Donations Made By - Gift/Awards/Memorials I		rage Expense s/Memorials Expense		ravel in District ravel Out of District		
Candidate/Officeholder/Politica			Salaries/Wages/Contract Labor C	OTHER (enter a category not listed above)		
	The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)		
Sch: 42/44 Rpt: 78/90	Texans for Charles			00065997		
4 CREDIT CARD ISSUER	Name of fina	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES	\$		
loooen	see previous		CHARGED TO A CREDIT			
			CARD			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Pald		
	\$20.00	06/15/2024				
7 PAYEE				City State Zin Coo		
/ PATEE	(a) Payee name		(b) Payee address; 12719 Burnet Rd	City, State, Zip Coo		
	TxTag		12/19 Burnet Ru			
	_		Austin, TX 78727			
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top	,	Toll for officeholder trave	l to Austin		
X Political	Transportation Equipment And Related					
X Political Expense Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin TX	, officeholder living expense		
			Office held			
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
	\$77.67	06/19/2024				
	<i>Q</i> THO	00/20/2021				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Coo		
			110 San Antonio St			
	Torchy's Tacos		Unit #120			
			Austin, TX 78701			
PURPOSE OF	(a) Category (See Categories listed at the top	of this schoolule)	(b) Description			
	Food/Beverage Expe		Lunch for office staff.			
X Political						
Non-Political		of Texas. Complete Schedule T		, officeholder living expense		
Complete ONLY if direct	Candidate/Officeholder	name Of	fice sought	Office held		
expenditure to benefit C/OH				Detal		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 01/29/2024 01/29/2024	er Pald		
	\$1,650.00	01/12/2024				
PAYEE			(b) Dovoo oddrooo:			
PATEE	(a) Payee name		(b) Payee address; 212 E Main St	City, State, Zip Coo		
	Round Rock Cham	ber				
			Round Rock, TX 78664			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top		Donation for annual dinne	er.		
X Political Contributions/Donations Made By Candidate/Officeholder/Political Committee						
Non-Political		of Texas. Complete Schedule 1		, officeholder living expense		
Complete <u>ONLY</u> if direct	Candidate/Officeholder		fice sought	Office held		
expenditure to benefit C/OH		-	5			
	l					

EXPENDITURES	MADE BY	CREDIT	CARD
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	EXPE	ENDITURE CATEGOR	IES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	erage Expense s/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising I Transportation Equipme Travel in District Travel Out of District OTHER (enter a categor	nt & Related				
	The Inst	ruction Guide explains h	ow to complete this form.						
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)			
Sch: 43/44 Rpt: 79/90	Texans for Charles	Schwertner							
4 CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZE						
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CRED CARD	91T \$					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss						
	\$250.00	02/08/2024	02/28/2024 02/28/2024	1					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Bastrop County Re	publican Party	443 State Hwy 71						
			Bastrop, TX 78602						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
	Contributions/Donatio	ons Made By	Donation for annual event.						
X Political	Candidate/Officehold	er/Political Committe	mittee						
Non-Political		of Texas. Complete Schedule		TX, officeholder living exp	ense				
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held					
expenditure to benefit C/OH		1	i						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss 04/17/2024 04/17/2024						
	\$6.48	03/14/2024	04/1//2024 04/1//2024	+					
PAYEE						7. 0. 1			
PATEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Peacock TV		30 Rockefeller Plaza						
			New York, NY 10112						
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top		TV officeholder and stat						
X Political	Office Overhead/Rent	tal Expense							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T Check if Austin	TX, officeholder living exp	ense				
Complete <u>ONLY</u> if direct	Candidate/Officeholder	•	ffice sought	Office held	lense				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid					
	\$82.00	05/13/2024	05/22/2024 05/22/2024	1					
	Q02.00	00/10/2024							
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
			P.O. Box 5014						
	AT&T								
			Carol Stream, IL 60197						
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Mobile phone service for	or campaign/office	eholder p	urposes			
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 O	ffice sought	Office held					
expenditure to benefit C/OH									

