CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to comple	ete this form.	1 Filer ID (Ethics Commis 00020493		2 Total pages f	iled: 59
3 CANDIDATE /	MS / MRS / MR	FIRST	•	MI		USE ONLY
OFFICEHOLDER	The Honorable	Todd A.			OFFICE	
NAME	The Honorable	Touu A.			Date Received	
					ELECTRONIC	ALLY FILED
					. 10/07/2024	
	NICKNAME	LAST		SUFFIX	10/01/2024	
		Hunter				
4 CANDIDATE /	ADDRESS / PO BOX; APT		۲ ۷ ۰	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER			· ,	ZII OODE		
MAILING	445 Cape Henry				Dessint #	Amount
ADDRESS					Receipt #	Amount
Change of Address	Corpus Christi, TX 78412					
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	<u>.</u>	
TREASURER				IVII		
NAME	Mr.	Glen				
	NICKNAME	LAST		SUFFIX		
		Guillory		COLLIN		
		Guillory				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP1	/ SUITE #; CITY;	ST	ATE; ZIP CODE
TREASURER	2755 Shady Oak Ln.					
ADDRESS						
(Residence or Business)						
	Ingleside, TX 78362					
7 CAMPAIGN	AREA CODE PHON	IE NUMBER	EXTENSION			
TREASURER	(361) 944-7725					
PHONE	(, , , , , , , , , , , , , , , , , , ,					
8 REPORT						
TYPE	January 15	30th day before		Runoff	15th day after ca	mpaign treasurer
	January 15	Sour day below		Kulloli	appointment (off	
	July 15	8th day before	election	Exceeded modified	Final Report (Att	ach C/OH-ER)
				reporting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2024	TI	HROUGH	09/26/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		Primary	Runoff	Other	
	11/05/2024					
	11/03/2024		General	Special		
				_		
11 OFFICE		I		12 OFFICE SOUGHT	(if known)	
	OFFICE HELD (if any)	tiot 22				
	State Representative Distr	ICL 32				
	1			I		
		GO ⁻	TO PAGE 2			
Forms provided by Te	exas Ethics Commission		thics.state.tx.us	5	Vers	ion V4.1.0.48da51f7
					.010	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH **COVER SHEET PG 2** 2 of 69

14 Filer ID

13 C / OH NAME	Hunter, Todd A. (The	Honorable)	14 Filer ID 00020493	(Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendi These expenditures may have been made withou d officeholders are required to report this informati	t the candidate's or office	eholder's knowledge or		
X Additional Pages	COMMITTEE TYPE	COMMITTEE TYPE COMMITTEE NAME				
	X GENERAL	Texas Alliance for Life PAC				
		COMMITTEE ADDRESS				
	SPECIFIC	8000 Centre Park Dr., Ste. 380				
		Austin, TX 78754				
		COMMITTEE CAMPAIGN TREASURER NAME				
		Shaw, James				
		COMMITTEE CAMPAIGN TREASURER ADDRI	ESS			
		4505 Corazon Cv				
		Round Rock, TX 78681				
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER TH ES OF LOANS, OR CONTRIBUTIONS MADE EL		\$ 0.00		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAM	√S)	\$ 123,667.83		
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 0.00		
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 247,162.31		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 1,171,860.26		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIE OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	\$ 0.00		
17 AFFIDAVIT						
		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	all information required t			
		The Ho	norable Todd A. Hunte	er		
		Signature	of Candidate or Officeho	der		
AFFIX NO	DTARY STAMP / SEAL AB	OVE				
Sworn to and sub	scribed before me. by the s	aid	. this the	day		
		ertify which, witness my hand and seal of office.		,		
Signature of off	ficer administering	Printed name of officer administering	Title of office	r administering oath		
Forms provided by T	exas Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.48da51f7		

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH ADDENDUM

				Page 3 of 69
C / OH NAME	Hunter, Todd A. (The	e Honorable)	Filer ID 00020493	(Ethics Commission Filers)
17 NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have	of political expenditures by political committees to s been made without the candidate's or officeholder's ed to report this information only if they receive notic	s knowledge or co	onsent. Candidates and
	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Texas Realtors PAC (TREPAC)		
		COMMITTEE ADDRESS		
	SPECIFIC	1115 San Jacinto Rd, Ste. 200		
		Austin, TX 78701		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Cantu, Leslie		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
		PO Box 2246		
		Austin, TX 78768		

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 4 of 69 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Hunter, Todd A. (The Honorable) 00020493 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 123,217.83 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 450.00 \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ З. 4. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 171,405.96 \$ 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. 4,346.63 \$ X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ 71,409.72 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. X \$ 293.16 TO FILER

SCHEDULE	A1
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⊢						
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/12 Rpt: 5/69	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Hunter, Tode	d A. (The Honorable)			00020493	-
4	Date	5 Full name of contributor X out-of-state PAC (ID#:	C00577155)	7	Amount of Contribution (\$)	
	08/21/2024	Apex Clean Energy PAC	, , , , , , , , , , , , , , , , , , ,	ľ	,	\$5,000.00
	00,22.222	6 Contributor address; City; State; Zip Code				<i>vvvvvvvvvvvvvv</i>
		Charlottesville, VA 22902				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
				,		ļ
╞	Date	Full name of contributor Out-of-state PAC (ID#:_	<u> </u>	_	Amount of Contribution (\$)	
	09/16/2024	Ardurra Group PAC	/		Allount of Continention (+)	\$2,000.00
	00/10/202 .	Contributor address; City; State; Zip Code				Ψ2,000.00
		Continuator address, City, State, Zip Code				
		Houston, TX 77019				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
╞	Date	Full name of contributor Out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	08/07/2024	BPA PAC	,		,	\$2,500.00
	••••	Contributor address; City; State; Zip Code				- ,
		Austin, TX 78701				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/26/2024	Bindingnavele, Vijay	,		,	\$300.00
	•••••	Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78412				
┢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Physican		Self			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	09/25/2024	Butterfield, Ryan				\$500.00
		Contributor address; City; State; Zip Code				
		Farmington, MN 55024				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Director		National Grid Renewable			
\vdash			<u> </u>			

SCHEDULE A1

i				
The Instru	uction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 2/12 Rpt: 6/69	
2 FILER NAME			3 Filer ID (Ethics Commissi	ion Filers)
	- Id A. (The Honorable)		00020493	······,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
09/25/2024	5			\$300.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78701			
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/02/2024				\$15,000.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))	
Date	Full name of contributor X out-of-state PAC (ID#: C	000393173)	Amount of Contribution (\$)	
09/18/2024	Comerica Inc. PAC			\$2,500.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75201			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/29/2024	Crow, David S			\$250.00
	Contributor address; City; State; Zip Code			
	Corpus Christi, TX 78401			
	upation / Job title (See Instructions)	Employer (See Instructions)	·	
President		D.S. Crow Ranches, Inc.		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/20/2024	Diamondback Energy, Inc. TX PAC			\$4,000.00
	Contributor address; City; State; Zip Code			
	Midland, TX 79701			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))	

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this t	form.		ages Schedule A1: /12 Rpt: 7/69	
2 FILER NAME				(Ethics Commission	on Filers)
	d A. (The Honorable)		00020		
4 Date	5 Full name of contributor X out-of-state PAC (ID#:_	C00523233)	7 Amoun	t of Contribution (\$)	
09/25/2024	EDF Renewable Inc PAC				\$2,500.00
	6 Contributor address; City; State; Zip Code				
	Portland, OR 97205				
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)		
Date	Full name of contributor X out-of-state PAC (ID#:_	C00452755)	Amoun	t of Contribution (\$)	
09/25/2024	EDP Renewables North America LLC PAC (ED	PR NA PAC)			\$2,500.00
	Contributor address; City; State; Zip Code				
	Houston, TX 77010				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor X out-of-state PAC (ID#:_	C00375568)	Amoun	t of Contribution (\$)	
09/11/2024	ENGIE North America, Inc, PAC				\$2,500.00
	Contributor address; City; State; Zip Code				
	Houston, TX 77056-3030				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor X out-of-state PAC (ID#:_	C00097568)	Amoun	t of Contribution (\$)	
09/24/2024	Employees of RTX Corporation PAC				\$1,000.00
	Contributor address; City; State; Zip Code				
	Arlington, VA 22209				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amoun	t of Contribution (\$)	
08/29/2024	Eshleman III, Benjamin				\$250.00
	Contributor address; City; State; Zip Code				
	Corpus Christi, TX 78401-0326	-			
	upation / Job title (See Instructions)	Employer (See Instructions)		
Board Mem	ber	Mestena, LLC			

SCHEDULE	A1
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			11.	Total pages Sabadula A1:	
The Instruc	ction Guide explains how to complete this f	orm.		Total pages Schedule A1: Sch: 4/12 Rpt: 8/69	
2 FILER NAME				Filer ID (Ethics Commissio	on Filers)
	d A. (The Honorable)			00020493	-
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7,	Amount of Contribution (\$)	
07/26/2024	Fagan, Mark				\$500.00
ľ	6 Contributor address; City; State; Zip Code		"		
P Bringinal occur	New Brighton, MN 55112-1723 pation / Job title (See Instructions)	9 Employer (See Instructions			
	ce President and General Manager	Brazos Electric Coopera			
Date 09/25/2024	Full name of contributor out-of-state PAC (ID#: Focused Advocacy PAC)	'	Amount of Contribution (\$)	\$1,000.00
03/20/2024	·				Φ1,000.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78746				
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Date	Full name of contributor out-of-state PAC (ID#:)	Ţ,	Amount of Contribution (\$)	
09/23/2024	Gardner, Becky				\$200.00
ľ	Contributor address; City; State; Zip Code		"		
	Ormus Christi TV 70402				
Dringing occur	Corpus Christi, TX 78403 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Retired		Retired	5)		
	Full name of contributor Out-of-state PAC (ID#:			Amount of Contribution (¢)	
Date 07/11/2024	Full name of contributor out-of-state PAC (ID#: Golden Spread PAC)	'	Amount of Contribution (\$)	\$2,000.00
0111112024					φ2,000.00
	Contributor address; City; State; Zip Code				
	Amarillo, TX 79105-5898				
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Date	Full name of contributor out-of-state PAC (ID#:)	Ţ	Amount of Contribution (\$)	
07/26/2024	Gonzalez Public Affairs & Consulting				\$500.00
ľ	Contributor address; City; State; Zip Code		"		
Duite since a service	Austin, TX 78701				
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	S)		

