# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to comp	olete this form.	1 Filer ID (Ethics Commi 00058415		2 Total pages filed: 21
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable	Oliver S.			Date Received
					ELECTRONICALLY FILED
	NICKNAME	LACT		CUETIV	07/15/2024
	NICKNAME Stan	LAST Kitzman		SUFFIX Jr.	0171072024
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; AP	T / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked
MAILING ADDRESS	P.O. Box 553				Receipt # Amount
Change of Address	Pattison, TX 77466				Date Processed
					Date Imaged
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	•
TREASURER NAME	Mrs.	Erin E.			
IVAIVIL					
	NICKNAME	LAST		SUFFIX	
		Sanders			
6 CAMPAIGN	STREET ADDRESS (NO PO	O BOX PLEASE);	AP.	Γ / SUITE #; CITY;	STATE; ZIP CODE
TREASURER ADDRESS	3415 5th Street				
(Residence or Business)					
,	Brookshire, TX 77423				
7 CAMPAIGN	AREA CODE PHO	NE NUMBER E	EXTENSION		
TREASURER	(281) 375-8255	NE NOMBER	ZXI ZIIOIOII		
PHONE	(===, =================================				
8 REPORT					
TYPE	January 15	30th day before	election	Runoff	15th day after campaign treasurer appointment (officeholder only)
	X July 15	8th day before 6	election	Exceeded modified	Final Report (Attach C/OH-FR)
				reporting limit	
9 PERIOD	Month Day Year			Month Day	Year
COVERED	02/25/2024	TH	IROUGH	06/30/202	24
10 ELECTION	ELECTION DATE			ELECTION TYPE	
	Month Day Year		rimary	Runoff	Other
	11/05/2024	XG	eneral	Special	
				<del></del>	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)
	State Representative Dis	trict 85		State Represent	ative District 85
				L	
		GO T	O PAGE 2		

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 21

13 C / OH NAME	Kitzman Jr., Oliver S.	(The Honorable)	<b>14</b> Filer ID ( 00058415	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without a I officeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
ш	Texas Alliance for Life PAC			
		COMMITTEE ADDRESS		
	SPECIFIC	8000 Centre Park Dr		
		Suite 380		
		Austin, TX 78754		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Shaw, James		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
		4505 Corazon Cv		
		Round Rock, TX 78681		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 18,308.33
EXPENDITURE TOTALS	1			<b>\$</b> 314.16
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 60,512.66
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 36,744.22
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	<b>\$</b> 1,012.72
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		The Honora	ble Oliver S. Kitzmar	ı Jr.
		Signature of	Candidate or Officehole	der
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath
Signature or office	cei auministemiy	r mileu name oi omeet aunimistering	Title of officer	auministening Odth

## **SUBTOTALS - C/OH**

## FORM C/OH **COVER SHEET PG 3**

					3 of 21
	ER NAM	r., Oliver S. (The Honorable)	<b>19</b> Filer ID 00058415	(Ethi	cs Commission Filers)
	HEDUL ME OF			SUBTOTAL AMOUNT	
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	17,900.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	408.33
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$	58,312.66
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	2,200.00
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	OF C/OH	\$	
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12	. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	1,000.00