		EXPE	ENDITURE CATEGOR	IES FOR BOX	10(a)						
	Advertising Expense Accounting/Banking	Event Expe Fees	ense	Loan Repayment/R Office Overhead/Re			tion/Fundraising ortation Equipme		Expense		
	Consulting Expense Contributions/ Donations Made By	Food/Bever	rage Expense s/Memorials Expense	Polling Expense Printing Expense	· · · ·	Travel i	in District Out of District				
	Candidate/Officeholder/Politica	l Committee Legal Servi	ices	Salaries/Wages/Co			R (enter a catego	ry not listed al	oove)		
			ruction Guide explains h	low to complete	this form.						
1	Total pages Schedule F4:						Filer ID (Ethi	cs Commiss	sion Filers)		
	Sch: 44/44 Rpt: 80/90	Texans for Charles	Schwertner			00	065997				
4	CREDIT CARD	Name of finar	ncial institution		OF UNITEMIZ	ZED S					
	ISSUER	see pr	revious	CHARC	GED TO A CRE						
				CARD							
6	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Is)24 04/17/202		id				
		\$82.00	04/13/2024	04/17/20	124 04/11/202	24					
_	54//25						-				
7	PAYEE	(a) Payee name		(b) Payee		(City,	State,	Zip Code		
		AT&T	P.O. Box 5014								
				Course Cha		7					
8	PURPOSE OF	(a) Category		(b) Descri	eam, IL 6019	97					
0	EXPENDITURE	(See Categories listed at the top	of this schedule)	. ,		for carr	ampaign/officeholder purposes				
	X Political	Office Overhead/Rent	meane p								
	Non-Political		-f.T				- la - lal - a là da a - a an				
0	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought			eholder living exp	Jense			
	complete <u>ONE r</u> if direct penditure to benefit C/OH	Culturale, Childenolder		nice sought		U					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Is	ssuer Pa	id				
		\$64.96) 24 04/17/202							
		Ψ04.50	03/07/2024								
	PAYEE	(a) Payee name		(b) Payee	address;	(City,	State,	Zip Code		
				2027 S L	amar Blvd						
		Bouldin Acres									
				Austin, T	X 78704						
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schoolule)	(b) Descri							
		Event Expense	of this schedule)	Staff goir	ng away party	y event	space renta	al fee.			
	X Political	•									
	Non-Political		of Texas. Complete Schedule		Check if Austin	n, TX, office	eholder living exp	oense			
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		0	ffice held				
e	penditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Is 024 01/29/202		id				
		\$6.48	01/14/2024	01/20/20	124 01/20/202	27					
	DAVEE			(1) -			-1:				
	PAYEE	(a) Payee name		(b) Payee		(City,	State,	Zip Code		
		Peacock TV		30 ROCK	efeller Plaza						
				New Yor	k, NY 10112						
	PURPOSE OF	(a) Category		(b) Descri							
	EXPENDITURE	(See Categories listed at the top		.,	holder and st	taff in-d	istrcit.				
	X Political	Office Overhead/Rent	al Expense								
	Non-Political	(C) Check if travel outside of	of Texas. Complete Schedule	 T.	Check if Austin	n, TX. office	eholder living exp	oense			
	Complete ONLY if direct	Candidate/Officeholder		ffice sought			office held				
e	penditure to benefit C/OH			-							
		1									