SCHEDULE	A1
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	The Instru	iction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/12 Rpt: 9/69	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		ld A. (The Honorable)			00020493	-
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	07/08/2024	—				\$500.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 75240				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/07/2024	Haney, Casey				\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78404				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Director of C	Governmental And Regulatory Relations	Blakemore Public Affairs	s		
—	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	07/16/2024	Howard Energy Partners PAC				\$2,000.00
		San Antonio, TX 78256				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
l	09/25/2024	Hughes, Lisa C.				\$1,250.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78759				
\vdash	Principal occı	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Owner	,	Lisa Hughes Consulting			
F	Date	Full name of contributor X out-of-state PAC (ID#: C	 C00466813)	Γ	Amount of Contribution (\$)	
	09/16/2024	Humane Society Legislative Fund of Texas PAC				\$1,500.00
		Contributor address; City; State; Zip Code				
		Washington, DC 20037				
	Principal occı	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
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SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 6/12 Rpt: 10/69		
2	FILER NAME		3	Filer ID (Ethics Commissio	on Filers)	
-		d A. (The Honorable)			00020493	
4	Date	5 Full name of contributor X out-of-state PAC (ID#:	00437244	7	Amount of Contribution (\$)	
	09/25/2024	Invenergy Investment Company LLC				\$5,000.00
		6 Contributor address; City; State; Zip Code				
		Chicago, IL 60606				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/16/2024	Jones, Al (Mr.)				\$500.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78401-0326				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
L	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/25/2024	King, Robert			\$2,500.00	
		Contributor address; City; State; Zip Code				
Austin, TX 78746-1249						
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Owner		Lobbyist			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/25/2024	Larkey, John				\$500.00
		Contributor address; City; State; Zip Code				
		Minneapolis, MN 55413				
Γ	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Vice Preside	ent	National Grid Renewable	es		
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/06/2024	Loeb, David				\$1,000.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78411				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	President	1	Landlord Resources			
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SCHEDULE	A1
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The Instru	iction Guide explains how to complete this f	form.		otal pages Schedule A1: ch: 7/12 Rpt: 11/69	
2 FILER NAME			iler ID (Ethics Commissio	on Filers)	
	d A. (The Honorable)			0020493	лт но.о,
4 Date	5 Full name of contributor X out-of-state PAC (ID#:	C00225342)	7 AI	mount of Contribution (\$)	
09/25/2024	McGuire Woods Federal PAC Fund				\$1,000.00
	6 Contributor address; City; State; Zip Code		1		
	Richmond, VA 23219				
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
Date	Full name of contributor X out-of-state PAC (ID#:	C00097485)	A	mount of Contribution (\$)	
09/11/2024	Merck Employees PAC				\$1,000.00
	Contributor address; City; State; Zip Code				· /
	Continuation address, Gity, State, Zip Code				
	Washington, DC 20004				
Bringinal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
Plincipai occi	Ipation / Job title (See instructions)		5)		
	·		. 		
Date	Full name of contributor out-of-state PAC (ID#:_)	A	mount of Contribution (\$)	
09/25/2024	Morais, Matthew				\$500.00
	Contributor address; City; State; Zip Code		1		
	Rye Beach, NH 03871				
Principal occl	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Director		National Grid Renewable	les		
Date	Full name of contributor out-of-state PAC (ID#:		A A	mount of Contribution (\$)	
09/25/2024	Nixon, Blake			•••	\$500.00
	Contributor address; City; State; Zip Code				+
	Continuation dualess, City, State, Zip Code				
	Edina, MN 55424				
Dringingl occu			<u> </u>		
Principal occu President &	upation / Job title (See Instructions)	Employer (See Instructions) National Grid Renewable			
ΡΙΕδιαετίι α					
Date	Full name of contributor X out-of-state PAC (ID#:	<u>C00513549</u>)	A	mount of Contribution (\$)	
08/27/2024	Phillips 66 PAC				\$1,000.66
	Contributor address; City; State; Zip Code	1			
	Washington, DC 20004-3650				
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions)	s)		
 		<u> </u>			

SCHEDULE A1

The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 8/12 Rpt: 12/69	
2 FILER NAME Hunter, Todo	d A. (The Honorable)	3 Filer ID (Ethics Commission 00020493	on Filers)	
4 Date 09/25/2024	5 Full name of contributor out-of-state PAC (ID#: Pitts Jr., John (Mr.)		7 Amount of Contribution (\$)	\$500.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78703			
8 Principal occu Principal	ipation / Job title (See Instructions)	 9 Employer (See Instructions) Texas Star Alliance)	
Date 09/11/2024	Full name of contributor 🛛 out-of-state PAC (ID#: C RWE Clean Energy Services, LLC PAC Contributor address; City; State; Zip Code	200761858)	Amount of Contribution (\$)	\$2,500.00
Principal occu	Chicago, IL 60657 Ipation / Job title (See Instructions)	Employer (See Instructions)	;)	
Date 09/25/2024	Full name of contributor out-of-state PAC (ID#: Randy C Cain DBA Randy C Cain Attorney At La		Amount of Contribution (\$)	\$250.00
	Contributor address; City; State; Zip Code Austin, TX 78763			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions))	
Date 09/25/2024	Full name of contributor out-of-state PAC (ID#:_ Reamer, David Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	\$500.00
	Saint Paul, MN 55102-2610			
Principal occu Director	ipation / Job title (See Instructions)	Employer (See Instructions) National Grid Renewable		
Date 09/25/2024	Full name of contributor out-of-state PAC (ID#:_ Ron Lewis & Associates)	Amount of Contribution (\$)	\$1,250.00
	Contributor address; City; State; Zip Code			
Principal occu	Austin, TX 78701 Ipation / Job title (See Instructions)	Employer (See Instructions)))	

SCHEDULE A1

	The Instru	ction Guide explains how to	1	Total pages Schedule A1: Sch: 9/12 Rpt: 13/69			
2	FILER NAME		3	Filer ID (Ethics Commissio	on Filers)		
		A. (The Honorable)			-	00020493	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/25/2024	Ryall, Jean Marie					\$500.00
		6 Contributor address; City; State;					
		Austin, TX 78724			Ļ		
8		pation / Job title (See Instructions)		9 Employer (See Instructions)		
	Consultant			Self			
	Date		out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2024	Sasser, M. Stuart					\$250.00
		Contributor address; City; State;	Zip Code				
		Corpus Christi, TX 78404					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	President			Los Medio Corp.	9		
╞							
	Date Full name of contributor X out-of-state PAC (ID#: C00008748)					Amount of Contribution (\$)	¢2 000 00
	08/20/2024 Sempra Energy Employee PAC						\$2,000.00
	Contributor address; City; State; Zip Code						
		San Diego, CA 92101					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
⊨	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/23/2024	Sooda, Kusumaker					\$3,000.00
		Contributor address; City; State;	Zip Code				
		Corpus Christi, TX 78413-581	.7				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions			
	Physican			Truecare Medical Assoc	iat	es	
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/25/2024	Stover, Mark					\$500.00
	Contributor address; City; State; Zip Code						
⊢	Drivel	Austin, TX 78704-2632			Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions		ation		
	Executive Di			Texas Solar Power Asso	JCI		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 10/12 Rpt: 14/69 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Hunter, Todd A. (The Honorable) 00020493 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 07/25/2024 TREPAC/Texas Association of Realtors PAC \$5,000.00 6 Contributor address; City; State; Zip Code Austin, TX 78768-1786 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/13/2024 TREPAC/Texas Association of Realtors PAC \$5,000.00 Contributor address; City; State; Zip Code Austin, TX 78768-1786 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 09/24/2024 Texas Agricultural Cooperative Council PAC \$500.00 Contributor address; City; State; Zip Code Round Rock, TX 78664 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/25/2024 \$1,000.00 Texas Association of Crane Owners PAC Contributor address; City; State; Zip Code Austin, TX 78716 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 09/23/2024 **Texas Building Branch AGC PAC** \$2,500.00 Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / 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: 11/12 Rpt: 15/69 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Hunter, Todd A. (The Honorable) 00020493 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 07/11/2024 **Texas Consumer Finance Association PAC** \$5,000.00 6 Contributor address; City; State; Zip Code Kerrville, TX 78028 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/22/2024 Texas Cornerstone Credit Union League PAC \$2,500.00 Contributor address; City; State; Zip Code Dallas, TX 75265 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 09/25/2024 **Texas Lobby Strategies** \$1,000.00 Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/18/2024 \$5,000.00 **Texas Trial Lawyers Association PAC** Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/29/2024 \$5,000.00 Texas and Southwestern Cattle Raisers Association Contributor address; City; State; Zip Code Fort Worth, TX 76185-1988 Principal occupation / Job title (See Instructions) Employer (See Instructions)

SCHEDULE	A1
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	The Instru	ction Guide explains how to c	1	Total pages Schedule A1: Sch: 12/12 Rpt: 16/69			
2	FILER NAME		3	Filer ID (Ethics Commission	on Filers)		
	Hunter, Todo	I A. (The Honorable)				00020493	
4	Date	5 Full name of contributor	it-of-state PAC (ID#: C)	7	Amount of Contribution (\$)	
	09/16/2024	The American Electric Power C				.,	\$10,000.00
							,
			p 0000				
		Washington, DC 20004					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
F	Date	Full name of contributor	It-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/25/2024	Thomas Jr., Clifton					\$1,500.00
		Contributor address; City; State; Zi	p Code				
		Victoria, TX 77902-2748					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	CEO			C.L. Thomas, Inc.			
F	Date	Full name of contributor	it-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/29/2024 Tim Jayroe Campaign Account Contributor address; City; State; Zip Code						\$417.17
Rockport, TX 78382							
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor	it-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/25/2024	Vilma Luna, LLC					\$500.00
		Contributor address; City; State; Zi	p Code				
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date		it-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/25/2024	Warancha, Andrew					\$2,500.00
		Contributor address; City; State; Zi					
		Miami Beach, FL 33141-5878	r				
		pation / Job title (See Instructions)	Employer (See Instructions)			
	President an			Spearmint Energy			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

	The Instruction Guide explains how to complete th	1	1 Total pages Schedule A2: Sch: 1/1 Rpt: 17/69				
2	FILER NAME		3	Filer ID (Ethics Commission Filers)			
	Hunter, Todd A. (The Honorable)			00020493			
4	TOTAL OF UNITEMIZED IN-KIND POLITICAL CONT	\$					
5	Date 6 Full name of contributor out-of-state PAC (ID 08/01/2024 Hillco PAC 7 Contributor address; City; State; Zip Code Austin, TX 78701	 B/01/2024 Hillco PAC 7 Contributor address; City; State; Zip Code 					
10	Principal occupation / Job title (FOR NON-JUDICIAL) (See instruction	ns) 11 Employer (FOR NON	I-JU	Check if travel outside of Texas. Complete Schedule T.			
12	2 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title	13 Contributor's job title (FOR JUDICIAL) (See instructions)				
14	Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's	spouse (if any) (FOR JUDICIAL)			
16	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