EXPENDITURES MADE BY CREDIT CARD

	The Instru	ction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/10 Rpt: 81/90			
2	FILER NAME			D (Ethics Commission F	-ilers)		
		Charles Schwertner	0006				
4	Date	5 Name of person from whom amount is received		8 Amount (\$)			
ľ	01/08/2024	Raymond James Bank			\$90.76		
	01/00/2021	6 Address of person from whom amount is received; City; State; Zip Code			¢00.10		
		• Address of person from whom amount is received, Gity, State, Zip Code					
		St. Petersburg, FL 33716					
		7 Purpose for which amount is received Check if p	olitical con	tribution returned to filer			
		Realized gains from bank account interest					
⊨	Date	Name of person from whom amount is received		Amount (\$)			
	01/31/2024	Raymond James Bank			\$289.55		
		Address of person from whom amount is received; City; State; Zip Code					
		St. Petersburg, FL 33716					
		Purpose for which amount is received Check if po	olitical con	tribution returned to filer			
		Realized gains from bank account interest					
	Date	Name of person from whom amount is received		Amount (\$)			
	02/28/2024	Raymond James Bank			\$151.86		
		Address of person from whom amount is received; City; State; Zip Code					
		St. Petersburg, FL 33716					
			olitical con	tribution returned to filer			
		Realized gains from bank account interest					
	Date	Name of person from whom amount is received		Amount (\$)			
	02/29/2024	Raymond James Bank		\$	\$480.74		
		Address of person from whom amount is received; City; State; Zip Code					
		Ot Detershum El 00710					
		St. Petersburg, FL 33716					
			olitical con	tribution returned to filer			
		Realized gains from bank account interest					
	Date	Name of person from whom amount is received		Amount (\$)			
	03/28/2024	Raymond James Bank			\$786.80		
		Address of person from whom amount is received; City; State; Zip Code					
		St. Datersburg, El. 33716					
		St. Petersburg, FL 33716	- 1141 1	tuite dia a sete di di di			
			olitical con	tribution returned to filer			
		Realized gains from bank account interest					

	The Instru	cti	on Guide explains how to complete this form.		I pages Schedule K: : 2/10 Rpt: 82/90		
2	FILER NAME			3	Filer I	D (Ethics Commis	ssion Filers)
	Texans for C	Cha	rles Schwertner		00065	5997	
4	Date	5	Name of person from whom amount is received	<u> </u>		8 Amount (\$)	
	04/30/2024		Raymond James Bank				\$723.96
		6	Address of person from whom amount is received; City; State; Zip Code			·•	
			St. Petersburg, FL 33716				
		7	<u> </u>	olitio	cal cont	ribution returned to	filer
Realized gains from bank account interest							
	Date	Γ	Name of person from whom amount is received			Amount (\$)	
	05/31/2024		Raymond James Bank				\$106.18
			Address of person from whom amount is received; City; State; Zip Code				
		L	St. Petersburg, FL 33716				
				olitio	cal cont	ribution returned to	filer
			Realized gains from bank account interest				
	Date	Γ	Name of person from whom amount is received			Amount (\$)	
	06/28/2024		Raymond James Bank				\$127.57
		Address of person from whom amount is received; City; State; Zip Code					
			St. Petersburg, FL 33716				
		┝		~ 1;+;,	- al aont	with the returned to	Elan
			Realized gains from bank account interest	Ollus	cal com	ribution returned to) flier
		Ļ				T	
	Date		Name of person from whom amount is received			Amount (\$)	*252 200 00
	01/11/2024	ļ	Raymond James Bank				\$250,000.00
			Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
		┢		olitio	cal cont	I ribution returned to	filer
			Orginal investment in US TREASURY BILLS OID 01/11/2024 DUE 01/11/20				
╞	Date	┢	Name of person from whom amount is received			Amount (\$)	
	01/06/2024		Raymond James Bank				\$207,827.77
	-		Address of person from whom amount is received; City; State; Zip Code				
			, ad 000 c. percent and a contract contract, c. 9, ,				
			St. Petersburg, FL 33716				
			Purpose for which amount is received Check if p	olitio	cal cont	ribution returned to	filer
			Sold 7,686 shares in INNOVATOR MSCI EAFE PWR BUFFER ETF JULY ((IJU	IL)		
		<u> </u>					

	The Instru	cti	on Guide explains how to complete this form.		al pages Schedule K: h: 3/10 Rpt: 83/90		
2	FILER NAME			3	Filer ID) (Ethics Commis	sion Filers)
	Texans for C	:ha	rles Schwertner		00065	997	
4	Date	5	Name of person from whom amount is received	I		8 Amount (\$)	
	02/06/2024		Raymond James Bank				\$264,325.74
	l	6	Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
	I	7	Purpose for which amount is received Check if p	olitio	cal conti	ribution returned to	filer
			Sold 7,773 shares in INNOVATOR U.S. EQUITY POWER BUFFER ETF - A	١UC	GUST (PAUG)	
	Date	Γ	Name of person from whom amount is received			Amount (\$)	
	02/06/2024				\$155,000.00		
	1		Address of person from whom amount is received; City; State; Zip Code			1	
	I						
	l		St. Petersburg, FL 33716				
	I	┝		olitic			filor
	I		Orginal investment in US TREASURY BILLS OID 02/06/2024 DUE 02/06/20			ribution returned to 97JC2)	Ther
	D -ta		-		(0==:		
	Date 02/07/2024		Name of person from whom amount is received			Amount (\$)	\$554.40
	02/0772024	ļ	Raymond James Bank				ФЭ Э4.40
	l		Address of person from whom amount is received; City; State; Zip Code				
	I						
	I		St. Petersburg, FL 33716				
	I		Purpose for which amount is received Check if po	olitio	cal conti	ribution returned to	filer
	I		Dividend for shares in ISHARES TR IBONDS 24 TRM HG (IBHD)				
	Date	F	Name of person from whom amount is received			Amount (\$)	
	02/07/2024		Raymond James Bank				\$613.61
	l		Address of person from whom amount is received; City; State; Zip Code			·	
	I						
			St. Petersburg, FL 33716				
	I	\vdash		olitic		l ribution returned to	filor
	I		Dividend for shares in ISHARES TR IBONDS 25 TRM HG (IBHE)	Units			IIICi
⊨	Date	╞	Name of person from whom amount is received			Amount (\$)	
	02/07/2024		Raymond James Bank				\$286.49
	•		Address of person from whom amount is received: City; State: Zip Code			·	• - ·
	I						
	I						
	I		St. Petersburg, FL 33716				
	I	Γ		olitio	cal conti	ribution returned to	filer
			Dividend for shares in ISHARES TR IBONDS DEC24 ETF (IBDP)				

	The Instru	cti	on Guide explains how to complete this form.		ages Schedule K: I/10 Rpt: 84/90		
2	FILER NAME			3	Filer ID) (Ethics Commissi	on Filers)
	Texans for C	ha	rles Schwertner		00065	997	
4	Date	5	Name of person from whom amount is received	1		8 Amount (\$)	
	02/07/2024		Raymond James Bank				\$300.52
		6	Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
		7	<u> </u>	oliti	cal conti	ribution returned to fi	ler
			Dividend for shares in ISHARES TR IBONDS DEC25 ETF (IBDQ)				
	Date		Name of person from whom amount is received			Amount (\$)	
	03/01/2024		Raymond James Bank				\$1,461.62
			Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
				oliti		ribution roturned to fi	lor
			Gain of 1,461.620 shares from original investment in INVESCO STIT TREA			ribution returned to fi	
	Data					í	
	Date 03/07/2024		Name of person from whom amount is received Raymond James Bank			Amount (\$)	\$540.74
	03/07/2024		-				φ040.74
			Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
			Purpose for which amount is received Check if p	oliti	cal conti	ribution returned to fi	ler
			Dividend for shares in ISHARES TR IBONDS 24 TRM HG (IBHD)				
	Date		Name of person from whom amount is received			Amount (\$)	
	03/07/2024		Raymond James Bank				\$597.45
			Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
			<u> </u>	oliti	cal conti	ribution returned to fi	ler
			Dividend for shares in ISHARES TR IBONDS 25 TRM HG (IBHE)				
	Date		Name of person from whom amount is received			Amount (\$)	
	03/07/2024		Raymond James Bank				\$299.56
			Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
		-		oliti	cal cont	I ribution returned to fi	ler
			Dividend for shares in ISHARES TR IBONDS DEC24 ETF (IBDP)	2000			
⊢		<u> </u>	· · · · ·				