	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 Gitt/Awards/Memorials E Legal Services The Instruction Gui	xpense	Office Ove Polling Ex 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)
1	Total pages Schedule F1:	2 F	ILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 1/25 Rpt: 18/69		lunter, Todd A. (The Honora	able)				00020493
4	Date 08/09/2024		ayee name BC Texas - Coastal Bend (Chapter				
6	Amount (\$) \$40.00	7	ayee address; City; 433 Leopard Corpus Christi, TX 78409	State;	; Zip Co	de		
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Meeting expense					, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	Jht		Office held
	Date	Р	ayee name					
	08/26/2024	A	BC Texas - Coastal Bend C	Chapter				
	Amount (\$) \$80.00		ayee address; City; 433 Leopard	State;	; Zip Co	de		
	PURPOSE OF EXPENDITURE	(a) C	ategory (See Categories listed at the ood/Beverage Expense	e top of this sch	iedule)		ι, TX,	ide of Texas. Complete Schedule T. , officeholder living expense ;e
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	jht		Office held
	Date	P	ayee name					
	07/29/2024		TT Teleconference Service	!				
	Amount (\$) \$54.27		ayee address; City; O Box 5002	State;	; Zip Co	de		
		C	arol Stream, IL 60197-5002	2				
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the office Overhead/Rental Expo		iedule)	Check if Austir	ı, TX,	ide of Texas. Complete Schedule T. , officeholder living expense erence expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	Jht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Of Food/Beverage Expense Po Gift/Awards/Memorials Expense Pri	office Overhea olling Expens rinting Expens alaries/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	FILER NAME			3	Filer ID (Ethics Commission Filers)	
	Sch: 2/25 Rpt: 19/69		Hunter, Todd A. (The Honorable)				00020493	
4	Date 08/21/2024	5	Payee name ATT Teleconference Service					
6	Amount (\$) \$50.18	7	Payee address; City; State; Z PO Box 5002 Carol Stream, IL 60197-5002	Zip Code				
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Teleconference expense					officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Offic	ce sought			Office held	
	Date		Payee name					
	08/20/2024		Aransas County Republican Club					
	Amount (\$) \$5,000.00		Payee address; City; State; Z 1796 Bay Shore Drive	Zip Code				
			Rockport, TX 78382					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedul Contributions/Donations Made By Candidate/Officeholder/Political Committe			, тх,	de of Texas. Complete Schedule T. officeholder living expense tion	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Offic	ce sought			Office held	
	Date		Payee name					
	08/02/2024		Bergsma for CCISD At-Large					
	Amount (\$) \$500.00		Payee address; City; State; Z PO Box 955	Zip Code				
			Corpus Christi, TX 78403					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule Contributions/Donations Made By Candidate/Officeholder/Political Committe	- /		, тх,	de of Texas. Complete Schedule T. officeholder living expense tion	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Offic	ce 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 Imittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	oense ages/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: 3/25 Rpt: 20/69		Hunter, Todd A. (The Honorable)				00020493
4	Date 07/03/2024		Payee name Black Baldy Investments, LLC				
6	Amount (\$) \$1,110.00		Payee address; City; State; 4161 Hwy 35 N, Unit 1 Rockport, TX 78382	Zip Co	le		
8	8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if Variable of Complete Schedule of Complete Schedule of Check if Variable of Check if Austin, TX, officeholder living expense Rental expense Check if Austin, TX, officeholder living expense Rental expense						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name O	office sou	ht		Office held
	Date		Payee name				
	08/26/2024		Black Baldy Investments, LLC				
	Amount (\$) Payee address; City; State; Zip Code \$1,100.00 4161 Hwy 35 N, Unit 1 Rockport, TX 78382						
PURPOSE (a) Catego			Category (See Categories listed at the top of this sche Office Overhead/Rental Expense	edule)		n, TX,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice sou	ht		Office held
	Date		Payee name				
	07/26/2024		Bryant Printing Company, Inc.				
	Amount (\$) \$1,469.82		Payee address; City; State; 4009 Sherwood Dr	Zip Co	le		
			Rowlett, TX 75088				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Printing Expense	edule)		n, TX,	de of Texas. Complete Schedule T. , officeholder living expense 2
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		candidate/Officeholder name O	office sou	ht		Office held

			EXPENDITURE C	ATEGO	RIES FOF	R BO	X 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 (Office Ove Polling Exp Printing Exp Salaries/W	rhead pense (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: 4/25 Rpt: 21/69		Hunter, Todd A. (The Honorabl	e)					00020493	
4	Date 07/16/2024		Payee name Carlson, Jessie							
6	Amount (\$) \$500.00	:	Payee address; City; 337 Gulfstream Corpus Christi, TX 78418	State;	Zip Co	de				
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Consulting Expense	of this sch	edule)				de of Texas. Com officeholder living	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght			Office he	eld
	Date		Payee name							
	08/21/2024		Chick-Fil-A 00230							
	Amount (\$) \$255.81	I	Payee address; City; 600 Congress Ave C 150	State;	Zip Co	de				
			Austin, TX 78411							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Food/Beverage Expense	of this sch	edule)			, TX,	de of Texas. Com officeholder living ng lunch	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght			Office he	eld
	Date		Payee name							
	07/03/2024		Children's Coalition of Aransas	County						
	Amount (\$) \$600.00		Payee address; City; 401-B W. Market St	State;	Zip Co	de				
			Rockport, TX 78382							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Event Expense	of this sch	edule)			, TX,	de of Texas. Com officeholder living lip	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder 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	/ - al Con	Fees Offi Food/Beverage Expense Pol Gift/Awards/Memorials Expense Prir	fice Overh Illing Expe Inting Expe Iaries/Wa	ense ges/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: 5/25 Rpt: 22/69		Hunter, Todd A. (The Honorable)				00020493				
4	Date 07/25/2024		Payee name Citi Bank Credit Card								
6				in Cod							
0	Amount (\$) \$2,622.40		Payee address; City; State; Zi P.O. BOX 78045	ip Cou	2						
			Phoenix, AZ 85062-8045								
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule Credit Card Payment	e) (I		, тх,	de of Texas. Complete Schedule T. . officeholder living expense nent				
9	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sough	nt		Office held				
	Date		Payee name								
	08/02/2024		Citi Bank Credit Card								
	Amount (\$)		Payee address; City; State; Zi	ip Cod	9						
	\$1,371.36		P.O. BOX 78045								
			Phoenix, AZ 85062-8045								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule Credit Card Payment	_{e)} (I		, TX,	de of Texas. Complete Schedule T. officeholder living expense ment				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sough	nt		Office held				
	Date		Payee name								
	08/19/2024		Citi Bank Credit Card								
	Amount (\$) \$2,975.27		Payee address; City; State; Zi P.O. BOX 78045	ip Cod	9						
	φ2,973.27		Phoenix, AZ 85062-8045								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule Credit Card Payment	e) (I		, TX,	de of Texas. Complete Schedule T. . officeholder living expense ment				
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sough	nt		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 hmittee Legal Services The Instruction Guide explains h	Office Over Polling Exp Printing Ex Salaries/W	oense ages/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: 6/25 Rpt: 23/69	_	Hunter, Todd A. (The Honorable)				00020493					
4	Date	5	Payee name									
	07/02/2024		Coastal Bend Republican Coalition									
6	Amount (\$)	7	Payee address; City; State; Zip Code									
	\$6,956.10		15346 Cartagena Court									
	Corpus Christi, TX 78418											
8	PURPOSE	(a)	-		(b) Description							
ľ	OF	(4)	Category (See Categories listed at the top of this sche Contributions/Donations Made By	edule)		outs	ide of Texas. Complete Schedule T.					
	EXPENDITURE		Candidate/Officeholder/Political Commi	ittee			, officeholder living expense					
					Political cont	ribu	ition					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	ffice sou	ht		Office held					
	Date		Payee name									
	08/28/2024		Coffee Waves Flour Bluff									
-	Amount (\$)		Payee address; City; State;	Zip Co	le							
	\$24.26		10309 SPID, Ste F	210 000								
	φ24.20		10000 01 12, 010 1									
			Corpus Christi, TX 78412									
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description							
	EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T. , officeholder living expense					
					Meeting expe							
					mooting exp	5110	-					
	Complete ONLY if direct		Candidate/Officeholder name O	ffice sout	lht		Office held					
	expenditure to benefit C/OI			11100 3000	hu		Onice neia					
	Date		Payee name									
	08/14/2024		Corpus Christi Area Retired Teachers A	Associati	on							
	Amount (\$)		-	Zip Co								
	\$100.00		318 Peerman Place	Zip Co								
	Φ100.00		STO Feelinan Flace									
			Corpus Christi, TX 79411									
			Corpus Christi, TX 78411									
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description							
	EXPENDITURE		Advertising Expense				ide of Texas. Complete Schedule T. , officeholder living expense					
					Advertising e							
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	Complete ONILV & diversit	Ļ	Condidata/Officatalder races	ffier	.bt		Office hold					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	Int		Office held					
	,											

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Of Food/Beverage Expense Pr Gift/Awards/Memorials Expense Pr	office Overh olling Expe rinting Exp alaries/Wa	ense ges/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: 7/25 Rpt: 24/69		Hunter, Todd A. (The Honorable)				00020493				
4	Date 08/26/2024	5	Payee name Corpus Christi Hope House								
6	Amount (\$)	7	Payee address; City; State; Z	Zip Cod	9						
	\$1,000.00		3226 Reid Corpus Christi, TX 78404								
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedul Event Expense	_{ile)} (ı, ТХ,	de of Texas. Complete Schedule T. , officeholder living expense nip				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Offic	ce soug	nt		Office held				
	Date		Payee name								
	08/26/2024 Corpus Christi Symphony										
	Amount (\$) Payee address; City; State; Zip Code										
	\$250.00		555 N. Carancahua St, Tower II, Suite 41 Corpus Christi, TX 78401-0818	.0							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedul Advertising Expense	_{ile)} (ı, ТХ,	de of Texas. Complete Schedule T. . officeholder living expense CNSE				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Offic	ce soug	nt		Office held				
	Date		Payee name								
	07/01/2024		Double Tree Suites								
	Amount (\$) \$762.33		Payee address; City; State; Z 303 West 15th	Zip Cod	e						
			Austin, TX 78701								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedul Hotel expense	ile) (ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name Offic	ce soug	nt		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Food/Beverage Expense Pollir Gift/Awards/Memorials Expense Printi	ce Overhea ng Expens ting Exper tries/Wage	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: 8/25 Rpt: 25/69		Hunter, Todd A. (The Honorable)				00020493				
4	Date 08/26/2024		Payee name Double Tree Suites								
6	6 Amount (\$) \$508.22 Austin, TX 78701										
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Hotel expense	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	sought			Office held				
	Date		Payee name								
	08/26/2024		Double Tree Suites								
	Amount (\$) \$241.09		Payee address; City; State; Zip 303 West 15th Austin, TX 78701	Code							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Hotel expense	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name Office	sought			Office held				
	Date		Payee name								
	08/23/2024		Dreamers and Walkers Consulting, LLC								
	Amount (\$) \$1,215.48		Payee address; City; State; Zip PO Box 18639	Code							
			Corpus Christi, TX 78418								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense NSC				
	Complete <u>ONLY</u> 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 Exp Gift/Awards/Memor nmittee Legal Services	ense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	ment/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: 9/25 Rpt: 26/69		Hunter, Todd A. (The Ho	norable)				00020493	· · · · · ·		
4	Date	5	Payee name								
	07/03/2024		Granado, Angie Flores								
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le					
	\$6,500.00		418 Peoples St								
			# 505								
			Corpus Christi, TX 78401								
8	PURPOSE	(0)	-								
0	OF	(a)	Category (See Categories listed		edule)	(b) Description	outsi	ide of Texas. Comp	nlete Schedule T		
	EXPENDITURE		Salaries/Wages/Contract	Labor				, officeholder living			
						Contract Lab	or				
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Dffice soug	ht		Office he	ld		
	Date		Payee name								
	07/29/2024		Granado, Angie Flores								
_	Amount (\$)		Payee address; City;	State:	; Zip Coo	le					
	\$6,500.00		418 Peoples St	,	,						
	40,000.00		•								
			# 505								
			Corpus Christi, TX 78401								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed Salaries/Wages/Contract		edule)		, TX	ide of Texas. Comp , officeholder living			
	Complete ONLY if direct expenditure to benefit C/O	-	Candidate/Officeholder name	C	Dffice soug	ht		Office he	ld		
	Date		Payee name								
	08/21/2024		Granado, Angie Flores								
-	Amount (\$)		Payee address; City;	State:	; Zip Coo	le					
	\$6,500.00		418 Peoples St								
			, # 505								
			Corpus Christi, TX 78401								
	PURPOSE OF	(a)	Category (See Categories listed		edule)	(b) Description		ide of Tours	alata Cabadula T		
	EXPENDITURE		Salaries/Wages/Contract	Labor			, TX,	ide of Texas. Comp , officeholder living			
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Dffice soug	ht		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		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: 10/25 Rpt: 27/69	Hunter, Todd A. (The Honorable)	00020493								
4	Date 08/03/2024	 Payee name Grassroots Consultants 									
6	Amount (\$) \$800.00	7 Payee address; City; State; Zip Code 4710 Hakel Corpus Christi, TX 78415									
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense (pense								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	07/01/2024	Huerta, Isabella									
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 446 Pennington Dr.									
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense Dr expense								
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	08/26/2024	Huerta, Isabella									
	Amount (\$) \$298.68	Payee address; City; State; Zip Code 446 Pennington Dr.									
		Corpus Christi, TX 78412									
	PURPOSE OF EXPENDITURE	Expense Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense Istin, Tx for hearing.								
	Complete ONLY 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	/ - Il Cor	Fees Office Ov Food/Beverage Expense Polling E> Gift/Awards/Memorials Expense Printing E	erhea kpense 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	FILER NAME		3	3	Filer ID (Ethics Commission Filers)				
	Sch: 11/25 Rpt: 28/69		Hunter, Todd A. (The Honorable)				00020493				
4	Date 07/19/2024	5	Payee name Hunter, Todd								
6	Amount (\$) \$30,000.00	7	Payee address; City; State; Zip Co 445 Cape Henry	ode							
			Corpus Christi, TX 78412								
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b)		TX, d	e of Texas. Complete Schedule T. officeholder living expense nent				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sou	ight			Office held				
	Date		Payee name								
	07/22/2024		Hunter, Todd								
	Amount (\$)		Payee address; City; State; Zip Co	ode							
	\$25,000.00		445 Cape Henry Corpus Christi, TX 78412								
_	DUDDOOF	(-)		(1-)							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(0)		TX, d	e of Texas. Complete Schedule T. officeholder living expense nent				
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sou	ught			Office held				
	Date		Payee name								
	08/09/2024		Jason's Deli #616								
	Amount (\$) \$48.02		Payee address; City; State; Zip Co 1416 Airline	ode							
			Corpus Christi, TX 78412								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b)		TX, d	e of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sou	ight			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 Exp Legal Services The Instruction Guide	ense	Office Overl Polling Expe Printing Exp Salaries/Wa	ense ges/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 FILE					3	Filer ID (Ethics Commission File	rs)		
	Sch: 12/25 Rpt: 29/69		ter, Todd A. (The Honorab	le)				00020493			
4	Date 07/03/2024		ee name n Doner & Associates, Inc.								
6 Amount (\$) 7 Payee address; City; State; Zip Code \$15,000.00 1005 Congress Ave, ste 580 Austin, TX 78701											
8	PURPOSE OF EXPENDITURE		gory (See Categories listed at the to sulting Expense	p of this sched	dule) (n, TX,	tide of Texas. Complete Schedule T. 3, officeholder living expense CINSE			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		date/Officeholder name	Off	fice soug	nt		Office held			
	Date	Pay	ee name								
	07/15/2024	LUL	AC COUNCIL #1								
Amount (\$)Payee address;City;State;Zip Code\$700.00P.O Box 270113											
	PURPOSE OF EXPENDITURE	(a) Cate	pus Christi, TX 78427 gory (See Categories listed at the to nt Expense	p of this sched	dule) (n, TX	ide of Texas. Complete Schedule T. K, officeholder living expense hip			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H					Office held				
	Date	Pay	ee name								
	07/15/2024	LUL	AC COUNCIL #1								
	Amount (\$) \$700.00		ee address; City; Box 270113	State;	Zip Cod	e					
		Cor	pus Christi, TX 78427								
	PURPOSE OF EXPENDITURE		gory (See Categories listed at the to nt Expense	p of this sched	dule) (n, TX	ide of Texas. Complete Schedule T. K, officeholder living expense hip			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		date/Officeholder name	Off	fice soug	nt		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Fees Office C Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printing	Overhea Expens Expen s/Wage	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: 13/25 Rpt: 30/69	-	Hunter, Todd A. (The Honorable)			•	00020493			
4	Date	5	Payee name							
	08/02/2024		Marlin Athletic Booster Club							
6	Amount (\$)	7	Payee address; City; State; Zip C	Code						
	\$1,500.00		PO Box 231							
Port Arnasas, TX 78373										
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description					
	OF EXPENDITURE		Event Expense		Check if travel of		de of Texas. Complete Schedule T.			
							officeholder living expense			
					Event sponso	orsr	קור			
_										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office so	ought			Office held			
	Date		Payee name							
07/02/2024 Murphy Nasica										
	Amount (\$)		Payee address; City; State; Zip C	Code						
	\$4,000.00		815 - S Brazos St							
			Ste 304							
			Austin, TX 78701							
_	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description					
			Consulting Expense			outsi	de of Texas. Complete Schedule T.			
	EXPENDITURE						officeholder living expense			
					Consulting ex	фе	nse			
				<u> </u>						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office so	ought			Office held			
-	Date	—	Davias name							
	07/03/2024		Payee name Murphy Nasica							
	Amount (\$)		Payee address; City; State; Zip C	Dodo						
	\$8,000.00		815 - S Brazos St	Jue						
	40,000.00		Ste 304							
			Austin, TX 78701							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description	outei	de of Texas. Complete Schedule T.			
	EXPENDITURE		Consulting Expense				officeholder living expense			
					Consulting ex					
	Complete ONLY if direct		Candidate/Officeholder name Office so	ought			Office held			
	expenditure to benefit C/OI	H								

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	, _ I Coi	nmittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	xpense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense 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)			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID (Ethics Commission Filers)			
	Sch: 14/25 Rpt: 31/69		Hunter, Tod	d A. (The Honora	able)				00020493			
4	Date	5	Payee name									
	08/09/2024		Murphy Nas	ica								
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Coo	le					
	\$4,000.00		815 - S Braz	zos St								
			Ste 304									
			Austin, TX 7	8701								
8	PURPOSE	(a)					(b) Description					
ľ	OF	(4)	Consulting I	e Categories listed at the	e top of this sch	iedule)		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Consulting	LAPENSE			Check if Austin	n, TX,	, officeholder living expense			
							Consulting ex	хре	ense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	(Office sou	Jht		Office held			
	Date		Payee name									
	08/23/2024		NEPFYD									
	Amount (\$)		Payee addres	s; City;	State	; Zip Coo	le					
	\$1,500.00		710 East ma	ain Ave. Ste. 1		•						
	. ,											
			Robstown, ⁻	FX 78380								
	PURPOSE OF EXPENDITURE	(a)	Category _{(Se} Event Expe	e Categories listed at the ISE	e top of this sch	nedule)	Check if Austin	n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense hip Nueces County 4-H			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sought						Office held			
	Date		Payee name									
	08/08/2024		2	ng and More LLC	;							
	Amount (\$)		Payee addres	s; City;	State	; Zip Coo	le					
	\$4,005.25		1011 Louisi		Otato	, בוף סטנ						
	\$4,000.20		TOTT LOUISI									
			Corpus Chri	sit, TX 78404								
	PURPOSE OF	(a)		e Categories listed at the	top of this sch	nedule)	(b) Description					
	EXPENDITURE		Printing Exp	ense				n, TX,	ide of Texas. Complete Schedule T. K, officeholder living expense e			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	(Office soug	ıht		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 nmittee Legal Services The Instruction Guide explains h	Office Ove 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)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 15/25 Rpt: 32/69		Hunter, Todd A. (The Honorable)				00020493			
4	Date	5	Payee name							
	07/10/2024		Nueces County Republican Party							
6	Amount (\$)	7	le							
	\$4,000.00		PO Box 18016							
	Corpus Christi, TX 78480-8016									
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Contributions/Donations Made By	Juuroy		outs	ide of Texas. Complete Schedule T.			
	EXPENDITORE		Candidate/Officeholder/Political Commi	ittee			, officeholder living expense			
					Political dona	atio	n			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	Jht		Office held			
_	Date		Pavee name							
	07/25/2024		Nueces County Republican Party							
	Amount (\$)			Zip Co	le					
	\$6,000.00		PO Box 18016							
			Corpus Christi, TX 78480-8016							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	EXPENDITURE		Contributions/Donations Made By				ide of Texas. Complete Schedule T.			
			Candidate/Officeholder/Political Commi	ittee	Political dona		, officeholder living expense n			
	Complete ONLY if direct		Candidate/Officeholder name O	office soug	iht		Office held			
	expenditure to benefit C/OI				,					
_	Date		Payee name							
	07/13/2024		Orlando Sims Consulting							
	Amount (\$)			Zip Co	10					
	\$2,000.00		5757 Wooldridge Apt 10 d							
	φ2,000.00		STOT Wooldhage Apt 10 a							
			Corpus Christi, TX 78414							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Consulting Expense	,	Check if travel	outs	ide of Texas. Complete Schedule T.			
	EXPENDITORE						, officeholder living expense			
					Consulting e	хре	nse			
	0 1 1 0 1 1 1 1									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	Int		Office held			
	·									