	The Instru	cti	on Guide explains how to complete this form.		al pages Schedule K: n: 5/10 Rpt: 85/90		
2	FILER NAME			2		D (Ethics Commis	sion Filers)
-		:ha	rles Schwertner	ľ	00065		
1	Date		Name of person from whom amount is received			8 Amount (\$)	
7	03/07/2024	ľ	Raymond James Bank			G Amount (\$)	\$313.74
	00/01/2024		Address of person from whom amount is received; City; State; Zip Code				φ 010 .1 4
		ľ	Address of person from whom amount is received, "City, State, 21 Code				
			St. Petersburg, FL 33716				
		7		oliti	cal cont	ribution returned to	filer
			Dividend for shares in ISHARES TR IBONDS DEC25 ETF (IBDQ)				
	Date		Name of person from whom amount is received			Amount (\$)	
	03/21/2024		Raymond James Bank				\$258.67
			Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
			<u> </u>			ribution returned to	filer
			Dividend for shares in Flexshares Trust MorningStar Global Upstream Nat	Res	Index	Fund (GUNR)	
	Date		Name of person from whom amount is received			Amount (\$)	
	03/22/2024		Raymond James Bank				\$297.34
			Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
					cal cont	ribution returned to	filer
			Dividend for shares in INVESCO WILDERHILL CLEAN ENERGY ETF (PB)	/v)			
	Date		Name of person from whom amount is received			Amount (\$)	
	03/28/2024	.	Raymond James Bank				\$150,000.00
			Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
		⊢	Purpose for which amount is received Check if p	oliti	cal cont	ribution returned to	filer
			Orginal investment of US TREASURY BILLS OID 03/28/2024 DUE 03/28/2	024	l (9127	'97GY7)	
	Date		Name of person from whom amount is received			Amount (\$)	
	04/05/2024		Raymond James Bank				\$257.43
			Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
			Purpose for which amount is received Check if p	oliti	cal cont	ribution returned to	filer
			Dividend for shares in ISHARES TR 0-5 YR TIPS ETF (STIP)				
	-						

	The Instru	cti	on Guide explains how to complete this form.		ages Schedule K: 5/10 Rpt: 86/90		
2	FILER NAME			3	Filer ID	(Ethics Commis	sion Filers)
	Texans for C	ha	rles Schwertner		00065	997	
4	Date	5	Name of person from whom amount is received	1		8 Amount (\$)	
	04/05/2024		Raymond James Bank				\$559.08
		6	Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
		7	Purpose for which amount is received Check if p	oliti	cal conti	ribution returned to	filer
			Dividend for shares in ISHARES TR IBONDS 24 TRM HG (IBHD)				
	Date		Name of person from whom amount is received			Amount (\$)	
	04/05/2024		Raymond James Bank				\$601.48
			Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
			Purpose for which amount is received	oliti	cal conti	ribution returned to	filer
			Dividend for shares in ISHARES TR IBONDS 25 TRM HG (IBHE)				
	Date		Name of person from whom amount is received			Amount (\$)	
	04/05/2024		Raymond James Bank				\$326.21
			Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
			<u> </u>	oliti	cal conti	ribution returned to	filer
			Dividend for shares in ISHARES TR IBONDS DEC24 ETF (IBDP)				
	Date		Name of person from whom amount is received			Amount (\$)	
	04/05/2024		Raymond James Bank				\$316.64
			Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
				aliti			filer
			Dividend for shares in ISHARES TR IBONDS DEC25 ETF (IBDQ)	OIILI	cai conti	ribution returned to	mer
⊨							
	Date		Name of person from whom amount is received			Amount (\$)	¢00 E71 OE
	04/08/2024		Raymond James Bank				\$88,571.95
			Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
				oliti	cal cont	l ribution returned to	filer
			Sold 3574 shares in ISHARES SILVER TR ISHARES (SLV)	JILI			
⊢		I					