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment								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: 16/25 Rpt: 33/69								00020493	
4	Date 08/28/2024	5 Payee name Orlando Sims Consulting								
6	Amount (\$) \$2,000.00									
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Image: Consulting Expense Image: Consulting Expense Image: Consulting Expense Image: Consulting Expense Image: Consulting Expense Image: Consulting Expense Image: Consulting Expense Image: Consulting Expense Image: Consulting Expense Image: Consulting Expense Image: Consulting Expense Image: Consulting Expense									
9	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							eld		
	Date		Payee name							
	08/27/2024		Ovations Food Services							
	Amount (\$) \$1,274.12		Payee address; City; 492 Harbor Drive	State;	Zip Co	de				
			Corpus Christi, TX 78401							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the tr Food/Beverage Expense	op of this sch	edule)			, TX,	officeholder living	plete Schedule T. J expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O			Candidate/Officeholder name Office sought H						Office he	eld
	Date		Payee name							
	08/14/2024		Port Aransas Chamber of Cor	nmerce						
	Amount (\$) \$1,000.00		Payee address; City; 403 W. Cotter	State;	Zip Co	de				
			Port Aransas, TX 78373							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the tr Event Expense	op of this sch	edule)			, TX,	officeholder living	plete Schedule T. j expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder 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			d/Rental Expense e 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: 17/25 Rpt: 34/69							00020493	
4	Date 08/21/2024	J2024 5 Payee name Ready or Not Foundation							
6		-	-	e; Zip Co	do				
0	Amount (\$) \$1,250.00	ľ	Payee address; City; State 2601 Morgan	e, zip co	Jue				
		Corpus Christi, TX 78465							
8	PURPOSE OF EXPENDITURE								
9	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held							Office held	
	Date		Payee name						
07/01/2024 Rockport Pilot									
	Amount (\$) Payee address; City; State; Zip Code								
	\$688.00								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this so Advertising Expense	hedule)	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense PNSE	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held						Office held	
F	Date		Payee name						
08/02/2024 Rockport Pilot									
	Amount (\$)Payee address;City;State; Zip Code\$860.00P.O. Box 730								
	Rockport, TX 78381-0730								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this so Advertising Expense	hedule)	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense PNSE	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment							Transportation E Travel in District Travel Out of Dis			
1	Total pages Schedule F1:	12				···•		Filer ID	(Ethics Commission Filers)	
-	Sch: 18/25 Rpt: 35/69		Hunter, Todd A. (The Honorable)							
4	Date	5	Payee name							
	07/29/2024		Romeros, Christianna							
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	de				
	\$1,500.00		429 Naples							
			Corpus Christi, TX 78404							
8	PURPOSE	(a)	Category (See Categories listed at the top	on of this sch	redule)	(b) Description	<u></u> า			
	OF EXPENDITURE		Salaries/Wages/Contract Labo					side of Texas. Com	plete Schedule T.	
	EXPENDITORE		-					<, officeholder living	g expense	
						Contract	Labor			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name		Office sou	ght		Office he	eld	
	Date	Γ	Payee name							
	08/09/2024		Romeros, Christianna							
	Amount (\$) Payee address; City; State; Zip Code									
	\$136.35 429 Naples									
			·							
		Corpus Christi, TX 78404								
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.						nlete Schedule T.				
	EXPENDITURE		Salaries/Wayes/Contract Labor					K, officeholder living		
						Contract	Labor			
	Complete ONLY if direct		Candidate/Officeholder name	(Office sou	ght		Office he	eld	
	expenditure to benefit C/OI	н								
	Date	Γ	Payee name							
	08/26/2024		Romeros, Christianna							
	Amount (\$)		Payee address; City;	State	; Zip Co	de				
	\$100.00		429 Naples							
	Corpus Christi, TX 78404									
	PURPOSE	(a)	Category (See Categories listed at the to	p of this sch	nedule)	(b) Description	ı			
	OF Salaries/Wages/Contract Labor									
	Check if Austin, TX, officeholder living expense Contract Labor									
						Contract	Labui			
	Complete ONIL V if direct	L	Condidate/Officeholder name		Office cour	abt		Office he		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	, c	Office sou	gni		Once ne	eiu	

	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/Reimburseme Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			ead/Rental Expense nse ense ges/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 F	LER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 19/25 Rpt: 36/69								
4	Date 08/26/2024	4 5 Payee name Silverado Smokehouse							
6	Amount (\$) \$15.40	7 Payee address; City; State; Zip Code \$15.40 4522 Weber Rd Corpus Christi, TX 78411							
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Meeting expense							, officeholder living expense	
9	Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							Office held	
	Date	P	ayee name						
07/29/2024 South Jetty									
	Amount (\$) \$240.00	Ρ	ayee address; City; O Box 1117	State;	Zip Cod	e			
	PURPOSE OF EXPENDITURE	(a) C	ort Aransas, TX 78373 ategory (See Categories listed at the top o dvertising Expense	of this schec	dule) (n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense ENSE	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	5						Office held	
	Date	P	ayee name						
08/26/2024 South Jetty									
	Amount (\$)Payee address;City;State; Zip Code\$240.00PO Box 1117								
	Port Aransas, TX 78373								
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the top o dvertising Expense	of this schec	dule) (n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense ENSE	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	Of	ffice soug	nt		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 expla	ains h	Office Ove Polling Exp Printing Ex Salaries/W	rhead bense pens ages	e 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: 20/25 Rpt: 37/69		Hunter, Todd A. (The Honorable)						00020493	· · ·	
4	Date 07/02/2024	5	Payee name South Texas Alliance of Republicar	าร							
6	Amount (\$)	7	Payee address; City; S	tate:	Zip Co	de					
-	\$500.00		4934 High Meadow Dr	,							
			Correcto Christi, TV 70412								
			Corpus Christi, TX 78413								
8	PURPOSE OF	(a)	Category (See Categories listed at the top of thi	is sche	edule)	(b)	Description				
	EXPENDITURE		Event Expense						de of Texas. Com officeholder living		
							Event sponso			expense	
							Event sponse	5151	ΠÞ		
9	Complete ONLY if direct		Candidate/Officeholder name	0	office soug	abt			Office he	ld	
٩ ١	expenditure to benefit C/OF		andidate/Officeholder flame	0	nice sou	ynt			Office fie	210	
		-									
	Date		Payee name								
	07/03/2024		South Texas Alliance of Republicar	าร							
	Amount (\$)		Payee address; City; S	tate;	Zip Co	de					
	\$500.00		4934 High Meadow Dr								
			Corpus Christi, TX 78413								
	PURPOSE	(a)	Category (See Categories listed at the top of thi	is sche	edule)	(b)	Description				
	OF EXPENDITURE		Event Expense						de of Texas. Com		
									officeholder living	expense	
							Event sponso	JISI	πþ		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	0	office sou	gnt			Office he	2IC	
	Date		Payee name								
	07/29/2024		South Texas Alliance of Republicar	าร							
	Amount (\$)		Payee address; City; S	tate;	Zip Co	de					
	\$500.00		4934 High Meadow Dr								
			Corpus Christi, TX 78413								
	PURPOSE	(a)	Category (See Categories listed at the top of thi	is sche	edule)	(b)	Description				
	OF EXPENDITURE		Event Expense						de of Texas. Com		
									officeholder living	expense	
							Event sponso	orsr	nb		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	0	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		Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Office Ove 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)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 21/25 Rpt: 38/69		Hunter, Todd A. (The Honorable)				00020493			
4	Date	5	Payee name							
	08/09/2024		South Texas Alliance of Republicans							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le					
	\$60.00		4934 High Meadow Dr							
			Corpus Christi, TX 78413							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dule)	(b) Description					
	OF		Food/Beverage Expense	uulo)		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE						, officeholder living expense			
					Meeting expe	ens	e			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Of	ffice sou	Jht		Office held			
	Date		Payee name							
	07/01/2024		Starbucks Staples & Doddridge							
				Zip Co	10					
	Amount (\$)				le					
	\$12.07		3738 Staples							
			Corpus Christi, TX 78411							
	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dule)	(b) Description					
	OF EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T.			
							, officeholder living expense			
					Meeting expe	ens	e			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Of	ffice sou	Int		Office held			
	Date		Payee name							
	08/23/2024		Steve Ray & Associates							
	Amount (\$)			Zip Co	le					
	\$1,300.00		901 N. Carancahua St							
			Corpus Christi, TX 78401							
	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dule)	(b) Description					
	OF EXPENDITURE		Consulting Expense				ide of Texas. Complete Schedule T.			
	EXPENDITORE						, officeholder living expense			
					Consulting ex	xpe	ense			
	Complete ONLY if direct		Candidate/Officeholder name Of	ffice sou	Jht		Office held			
	expenditure to benefit C/OI	1								

			EXPENDITURE CATEGORIES FOR	во	X 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Over Food/Beverage Expense Polling Exp Gift/Awards/Memorials Expense Printing Exp	head ense pense 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	3	Filer ID (Ethics Commission Filers)			
	Sch: 22/25 Rpt: 39/69		Hunter, Todd A. (The Honorable)				00020493			
4	Date 07/01/2024		Payee name Sugarbakers							
6	Amount (\$)	7	Payee address; City; State; Zip Coc	le						
	\$21.12		2766 Santa Fe							
			Corpus Christi, TX 78404							
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense			ΓX, α	e of Texas. Complete Schedule T. officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Office soug	jht			Office held			
	Date		Payee name							
	08/09/2024		Sugarbakers							
	Amount (\$)		Payee address; City; State; Zip Coc	le						
	\$44.22		2766 Santa Fe St, Corpus Christi, TX 78404							
		<u> </u>								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Food/Beverage Expense			ΓX, α	e of Texas. Complete Schedule T. officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder name Office soug	jht			Office held			
	Date		Payee name							
	08/09/2024		Sugarbakers							
	Amount (\$) \$42.73		Payee address; City; State; Zip Coc 2766 Santa Fe St,	le						
			Corpus Christi, TX 78404							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense			ΓX, α	e of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Office soug	jht			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/Reimbursement 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:	· · ·	3 Filer ID (Ethics Commission Filers)						
-	Sch: 23/25 Rpt: 40/69	Hunter, Todd A. (The Honorable)	00020493						
4	Date 08/26/2024	Payee name Sugarbakers							
6	Amount (\$) \$85.45	Payee address; City; State; Zip Code 2766 Santa Fe St, State; Corpus Christi, TX 78404							
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ISE						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/02/2024	Texas A&M University-Corpus Christi							
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 6300 Ocean Drive							
	PURPOSE	Corpus Christi, TX 78412							
	OF		utside of Texas. Complete Schedule T. TX, officeholder living expense "Ship						
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/09/2024	The Galley Bistro & Bake Ship							
	Amount (\$) \$18.68	Payee address;City;State;ZipCode924 S Staples St							
		Corpus Christi, TX 78404							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ISE						
	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 Expe Legal Services The Instruction Guide		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Lal	ense bor	Transportation E Travel in District Travel Out of Dis	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: 24/25 Rpt: 41/69		Hunter, Todd A. (The Honorabl	le)				00020493			
4	Date 07/29/2024		Payee name Toucan Graphics								
6	Amount (\$) \$69.28		Payee address; City; 1817 Padre Blvd, # 1 South Padre Island, TX 78597	State;	; Zip Co	de					
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Printing Expense	p of this sch	edule)		if travel out if Austin, T	tside of Texas. Com X, officeholder living S E			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	yht		Office he	eld		
	Date		Payee name								
	08/09/2024		United Chamber of Commerce								
	Amount (\$) \$10.00		Payee address; City; 602 N Staples, Ste 150	State;	; Zip Co	de					
		<u> </u>	Corpus Christi, TX 78401								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Food/Beverage Expense	p of this sch	edule)		if travel out if Austin, T	tside of Texas. Com X, officeholder living S E			
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office he	eld		
	Date		Payee name								
	07/23/2024		Veterans Memorial Football Bo	oster Cl	lub						
	Amount (\$) \$1,000.00		Payee address; City; 3750 Cimarron Blvd,	State;	; Zip Co	de					
			Corpus Christi, TX 78414								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Event Expense	p of this sch	edule)		if travel out if Austin, T	tside of Texas. Com X, officeholder living Ship			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office he	eld		

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Offi Food/Beverage Expense Pol Gift/Awards/Memorials Expense Prir mmittee Legal Services Sal	an Repayment/Reimbursement ice Overhead/Rental Expense ling Expense tting Expense aries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
	-	The Instruction Guide explains how	to complete this form.				
1	Total pages Schedule F1:		3	Filer ID(Ethics Commission Filers)			
	Sch: 25/25 Rpt: 42/69	Hunter, Todd A. (The Honorable)		00020493			
4	Date 07/25/2024	Payee name Veterans Memorial HS Cheer Booster	·				
6	Amount (\$) \$1,000.00	Payee address; City; State; Zi 3750 Cimarron Blvd, Corpus Christi, TX 78414	p Code				
8	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule Event Expense	Check if travel outs	side of Texas. Complete Schedule T. 4, officeholder living expense hip			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office	e sought	Office held			

	EAPENDITURE					SCHEDUL	е F4			
		EXPE	ENDITURE CATEGOR							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expe Fees Food/Beve - Gift/Awards I Committee Legal Serv	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Jursement Solicitation/Fundraising Expense Expense Transportation Equipment & Related Expense Travel in District Travel Out of District t Labor OTHER (enter a category not listed above)						
_			ruction Guide explains l	how to complete this form.			· ·			
1	Total pages Schedule F4:					3 Filer ID (Ethics Commission Filers)				
	Sch: 1/7 Rpt: 43/69	Hunter, Todd A. (Th				00020493				
4 CREDIT CARD ISSUER			ncial institution Cards	EXPENDITURES	CHARGED TO A CREDIT					
6	PAYMENT	(a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card								
		\$22.75	07/25/2024	08/02/2024						
7	PAYEE	(a) Payee name		(b) Payee address;	City	, State,	Zip Cod			
		AthleteGuild		103 Gattuso Rd, Unit 2	25					
			New Braunfels, TX 78	132						
8	PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE		(See Categories listed at the top Event Expense	or this schedule)	Event sponsorship						
	Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin,				der living expense				
9 Complete ONLY if direct		Candidate/Officeholder	name C	Office sought	Office	e held				
е	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid					
		\$27.99	07/26/2024	08/02/2024						
	PAYEE	(a) Payee name		(b) Payee address;	City	, State,	Zip Cod			
		V Fit Productions		750 Everhart						
				Corpus Christi, TX 784	411					
	PURPOSE OF	(a) Category		(b) Description						
	EXPENDITURE	(See Categories listed at the top Event Expense	of this schedule)	Event sponsorship						
	X Political									
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin	n, TX, officehold	der living expense				
	Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Offic	e held				
е	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid					
		\$43.79	08/02/2024	08/02/2024						
	PAYEE	(a) Payee name		(b) Payee address; City, State,						
		RunSignUp.com		300 Mill St,, Ste 200						
				Moorestown, NJ 0805	7					
	PURPOSE OF	(a) Category		(b) Description						
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Event sponsorship						

nse State, Zip Code nse State, Zip Code Event Expense X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

Zip Code

∟									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve y - Gift/Award	Fees Off Food/Beverage Expense Pol Gift/Awards/Memorials Expense Prin Committee Legal Services Sal		BOX 10(a) ment/Reimbursement ead/Rental Expense nse jes/Contract Labor	Trar Trav Trav	olicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District THER (enter a category not listed above)		
		The Inst	ruction Guide explains h	now to com	plete this form.				
1	Total pages Schedule F4:	2 FILER NAME				:	3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 2/7 Rpt: 44/69	Hunter, Todd A. (T	he Honorable)				00020493		
4	CREDIT CARD	Name of fina	ncial institution	5 TC	TAL OF UNITEMIZE	ED			
	ISSUER	see p	revious	Cł	(PENDITURES HARGED TO A CREI ARD		\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) D	ate(s) Credit Card Iss	suer I	Paid		
		\$61.83	08/02/2024	08/0	2/2024				
7	PAYEE	(a) Payee name		(b) P	ayee address;		City,	State,	Zip Code
					stant Contact				
		Constant Contact							
				Walt	ham, ME 02451				
8	PURPOSE OF	(a) Category			escription				
	EXPENDITURE	(See Categories listed at the top of this schedule)			ertising expense				
	X Political	Advertising Expense							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	I	Check if Austin.	. TX. oʻ	fficeholder living exp	oense	
9	Complete ONLY if direct	Candidate/Officeholder	· · · · · · · · · · · · · · · · · · ·	office sough			Office held		
	expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Da	ate(s) Credit Card Iss	suer	Paid		
		\$1,000.00	08/09/2024						
⊢	PAYEE	(a) Payee name			ayee address;		City,	State,	Zip Code
					5 US Highway 181	, #A			
		Portland Chamber of Commerce			0,00				
				Port	and, TX 78374				
	PURPOSE OF	(a) Category		(b) D	(b) Description				
	EXPENDITURE	(See Categories listed at the top Event Expense	See Categories listed at the top of this schedule)		nt expense				
	X Political								
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т.	Check if Austin,	, TX, o	officeholder living expense		
	Complete ONLY if direct	Candidate/Officeholder	r name O	office sough	nt		Office held		
e	expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge		ate(s) Credit Card Iss	suer l	Paid		
		\$45.00	07/27/2024	08/0	2/2024				
⊢	PAYEE	(a) Payee name	1	(b) P	ayee address;		City,	State,	Zip Code
				1153	3 24th Street				
		Texas Republican	Liberty Caucus	Dec	Mainas IA E0211				
⊢	PURPOSE OF	(a) Category			Moines, IA 50311 escription				
	EXPENDITURE	(See Categories listed at the top	of this schedule)	. ,	ical Contribution				
	X Political Contributions/Donations Made By Candidate/Officeholder/Political Committee								
		Candidate/Officehold							
_	Non-Political		of Texas. Complete Schedule			, IX, 0	fficeholder living exp	bense	
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	office sough			Office held		
Fo	rms provided by Texas E	thics Commission	www.ethics.s	tate.tx.us			Vers	sion V4.1	.0.48da51

		EXPE	ENDITURE CATEGOR	IES 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	Transportation Eq Travel in District Travel Out of Distr					
			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: 3/7 Rpt: 45/69	Hunter, Todd A. (Th	ne Honorable)		00020493	00020493				
4	CREDIT CARD	Name of final	ncial institution		5 TOTAL OF UNITEMIZED					
	ISSUER	see p	revious	EXPENDITURES CHARGED TO A CRE CARD	DIT					
6	PAYMENT	(a) Amount Charged \$170.00	(b) Date of Charge 07/30/2024	(c) Date(s) Credit Card Is: 08/02/2024	suer Paid					
7	PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code			
		Storage King USA		8041 SPID						
				Corpus Christi, TX 784	112					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description						
	—	Office Overhead/Ren	,	Storage Expense						
	X Political									
	Non-Political		of Texas. Complete Schedule		, TX, officeholder livir	• •				
				ffice sought	Office hel	d				
e	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$9.00	(b) Date of Charge 08/01/2024	(c) Date(s) Credit Card Is: 08/19/2024	suer Pald					
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
		University of Texas		2515 Speedway						
				Austin, TX 78712						
	PURPOSE OF	(a) Category (See Categories listed at the top	of this askadula)	(b) Description						
	EXPENDITURE	Parking expense		Parking expense at UT						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin	, TX, officeholder livir	ng expense				
e	Complete <u>ONLY</u> if direct penditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office hel	d				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid					
		\$61.83	08/10/2024							
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
		Constant Contact		Constant Contact						
				Waltham, ME 02451						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
	X Political	Advertising Expense		Advertising expense						
	Non-Political		of Texas. Complete Schedule		, TX, officeholder livir	• •				
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office hel	d				

	EXPENDITURE CATEGORIES FOR BOX 10(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	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 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 (Eth	ics Commiss	sion Filers)				
Sch: 4/7 Rpt: 46/69	Hunter, Todd A. (Th	he Honorable)	00020493							
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZE	ED \$						
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CREI CARD							
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid						
	\$260.00	08/02/2024	08/19/2024							
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Portland Chamber	of Commerce	1605 US Highway 181,	1605 US Highway 181, #A						
			Portland, TX 78374							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description							
	Event Expense	or this serieduley	Event sponsorship							
X Political										
Non-Political		of Texas. Complete Schedule		TX, officeholder living ex	pense					
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 08/19/2024	suer Paid						
	\$552.65	08/02/2024	00/13/2024							
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
			734 E Port Ave							
	Whataburger Field	catering								
			Corpus Christi, TX 78401							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description							
	Event Expense	of this schedule)	Catering expense							
X Political										
Non-Political		of Texas. Complete Schedule		TX, officeholder living ex	pense					
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 08/19/2024	suer Paid						
	\$164.70	08/05/2024	00/10/2024							
						i o -				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Tremont House		2300 Ship Mechanic R	2300 Ship Mechanic Row St.						
			Galveston, TX 77550							
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top	of this schedule)	Hotel expense							
X Political	Hotel expense									
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 O	ffice sought	Office held						
expenditure to benefit C/OH										

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve y - Gift/Award	erage Expense s/Memorials Expense	RIES FOR BOX Loan Repayment/R Office Overhead/Re Polling Expense Printing Expense Salaries/Wages/Cc	Reimbursement ental Expense	Transportation Travel in Distri Travel Out of D		·		
	-	ruction Guide explains	-		0111211 (01101				
L Total pages Schedule F4:	2 FILER NAME		· ·		3 Filer	ID (Ethics Commis	sion Filers)		
Sch: 5/7 Rpt: 47/69	Hunter, Todd A. (Th	he Honorable)				00020493			
		ncial institution	5 TOTAL	OF UNITEMIZI					
ISSUER	see p		IDITURES GED TO A CRE	DIT \$					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is:	suer Paid				
	\$40.82	08/05/2024	08/19/20)24					
PAYEE	(a) Payee name	1	(b) Payee	address;	City,	State,	Zip Code		
	Parking Manageme	ent Company		arlotte Av e					
			Nashville	e, TN 37209					
B PURPOSE OF	(a) Category	(b) Descri	ption						
EXPENDITURE	(See Categories listed at the top Parking expense	Parking	Parking expense at hotel						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	е Т.	Check if Austin	, TX, officeholder	living expense			
Complete <u>ONLY</u> if direct	•	Office sought		Office I					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Is	suer Paid				
	\$30.43	08/11/2024	08/19/20)24					
PAYEE	(a) Payee name	(b) Payee	address;	City,	State,	Zip Code			
		750 Ever	rhart						
	V Fit Productions		Corpus (Christi, TX 784	11				
PURPOSE OF	(a) Category	(b) Description							
EXPENDITURE		(See Categories listed at the top of this schedule)			Event sponsorship				
X Political	Event Expense	vent Expense							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	е Т.	Check if Austin	, TX, officeholder	living expense			
Complete ONLY if direct	Candidate/Officeholder	r name C	Office sought		Office I	neld			
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Is	suer Paid				
	\$36.14	08/11/2024	08/19/20)24					
PAYEE	(a) Payee name	1	(b) Payee	address;	City,	State,	Zip Code		
			750 Ever	rhart					
	V Fit Productions								
			Corpus 0	Christi, TX 784	11				
PURPOSE OF	(a) Category		(b) Descri	•					
	(See Categories listed at the top Event Expense	of this schedule)	Event sp	onsorship					
X Political									
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	е Т.	Check if Austin	, TX, officeholder	living expense			
Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name C	Office sought		Office I	ıeld			
expenditure to benefit C/OH									
orms provided by Texas F	thics Commission	www.ethics.s	state tv us			Version V/4 1	0.48da51f		