	The Instru	ctio	on Guide explains how to complete this form.	Total pages Schedule K: Sch: 7/10 Rpt: 87/90			
2	FILER NAME			2		D (Ethics Commiss	sion Filers)
-		:ha	rles Schwertner	ľ	00065		51011111013)
	Date		Name of person from whom amount is received		00000	8 Amount (\$)	
4	04/08/2024	5	Raymond James Bank			. ,	\$115,737.46
	04/00/2024						PIIJ,/J/.40
	I	Ь	Address of person from whom amount is received; City; State; Zip Code				
	I						
			St. Petersburg, FL 33716				
	I	7	Purpose for which amount is received	olitio	cal cont	ribution returned to	filer
			Sold 6,468 shares in SPROTT PHYSICAL GOLD TR UNIT (CANADA) (PH	YS)			
	Date	\Box	Name of person from whom amount is received			Amount (\$)	
	04/26/2024		Raymond James Bank				\$1,394.48
	I		Address of person from whom amount is received; City; State; Zip Code				
	l						
	l		St. Petersburg, FL 33716				
	l	┝	-!	" ution activities to	e1		
	I		Purpose for which amount is received Check if po Dividend for shares in INVESCO SENIOR LOAN ETF (BKLN)	Olitic	cal coni	ribution returned to	filer
		Ļ				t	
	Date		Name of person from whom amount is received			Amount (\$)	* 1 1 10 00
	05/01/2024	ļ	Raymond James Bank				\$4,148.38
	l		Address of person from whom amount is received; City; State; Zip Code				
	l		St. Petersburg, FL 33716				
		\vdash		olitio	cal cont	ribution returned to	filer
			Gain of 4,148.380 shares in INVESCO STIT TREASURY PORTFOLIO INS				
	Date	F	Name of person from whom amount is received			Amount (\$)	
	05/07/2024		Raymond James Bank				\$1,848.32
	l		Address of person from whom amount is received; City; State; Zip Code				
	l						
	l		St. Petersburg, FL 33716				
	I		<u> </u>	olitio	cal cont	ribution returned to	filer
			Dividend for shares in ISHARES TR 0-5 YR TIPS ETF (STIP)			-	
	Date		Name of person from whom amount is received			Amount (\$)	
	05/07/2024		Raymond James Bank				\$522.10
	l		Address of person from whom amount is received; City; State; Zip Code				
	l						
			St. Petersburg, FL 33716				
	I	┝		olitio	nol cont	ribution returned to	filor
	I		Dividend for shares in ISHARES TR IBONDS 24 TRM HG (IBHD)	Unuv	alun		
_							

The Instru	ction Guide explains how to complete this form.	1 Total pages Schedule K: Sch: 8/10 Rpt: 88/90				
2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
	Charles Schwertner	00065997				
4 Date	5 Name of person from whom amount is received	8 Amount (\$)				
4 Date 05/07/2024	Raymond James Bank	\$586.26				
0010112027						
	6 Address of person from whom amount is received; City; State; Zip Code					
	St. Petersburg, FL 33716					
	7 Purpose for which amount is received Check if p	olitical contribution returned to filer				
	Dividend for shares in ISHARES TR IBONDS 25 TRM HG (IBHE)					
Date	Name of person from whom amount is received	Amount (\$)				
05/07/2024	Raymond James Bank	\$335.15				
	Address of person from whom amount is received; City; State; Zip Code					
	St. Petersburg, FL 33716					
		olitical contribution returned to filer				
	Dividend for shares in ISHARES TR IBONDS DEC24 ETF (IBDP)					
Date	Name of person from whom amount is received	Amount (\$)				
05/07/2024	Raymond James Bank	\$317.44				
	Address of person from whom amount is received; City; State; Zip Code					
	St. Petersburg, FL 33716					
	Purpose for which amount is received Check if p Dividend for shares in ISHARES TR IBONDS DEC25 ETF (IBDQ)	olitical contribution returned to filer				
Date	Name of person from whom amount is received	Amount (\$)				
05/24/2024	Raymond James Bank	\$1,482.61				
	Address of person from whom amount is received; City; State; Zip Code					
	St. Petersburg, FL 33716					
		olitical contribution returned to filer				
	Dividend for shares in INVESCO SENIOR LOAN ETF (BKLN)					
Date	Name of person from whom amount is received	Amount (\$)				
06/04/2024	Raymond James Bank	\$112,000.00				
00,04,202.	Address of person from whom amount is received; City; State; Zip Code					
	Address of person from whom amount is received, Gity, State, Zip Code					
	St. Petersburg, FL 33716					
		l olitical contribution returned to filer				
	Sold 100,000 shares JP MORGAN CHASE BANK, NA 18M S&P 500 INDE					