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Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	Event Expr Fees Food/Beve y - Gift/Award al Committee Legal Serv	erage Expense s/Memorials Expense rices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraisi Transportation Equip Travel in District Travel Out of District OTHER (enter a cate	ment & Related	
	The Inst	ruction Guide explains	how to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (E	thics Commiss	sion Filers)
Sch: 6/7 Rpt: 48/69	Hunter, Todd A. (Th	ne Honorable)		00020493		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRE CARD	\$		
6 PAYMENT	(a) Amount Charged \$135.00	(b) Date of Charge 08/14/2024	(c) Date(s) Credit Card Is 08/19/2024	suer Paid		
7 PAYEE	(a) Payee name World Affairs Coun	cil of South	(b) Payee address; 4409 Sue Circle	City,	State,	Zip Cod
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Event Expense	of this schedule)	Corpus Christi, TX 784 (b) Description Event sponsorship	410		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedul	e T. Check if Austir	n, TX, officeholder living	expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name C	Dffice sought	Office held		
PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 08/14/2024	(c) Date(s) Credit Card Is 08/19/2024	suer Paid		
PAYEE	(a) Payee name Rotary Club of Corp	bus Christi	(b) Payee address; PO Box 260682 Corpus Christi, TX 784	City,	State,	Zip Coc
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Event sponsorship			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedul	e T. Check if Austir	n, TX, officeholder living	expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name (Dffice sought	Office held		
PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 08/15/2024	(c) Date(s) Credit Card Is 08/19/2024	suer Paid		
PAYEE	(a) Payee name Texas Coastal Aca	demy	(b) Payee address; 1418 Dana Dr. Rockport, TX 78382-3	City,	State,	Zip Coc
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Event sponsorship			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedul	e T. Check if Austir	n, TX, officeholder living	expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder		Dffice sought	Office held		
Forms provided by Taxas F	Thics Commission	www.ethics	tate ty us	1/2	orsion V/4 1	

SCHEDULE F4

Zip Code

Zip Code

Zip Code

EXPENDITURES MADE BY CREDIT CARD

	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 I Transportation Equipmen Travel in District Travel Out of District OTHER (enter a categor	nt & Related I	
		The Inst	ruction Guide explains h	ow to complete this form.			
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethio	cs Commiss	sion Filers)
	Sch: 7/7 Rpt: 49/69	Hunter, Todd A. (Th	ne Honorable)		00020493		
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZE	D		
	ISSUER	see p	revious	EXPENDITURES CHARGED TO A CRED CARD	ит \$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
		\$350.00	08/18/2024	08/19/2024			
7	PAYEE	(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code
		United Chamber of	Commerce	602 N Staples, Ste 150			
				Corpus Christi, TX 7840)1		
8	PURPOSE OF	(a) Category	of this ashadula)	(b) Description			
		(See Categories listed at the top Event Expense	of this schedule)	Event sponsorship			
	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 Of	ffice sought	Office held		
e	xpenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss 08/19/2024	uer Paid		
		\$170.00	08/26/2024	00/19/2024			
	PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code
				8041 SPID			
		Storage King USA					
				Corpus Christi, TX 7841	12		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
		Office Overhead/Ren		Storage expense			
	X Political						
	Non-Political		of Texas. Complete Schedule		TX, officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Of	ffice sought	Office held		
e	xpenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu 08/19/2024	uer Pald		
		\$164.70	08/05/2024				
	PAYEE				City	Ctata	Zin Cada
	FAILE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
		Tremont House		2300 Ship Mechanic Ro	JW 51.		
				Galveston, TX 77550			
\vdash	PURPOSE OF	(a) Category		(b) Description			
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Hotel expense			
	X Political	Hotel expense					
	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		ffice sought	Office held		
e	xpenditure to benefit C/OH						
-		1					

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			≞ G
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Exp / - Gift/Awards/Memorials Expense Printing E	bayment/Reinbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)	
1	Total pages Schedule G: Sch: 1/19 Rpt: 50/69	 FILER NAME Hunter, Todd A. (The Honorable) 	3 Filer ID (Ethics Commission Fi 00020493	ilers)
4	Date 07/06/2024	5 Payee name Associated Builders & Contractors, Texas Coa	astal Bend Chapter	
6	Amount (\$) \$120.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 2584 Corpus Christi, TX 77403		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Meeting expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
	Date 09/25/2024	Payee name Associated Builders & Contractors, Texas Coa	astal Bend Chapter	
	Amount (\$) \$40.00 Reimbursement from political contributions intended	Payee address; City; State; Zip Co P.O. Box 2584 Corpus Christi, TX 77403	ode	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Meeting expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
	Date 09/26/2024	Payee name Austin Hotel Downtown		
	Amount (\$) \$821.23	Payee address; City; State; Zip Co 617 Colorado St	ode	
L	Reimbursement from political contributions intended	Austin, TX 78701		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Hotel expense	Description Check if travel outside of Texas. Complete Sci Check if Austin, TX, officeholder living expense Hotel expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling F 9 Gift/Awards/Memorials Expense Printing	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense Expense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)	
1 Total pages Schedule G: Sch: 2/19 Rpt: 51/69	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493	
4 Date 09/09/2024	5 Payee name Avis Rental Car		
6 Amount (\$) \$868.02 X Reimbursement from political contributions intended	 7 Payee address; City; State; Zip Code 6 Sylvan Way Parsippany, NJ 07054 		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Rental car	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date 09/06/2024	Payee name Boys & Girls Club		
Amount (\$) \$1,500.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 3902 Greenwood Corpus Christi, TX 78416	ode	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date 09/06/2024	Payee name Carlson, Jessie		
Amount (\$) \$500.00	Payee address; City; State; Zip C 337 Gulfstream Dr.	ode	
X Reimbursement from political contributions intended	Corpus Christi, TX 78418		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Media consulting	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Media consulting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
F				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1	Total pages Schedule G: Sch: 3/19 Rpt: 52/69	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Hunter, Todd A. (The Honorable) 00020493		
4	Date 09/09/2024	5 Payee name Caroline Harris Davila For State Representative		
6	Amount (\$) \$1,041.02 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 700 Round Rock, TX 78680		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Political contribution		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
F	Date	Payee name		
	09/09/2024	Citizens for Fryer		
	Amount (\$) \$500.00 Reimbursement from	Payee address; City; State; Zip Code PO Box 81369		
	X political contributions intended	Corpus Christi, TX 78468		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Description Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political Contribution		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
F	Date	Payee name		
	09/05/2024	Coastal Bend Heros		
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 7313 Pepper Ridge		
	X Reimbursement from political contributions intended	Corpus Christi, TX 78413		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense Event sponsorship Event sponsorship		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing I	payment/Reinbursement verhead/Rental Expense xpense Expense 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 G: Sch: 4/19 Rpt: 53/69	2 FILER NAME Hunter, Todd A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020493
4 Date 09/12/2024	5 Payee name Coastal Bend Republican Coalition		
6 Amount (\$) \$5,000.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 15346 Cartagena Court Corpus Christi, TX 78418		
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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Pavee name		
07/16/2024	Coffee Waves Flour Bluff		
Amount (\$) \$34.28 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 10309 SPID, Ste F Corpus Christi, TX 78412	ode	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
07/26/2024	Coffee Waves Flour Bluff		
Amount (\$) \$9.12	Payee address; City; State; Zip C 10309 SPID, Ste F	ode	
X Reimbursement from political contributions intended	Corpus Christi, TX 78412		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y Gift/Awards/Memorials Expense Printing I	payment/Reimbursement verhead/Rental Expense xpense Expense 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 G: Sch: 5/19 Rpt: 54/69	2 FILER NAME Hunter, Todd A. (The Honorable)	:	3 Filer ID (Ethics Commission Filers) 00020493
4 Date 08/23/2024	5 Payee name Coffee Waves Flour Bluff		
6 Amount (\$) \$23.53 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 10309 SPID, Ste F Corpus Christi, TX 78412		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
09/20/2024	Coffee Waves Flour Bluff		
Amount (\$) \$24.61 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 10309 SPID, Ste F Corpus Christi, TX 78412	ode	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/09/2024	Payee name Constant Contact		
Amount (\$) \$61.83	Payee address; City; State; Zip C Constant Contact	ode	
X Reimbursement from political contributions intended	Waltham, ME 02451		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense ixpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 6/19 Rpt: 55/69	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493		
4 Date 09/13/2024	5 Payee name Double Tree Suites			
6 Amount (\$) \$693.42 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 303 West 15th Austin, TX 78701			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Hotel expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Hotel expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date 09/25/2024	Payee name Double Tree Suites			
Amount (\$) \$686.79 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 303 West 15th Austin, TX 78701	ode		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Hotel expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Hotel expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date 09/25/2024	Payee name Double Tree Suites			
Amount (\$) \$159.00	Payee address; City; State; Zip C 303 West 15th	ode		
X Reimbursement from political contributions intended	Austin, TX 78701			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Parking expense at hotel	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Parking expense at hotel		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Poli Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E By - Gift/Awards/Memorials Expense Printing F	bayment/Reimbursement Solicitation/Fundraising Expense erhead/Rental Expense Transportation Equipment & Related Expense cpense Travel in District xpense Travel Out of District Vages/Contract Labor OTHER (enter a category not listed above)		
1 Total pages Schedule G Sch: 7/19 Rpt: 56/69	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493		
4 Date 09/11/2024	5 Payee name Flour Bluff Hornet Golf			
6 Amount (\$) \$110.0 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 2505 Waldron Rd. Corpus Christi, TX 78418			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.		
 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH 	Candidate/Officeholder name	Office sought Office held		
Date 09/06/2024	Payee name Fox, Margaux			
Amount (\$) \$296.1 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 4 703 Patterson Ave Austin, TX 78703	ode		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date 09/05/2024	Payee name Grassroots Consultants			
Amount (\$) \$800.0	Payee address; City; State; Zip C 4710 Hakel	ode		
X Reimbursement from political contributions intended	Corpus Christi, TX 78415			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consulting expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y Gift/Awards/Memorials Expense Printing	epayment/Reinbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense Expense Travel in District Wages/Contract Labor OTHER (enter a category not listed above)	
1 Total pages Schedule G: Sch: 8/19 Rpt: 57/69	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493	
4 Date 09/13/2024	5 Payee name Grassroots Consultants		
6 Amount (\$) \$1,000.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 4710 Hakel Corpus Christi, TX 78415		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date	Pavee name		
09/19/2024	Grassroots Consultants		
Amount (\$) \$1,000.00	Payee address; City; State; Zip C 4710 Hakel	Code	
X political contributions intended	Corpus Christi, TX 78415		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Consulting expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date 09/13/2024	Payee name Huerta, Isabella		
Amount (\$) \$294.75	Payee address; City; State; Zip C 446 Pennington Dr.	Code	
X Reimbursement from political contributions intended	Corpus Christi, TX 78412		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Mileage expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	payment/Reinbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)	
1 Total pages Schedule G: Sch: 9/19 Rpt: 58/69	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493	
4 Date 09/25/2024	5 Payee name Huerta, Isabella		
6 Amount (\$) \$294.75 X Reimbursement from political contributions intended	 Payee address; City; State; Zip C 446 Pennington Dr. Corpus Christi, TX 78412 	ode	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date	Payee name		
08/20/2024	Hyatt Regency Hill Country Resort		
Amount (\$) \$5.00 Reimbursement from political contributions	Payee address; City; State; Zip C 9800 Hyatt Resort Dr,	ode	
intended	San Antonio, TX 78251		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Parking expense	Description Check if travel outside of Texas. Complete Schedule T.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date	Payee name		
09/20/2024	Instituto De Cultura Hispanic		
Amount (\$) \$2,500.00	Payee address; City; State; Zip C 1617 N. Chaparral St.	ode	
X Reimbursement from political contributions intended	Corpus Christi, TX 78404		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G						
	EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Re Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing I	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)				
1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 10/19 Rpt: 59/69	Hunter, Todd A. (The Honorable)	00020493				
4 Date	5 Payee name	I				
08/31/2024	John Donner & Associates					
6 Amount (\$) \$7,500.00 Reimbursement from	\$7,500.00 1005 Congress Ave., Ste 580					
X political contributions intended	Austin, TX 78701					
8 PURPOSE OF EXPENDITURE	B PURPOSE OF (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought Office held				
Date	Payee name					
09/05/2024	John Donner & Associates					
Amount (\$)	Payee address; City; State; Zip C	ode				
\$7,500.00						
X Reimbursement from political contributions intended	Austin, TX 78701					
PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.				
OF EXPENDITURE	Consulting Expense	Consulting expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
Date	Payee name					
09/06/2024	John Donner & Associates					
Amount (\$) \$14,240.44	Payee address; City; State; Zip C 1005 Congress Ave., Ste 580	ode				
X Reimbursement from political contributions intended	Austin, TX 78701					
PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.				
OF EXPENDITURE	Consulting Expense	Consulting expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y Gift/Awards/Memorials Expense Printing I	Avyment/Reimbursement S erhead/Rental Expense T kypense T Xypense T Wages/Contract Labor C	Solicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District DTHER (enter a category not listed above)	
1 Total pages Schedule G: Sch: 11/19 Rpt: 60/69	2 FILER NAME Hunter, Todd A. (The Honorable)		iler ID (Ethics Commission Filers) 0020493	
4 Date 08/30/2024	5 Payee name Lopez Broadcasting	L. L		
6 Amount (\$) \$1,500.00 Reimbursement from political contributions intended	 Payee address; City; State; Zip C PO Box 270547 Corpus Christi, TX 78427 	ode		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
Date	Payee name			
09/09/2024	Marriott Courtyard			
Amount (\$) \$169.04 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 1803 East Sonterra Blvd San Antonio, TX 78259	ode		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Hotel expense		ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
Date 09/20/2024	Payee name Mission 911			
Amount (\$) \$1,000.00	Payee address; City; State; Zip C 911 Park Place	ode		
X Reimbursement from political contributions intended	Corpus CHristi, TX 78401			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

POLITICAL E	XPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Mad Candidate/Officeholder/Po Credit Card Payment					
1 Total pages Schedule G Sch: 12/19 Rpt: 61/69					
4 Date 09/09/2024	5 Payee name Nueces County Republican Party				
6 Amount (\$) \$2,500.0 Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 0 PO Box 18016 Corpus Christi, TX 78480-8016				
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 Check if Austin, TX, officeholder living expense					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held				
Date 09/06/2024	Payee name Omni Corpus Christi Hotel				
Amount (\$) \$812. Reimbursement from political contributions intended	Payee address; City; State; Zip Code 9 707 North Shoreline Blvd Corpus Christi, TX 78401				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. Hotel expense Check if Austin, TX, officeholder living expense Hotel expense Hotel expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held				
Date 08/31/2024	Payee name Padre Island Business Association				
Amount (\$) \$2,000.0	Payee address; City; State; Zip Code 0 4493 SPID, Ste A PMB 313				
X Reimbursement from political contributions intended	al contributions				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. Event Expense Check if Austin, TX, officeholder living expense Event sponsorship				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 13/19 Rpt: 62/69	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493		
4 Date 09/13/2024	5 Payee name Rockport Fulton Chamber of Commerce			
6 Amount (\$) \$500.00 X Reimbursement from political contributions intended	 Payee address; City; State; Zip City; State;	ode		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date	Payee name			
07/12/2024	Romeros, Christianna			
Amount (\$) \$100.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 429 Naples Corpus Christi, TX 78404	ode		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Date 09/20/2024	Payee name Romeros, Christianna			
Amount (\$) \$200.00	Payee address; City; State; Zip C 429 Naples	ode		
X Reimbursement from political contributions intended	Corpus Christi, TX 78404			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T.		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office OV Food/Beverage Expense Polling E: y - Gitt/Awards/Memorials Expense Printing E	bayment/Reimbursement Solicitation/Fundraising Expense erhead/Rental Expense Transportation Equipment & Related Expense cpense Travel in District xpense Travel Out of District Vages/Contract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 14/19 Rpt: 63/69	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493			
4 Date 09/25/2024	5 Payee name Romeros, Christianna				
6 Amount (\$) \$100.00 X Reimbursement from political contributions intended	\$100.00 429 Naples				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date 09/25/2024	5/2024 Payee name Sam's Club				
Amount (\$) \$194.50 X Reimbursement from political contributions intended					
PURPOSE OF EXPENDITURE	OF Office Overhead/Pental Expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date 07/12/2024 Amount (\$)	Payee name South Texas Alliance of Republicans Payee address; City; State; Zip Co	ode			
\$60.00	4934 High Meadow Dr				
intended	Corpus Christi, TX 78413				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T.			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Ma Candidate/Officeholder/Po Credit Card Payment	Event Expense Loan Repayr Fees Office Overh Food/Beverage Expense Polling Expe de By - Gift/Awards/Memorials Expense Printing Expe	ment/Reinbursement Solicitation/Fundraising Expense ead/Rental Expense Transportation Equipment & Related Expense nse Travel in District ense Travel Out of District ges/Contract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule	G: 2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 15/19 Rpt: 64/6	9 Hunter, Todd A. (The Honorable)	00020493			
4 Date 09/06/2024	5 Payee name South Texas Alliance of Republicans				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$4,000.		-			
X Reimbursement from political contributions intended	Corpus Christi, TX 78413				
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Contributions/Donations Made By	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
EXPENDITURE Contributions/Donations Made By Candidate/Officeholder/Political Committee Political contribution					
 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH 	ct Candidate/Officeholder name	Office sought Office held			
Date	Payee name				
09/21/2024					
Amount (\$) \$60.	iount (\$) Payee address; City; State; Zip Code \$60.00 4934 High Meadow Dr				
Reimbursement from political contributions intended	Corpus Christi, TX 78413				
PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.			
OF EXPENDITURE	Food/Beverage Expense	Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	ct Candidate/Officeholder name	Office sought Office held			
Date	Payee name				
08/31/2024	South Texas News				
Amount (\$) \$172.	Payee address;City;State;Zip Code00111 N. Washington St.	2			
Reimbursement from political contributions intended	Beeville, TX 78102				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	ct Candidate/Officeholder name	Office sought Office held			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y Gift/Awards/Memorials Expense Printing I	payment/Reimbursement verhead/Rental Expense xpense Expense 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 G: Sch: 16/19 Rpt: 65/69	2 FILER NAME Hunter, Todd A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020493		
4 Date 09/05/2024	5 Payee name South Texas News	ľ			
6 Amount (\$) \$516.00 X Reimbursement from political contributions intended	\$516.00 111 N. Washington St.				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date	Payee name				
09/09/2024	South Texas Property				
Amount (\$) \$1,000.00 Reimbursement from political contributions intended	Payee address; City; State; Zip C PO Box 397 Falfurrias, TX 78355	ode			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 09/09/2024	Payee name Storage King USA				
Amount (\$) \$194.00	Payee address; City; State; Zip C 8041 SPID	ode			
X Reimbursement from political contributions intended	Corpus Christi, TX 78412				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement verhead/Rental Expense xpense Expense 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 G: Sch: 17/19 Rpt: 66/69	2 FILER NAME Hunter, Todd A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020493		
4 Date 09/21/2024	5 Payee name Sugarbakers	ľ			
6 Amount (\$) \$159.33 X Reimbursement from political contributions intended	 Payee address; City; State; Zip C 2766 Santa Fe St, Corpus Christi, TX 78404 	ode			
8 PURPOSE OF EXPENDITURE	PURPOSE OF (a) Category (See Categories listed at the top of this schedule) OF Ecod/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedu Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date	Payee name				
07/15/2024					
Amount (\$) \$1,230.24 X Reimbursement from political contributions intended	\$1,230.24 6300 Ocean Drive				
PURPOSE OF EXPENDITURE	PURPOSE Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule OF Ecod/Boyerage Expense Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date	Payee name				
09/09/2024 Amount (\$) \$250.00	Texas Alliance for Life Payee address; City; State; Zip C 2026 Guadalupe Street	ode			
Reimbursement from political contributions intended	Reimbursement from political contributions				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 18/19 Rpt: 67/69	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers 00020493	s)		
4 Date 09/17/2024	5 Payee name Texas Cultural Trust	I			
6 Amount (\$) \$3,000.00 X Reimbursement from political contributions intended	\$3,000.00 901 MOPAC Expressway Reimbursement from political contributions Barton Oaks Plaza, Ste 410				
8 PURPOSE OF EXPENDITURE	OF Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date	Payee name				
07/06/2024	24 USPS - Lamar Station				
Amount (\$) \$54.40					
X political contributions intended	Corpus Christi, TX 78411-9998				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedu Check if Austin, TX, officeholder living expense	ule T.		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date	Payee name				
09/05/2024	V Fit Productions				
Amount (\$) \$2,975.00	Payee address; City; State; Zip C 750 Everhart	ode			
X Reimbursement from political contributions intended	X political contributions				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedu Check if Austin, TX, officeholder living expense Event sponsorship	ule T.		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Ex y - Gitt/Awards/Memorials Expense Printing E	payment/Reinbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 19/19 Rpt: 68/69	2 FILER NAME Hunter, Todd A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020493			
4 Date 09/09/2024	5 Payee name V Fit Productions	· · · ·			
6 Amount (\$) \$38.49 X Reimbursement from political contributions intended	 Payee address; City; State; Zip Co 750 Everhart Corpus Christi, TX 78411 	ode			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsorship			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date 09/12/2024	Payee name V Fit Productions				
Amount (\$) \$500.00 Reimbursement from political contributions intended	Payee address; City; State; Zip Co 750 Everhart Corpus Christi, TX 78411	ode			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Sponsorship			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			

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

SCHEDULE K

	The Instru	ctio	on Guide explains how to complete this form.	1		bages Schedule K: L/1 Rpt: 69/69
2	2 FILER NAME 3 Filer ID			D (Ethics Commission Filers)		
	Hunter, Todd A. (The Honorable)000204)493		
4	Date	5	Name of person from whom amount is received			8 Amount (\$)
	07/31/2024		American Bank			\$150.59
		6	Address of person from whom amount is received; City; State; Zip Code			
			Corpus Christi, TX 78401			
		7		olitic	cal cont	ribution returned to filer
			Interest on deposits			
	Date		Name of person from whom amount is received			Amount (\$)
	08/30/2024		American Bank			\$142.57
			Address of person from whom amount is received; City; State; Zip Code			
			Corpus Christi, TX 78401			
				olitic		ribution returned to filer
			interest on deposits	Untit	aicon	