	The Instru	ction Guide explains how to complete this form.	1 Total pages Schedule K:				
_			Sch: 9/10 Rpt: 89/90				
2	FILER NAME		B Filer ID (Ethics Commission Filers)				
		Charles Schwertner	00065997				
4	Date	5 Name of person from whom amount is received	8 Amount (\$)				
	06/07/2024	Raymond James Bank	\$1,989.70				
		6 Address of person from whom amount is received; City; State; Zip Code					
		St. Petersburg, FL 33716					
		7 Purpose for which amount is received Check if pol	itical contribution returned to filer				
		Dividend for shares in ISHARES TR 0-5 YR TIPS ETF (STIP)					
F	Date	Name of person from whom amount is received	Amount (\$)				
	06/07/2024	Raymond James Bank	\$524.20				
		Address of person from whom amount is received; City; State; Zip Code					
		St. Petersburg, FL 33716					
		_ · ·	itical contribution returned to filer				
		Dividend for shares in ISHARES TR IBONDS 24 TRM HG (IBHD)					
	Date	Name of person from whom amount is received	Amount (\$)				
	06/07/2024	Raymond James Bank	\$611.90				
		Address of person from whom amount is received; City; State; Zip Code					
		St. Petersburg, FL 33716					
			itical contribution returned to filer				
		Dividend for shares in ISHARES TR IBONDS 25 TRM HG (IBHE)					
╞	Date	Name of person from whom amount is received	Amount (\$)				
	06/07/2024	Raymond James Bank	\$354.95				
	001011202-	Address of person from whom amount is received; City; State; Zip Code					
		Address of person from whom amount is received, Gity, State, Zip Couc					
		St. Petersburg, FL 33716					
		Purpose for which amount is received Check if pol	itical contribution returned to filer				
		Dividend for shares in ISHARES TR IBONDS DEC24 ETF (IBDP)					
	Date	Name of person from whom amount is received	Amount (\$)				
	06/07/2024	Raymond James Bank	\$317.28				
		Address of person from whom amount is received; City; State; Zip Code					
		St. Petersburg, FL 33716					
		_ ·	itical contribution returned to filer				
		Dividend for shares in ISHARES TR IBONDS DEC25 ETF (IBDQ)					

	The Instru	cti	on Guide explains how to complete this form.		al pages Schedule K: I: 10/10 Rpt: 90/90		
2	FILER NAME			3	Filer ID	D (Ethics Commi	ssion Filers)
	Texans for C	Cha	rles Schwertner		00065	5997	
4	Date	5	Name of person from whom amount is received			8 Amount (\$)	
	06/27/2024		Raymond James Bank				\$705.04
		6	Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
		7	<u> </u>			ribution returned to	o filer
			Dividend for shares in Flexshares Trust MorningStar Global Upstream Nat R	<es< th=""><th>muex</th><th>· ·</th><th></th></es<>	muex	· ·	
	Date		Name of person from whom amount is received			Amount (\$)	±1 000 01
	06/28/2024	ļ	Raymond James Bank				\$1,360.91
			Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
		⊢	Purpose for which amount is received Check if p	olitio	cal cont	ribution returned to	o filer
			Dividend for shares in INVESCO SENIOR LOAN ETF (BKLN)				
	Date		Name of person from whom amount is received			Amount (\$)	
	06/28/2024		Raymond James Bank				\$281.26
			Address of person from whom amount is received; City; State; Zip Code				
			Ch Deteroburg EL 20716				
		┝	St. Petersburg, FL 33716 Purpose for which amount is received Check if p	~!iti/		ribution returned to	flor
			Dividend for shares in INVESCO WILDERHILL CLEAN ENERGY ETF	Onu	Carcon		
_	Date		Name of person from whom amount is received			Amount (\$)	
	06/18/2024		Raymond James Bank			Amount (\$)	\$253,844.20
	00,10,2021		Address of person from whom amount is received; City; State; Zip Code				¢200,011120
			St. Petersburg, FL 33716				
						ribution returned to	
			Sold 10,101.000 shares in INNOVATOR EQUITY DEFINED PROTECTION	EI	F - 2Y	R TO APRIL 202	26 (AAPR)
	Date	T	Name of person from whom amount is received			Amount (\$)	
	04/01/2024		Raymond James Bank				\$1,568.65
			Address of person from whom amount is received; City; State; Zip Code				
			St. Petersburg, FL 33716				
		┝		olitio	cal cont	I ribution returned to	o filer
			Gain of 1,568.650 shares from original investment in INVESCO STIT TREA				
		I					