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUI	SCHEDULE A1	
	The Instru	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 1/4 Rpt: 4/21	
2	FILER NAME Kitzman Jr.,	Oliver S. (The Honorable)		3	Filer ID (Ethics Commission 00058415	on Filers)
4			7	Amount of Contribution (\$)	\$2,500.00	
8	Principal occu	Huntsville, TX 77320  upation / Job title (See Instructions)	Employer (See Instructions			
0	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date Full name of contributor out-of-state PAC (ID#:)  04/15/2024 Conner, Matthew  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00	
	Principal occu	Cypress, TX 77433  upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Managing Principal  Arete Public Affairs					
	Date Full name of contributor out-of-state PAC (ID#:) 06/26/2024 Daniel, Dan  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$1,000.00
		Katy, TX 77493				
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions Westside Sporting Ground		3	
	Date 02/26/2024	Full name of contributor out-of-state PAC (ID#:_ Decker, Blaine  Contributor address; City; State; Zip Code  College Station, TX 77845			Amount of Contribution (\$)	\$150.00
	Principal occupation / Job title (See Instructions)  Employer (See Instruction Decker Financial Group Decker Finan			)		
	Date Full name of contributor out-of-state PAC (ID#:) 04/30/2024 Gary Gates for Texas  Contributor address; City; State; Zip Code  Rosenberg, TX 77471		)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDUI	LE <b>A1</b>
	The Instruction Guide explains how to complete this form.			s how to complete this form.			Total pages Schedule A1: Sch: 2/4 Rpt: 5/21	
2	FILER NAME					3	Filer ID (Ethics Commission	on Filers)
	Kitzman Jr.,	Oliver S. (The Honorable)					00058415	
4	Date 04/15/2024  Gottesman, Sanford  Contributor address; City; State; Zip Code			7	Amount of Contribution (\$)	\$1,000.00		
•	Principal occu	Austin, TX 78703 pation / Job title (See Instructions	a I	0	Employer (See Instructions			
0	Real Estate		·)	9	Self	)		
	Date 02/27/2024	Full name of contributor HOSPAC Texas Hospital Contributor address; City; St			)		Amount of Contribution (\$)	\$2,000.00
	Dringing con	Austin, TX 78701	<u>,                                      </u>		Employer (See Instructions	·/_		
	Principal occu	pation / Job title (See Instructions	·)		Employer (See Instructions	)		
	Date 02/28/2024	Full name of contributor Heroy, Ken Contributor address; City; St	out-of-state PAC (ID#:_		)		Amount of Contribution (\$)	\$500.00
		Dripping Springs, TX 7862	20					
		pation / Job title (See Instructions	5)		Employer (See Instructions			
	President				Jones-Heroy & Assoc Ir	ıc		
Date  O2/29/2024  Full name of contributor  O2/29/2024  Hildebrand, Jeffery  Contributor address; City; State; Zip Code  Houston, TX 77007					Amount of Contribution (\$)	\$2,500.00		
			Employer (See Instructions Hilcorp Energy	5)				
	Date Full name of contributor out-of-state PAC (ID#:)  03/02/2024 Hrbacek, Stephen  Contributor address; City; State; Zip Code  La Grange, TX 78945				Amount of Contribution (\$)	\$500.00		
	Principal occu SALES	pation / Job title (See Instructions	s)		Employer (See Instructions La Grange Portable	5)		

	MONET	ARY POLITICAL CO		SCHEDUL	E A1		
	The Instru	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 3/4 Rpt: 6/21	
2	FILER NAME Kitzman Jr.,	Oliver S. (The Honorable)			3	Filer ID (Ethics Commission 00058415	on Filers)
4	Date 04/15/2024	tte 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$500.00	
_		Bellville, TX 77418					
8	Principal occu CEO	pation / Job title (See Instructions)	9	Employer (See Instructions Austin County State Bar			
	Date 02/27/2024	Full name of contributor  Pape-Dawson Engineering    Contributor address; City; State				Amount of Contribution (\$)	\$2,500.00
	Principal occu	San Antonio, TX 78213 pation / Job title (See Instructions)		Employer (See Instructions	)		
		,					
	Date 02/26/2024	Full name of contributor  Roeder, Erich  Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code	)		Amount of Contribution (\$)	\$100.00
		Celina, TX 75009					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	)		
	Date Full name of contributor out-of-state PAC (ID#:)  O3/05/2024 Strange, Jon  Contributor address; City; State; Zip Code  Katy, TX 77494			Amount of Contribution (\$)	\$300.00		
			Employer (See Instructions JNS Engineer IIc	)			
Date Full name of contributor out-of-state PAC (ID#:)  06/26/2024 Texas Municpal Police Association PAC  Contributor address; City; State; Zip Code  Austin, TX 78752			Amount of Contribution (\$)	\$500.00			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this t	1	Total pages Schedule A1: Sch: 4/4 Rpt: 7/21		
	FILER NAME Kitzman Jr.,	Oliver S. (The Honorable)		3	Filer ID (Ethics Commission 00058415	on Filers)
	Date 04/15/2024	5 Full name of contributor	C00093054 )	7	Amount of Contribution (\$)	\$1,000.00
		Bentonville, AR 72716				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 02/28/2024	Full name of contributor out-of-state PAC (ID#:_Williams, W.D.  Contributor address; City; State; Zip Code	)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Purchasing	Pattison, TX 77423  upation / Job title (See Instructions)	Employer (See Instructions HDH Instruments	S)		

### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 8/21 3 Filer ID (Ethics Commission Filers) FILER NAME Kitzman Jr., Oliver S. (The Honorable) 00058415 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution Date out-of-state PAC (ID#: Amount of contribution (\$) description 03/13/2024 Associated Republicans of Texas \$42.54 Digital Ad 7 Contributor address; City; State; Zip Code Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Date Full name of contributor Amount of out-of-state PAC (ID#: contribution (\$) description 03/12/2024 Gregg Abbott Campaign \$365.79 i Travel Contributor address; City; State; Zip Code Austin, TX 78767 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Candidate/Officenoider/Politic	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/11 Rpt: 9/21	Kitzman Jr., Oliver S. (The Honorable) 00058415
4 Date	5 Payee name
02/29/2024	Benavidez, Matthew
6 Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code 1908 Kirby Rd
	El Campo, TX 77437
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  Campaign Staff
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/16/2024	Benavidez, Matthew
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 1908 Kirby Rd
	El Campo, TX 77437
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  Campaign Staff
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/19/2024	Blieberville VFD
Amount (\$) \$875.00	Payee address; City; State; Zip Code 3342 FM 2502
	Bleiblerville, TX 78931
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  Donation
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

Solicitation/Fundraising Expense

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/11 Rpt: 10/21 Kitzman Jr., Oliver S. (The Honorable) 00058415 4 Date Payee name 04/20/2024 Brookshire Masonic Lodge #1066 6 Amount (\$) Payee address; City; State; Zip Code \$500.00 819 Purdy St. Brookshire, TX 77423 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/26/2024 Cat Spring VFD Amount (\$) Payee address; City; State; Zip Code \$575.00 PO Box 38 Cat Spring, TX 78933 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/07/2024 Christ Lutheran Church Pattison Amount (\$) Payee address; City: State; Zip Code \$400.00 35912 Royal Rd. Pattison, TX 77466 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 3/11 Rpt: 11/21	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Kitzman Jr., Oliver S. (The Honorable) 00058415
4 Date	5 Payee name
04/03/2024	Farrell Gjesdal Strategy Group
6 Amount (\$) \$2,530.00	7 Payee address; City; State; Zip Code 4040 Hwy 6 Ste 200 College Station, TX 77845
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 T.  Check if Austin, TX, officeholder living expense  Campaign Consulting, Social Media Management
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date 04/03/2024	Payee name Farrell Gjesdal Strategy Group
Amount (\$) \$5,130.00	Payee address; City; State; Zip Code 4040 Hwy 6 Ste 200 College Station, TX 77845
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 T. Check if Austin, TX, officeholder living expense Campaign Consulting, Social Media Management
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date 05/06/2024	Payee name Farrell Gjesdal Strategy Group
Amount (\$) \$2,530.00	Payee address; City; State; Zip Code 4040 Hwy 6 Ste 200 College Station, TX 77845
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 T.  Check if Austin, TX, officeholder living expense  Campaign Consulting, Social Media Management
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/11 Rpt: 12/21	Kitzman Jr., Oliver S. (The Honorable) 00058415
4	Date	5 Payee name
	06/03/2024	Farrell Gjesdal Strategy Group
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,530.00	4040 Hwy 6
		Ste 200
		College Station, TX 77845
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense
		Campaign Consulting, Social Media Management
		Campaigh Consulting, Social Media Management
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/03/2024	Farrell Gjesdal Strategy Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,530.00	4040 Hwy 6
		Ste 200
		College Station, TX 77845
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign Consulting, Social Media Management
		Campaign Consulting, Social Media Management
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>-</del>
	Date	Payee name
	03/08/2024	Fayette County Record
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,367.50	127 S Washington St
		La Grange, TX 78945
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense  Ad
		Au
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense

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

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

The Instruction Guide explains how to complete this form.  L Total pages Schedule F1: Sch: 5/11 Rpt: 13/21  A Date O3/02/2024  Fayette County Sheriff's Memorial & Benevolent Society  7 Payee address; City; State; Zip Code 1646 N. Jefferson St.  La Grange, TX 78945  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Total pages Schedule F1: City: Code State: Zip Code Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation  Total pages Schedule F1: City: City: Code Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Check if Austin, TX, officeholder living expense Donation		ontributions/ Donations Made By Candidate/Officeholder/Politica redit Card Payment	
Sch: 5/11 Rpt: 13/21  I Date  5 Payee name Fayette County Sheriff's Memorial & Benevolent Society  7 Payee address: City; State; Zip Code  1646 N. Jefferson St.  La Grange, TX 78945  8 PURPOSE OF EXPENDITURE  (a) Category: (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Date Expenditure to benefit C/OH  Payee name Fayette County Sheriff's Memorial & Benevolent Society  Payee name Fayette County Sheriff's Memorial & Benevolent Society  Payee name Fayette County Sheriff's Memorial & Benevolent Society  Amount (s) Payee address: City; State; Zip Code  1646 N. Jefferson St.  La Grange, TX 78945  PURPOSE OF EXPENDITURE  (a) Category: (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  OF EXPENDITURE  (a) Category: (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Office sought  Office held  Payee name Fort Bend County Republican Party  Amount (s) Payee address: City; State; Zip Code  Candidate/Officeholder name  Office sought  Office held  Payee name Fort Bend County Republican Party  Purpose OF EXPENDITURE  (a) Category: (see Categories listed at the top of this schedule) Standard Payee address: City; State; Zip Code Contributions/Donations Made By Candidate/Officeholder/Political Committee  Office held  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete QNLY if direct Candidate/Officeholder/Political Committee  Complete QNLY if direct Candidate/Officeholder name Office sought Office held		bara r aymont	The Instruction Guide explains how to complete this form.
Date   Samount (\$)   5   Payee name   Fayette Country Sheriff's Memorial & Benevolent Society   5   Amount (\$)   5   Payee address; City; State; Zip Code   S490.00   1646 N. Jefferson St.	<b>1</b> Tot	tal pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Purpose   Complete ONLY if direct expenditure to benefit C/OH   Payee address; City; State; Zip Code   Contributions/Donations Made By Candidate/Officeholder/Political committee   Contributions/Donations Office held   Contributions/Donations Office held   Contributions/Donations Office held   Contributions/Donations Office held   Contributions/Dona		<u> </u>	
Total Payee address; City: State: Zip Code			The state of the s
S490.00   1646 N. Jefferson St.   La Grange, TX 78945   Contributions/Donations Made By Candidate/Officeholder/Political Committee   Contributions/Donations Made By Candidate/Officeholder/Political Committee   Contributions/Donations Made By Candidate/Officeholder name   Office sought   Office held	03/	/02/2024	Fayette County Sheriff's Memorial & Benevolent Society
La Grange, TX 78945   Cardinate   State   Cardinate	<b>6</b> Am	nount (\$)	7 Payee address; City; State; Zip Code
PURPOSE OF EXPENDITURE		\$490.00	1646 N. Jefferson St.
PURPOSE OF EXPENDITURE			
Contributions/Donations Made By Candidate/Officeholder/Political Committee    Candidate/Officeholder/Political Committee			La Grange, TX 78945
Contributions/Donations Made By Candidate/Officeholder/Political Committee	8		(a) Category (See Categories listed at the top of this schedule) (b) Description
Candidate/Officeholder/Political Committee  Donation  Office sought  Office held  Payee name Payete County Sheriff's Memorial & Benevolent Society  Amount (\$)  Payee address; City; State; Zip Code  1646 N. Jefferson St.  La Grange, TX 78945  Office held  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Candidate/Officeholder name Office sought  Office sought  Office held  Office held  Office held  Payee name Complete ONLY if direct expenditure to benefit C/OH  Date O4/09/2024  Payee name Payee name Fort Bend County Republican Party  Amount (\$)  Payee address; City; State; Zip Code  Office sought  Office held	F)		Contributions/Donations Made By
Date 03/02/2024			Carlaidate/Cinceriolaci/i Cinceriolaci/i Cinceriola
Date 03/02/2024 Payee name Fayette County Sheriff's Memorial & Benevolent Society  Amount (\$) Payee address; City; State; Zip Code 1646 N. Jefferson St.  La Grange, TX 78945  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Candidate/Officeholder/Political Committee  Complete ONLY if direct expenditure to benefit C/OH  Date 04/09/2024  Payee name Port Bend County Republican Party  Amount (\$) Payee address; City; State; Zip Code Port Bend County Republican Party  Amount (\$) Payee address; City; State; Zip Code P.O. Box 461  Sugar Land, TX 77487  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description (c) Description (b) Description (c) Check if Austin, TX, officeholder Texas. Complete Schedule T. Check if Austin, TX, officeholder Ilving expense Donation  Complete ONLY if direct Candidate/Officeholder/Political Committee  Complete ONLY if direct Candidate/Officeholder name Office sought Office held  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
Date 03/02/2024 Payee name Fayette County Sheriff's Memorial & Benevolent Society  Amount (\$) Payee address; City; State; Zip Code 1646 N. Jefferson St.  La Grange, TX 78945  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Candidate/Officeholder/Political Committee  Complete ONLY if direct expenditure to benefit C/OH  Date 04/09/2024  Payee name Port Bend County Republican Party  Amount (\$) Payee address; City; State; Zip Code Port Bend County Republican Party  Amount (\$) Payee address; City; State; Zip Code P.O. Box 461  Sugar Land, TX 77487  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description (c) Description (b) Description (c) Check if Austin, TX, officeholder Texas. Complete Schedule T. Check if Austin, TX, officeholder Ilving expense Donation  Complete ONLY if direct Candidate/Officeholder/Political Committee  Complete ONLY if direct Candidate/Officeholder name Office sought Office held  Complete ONLY if direct Candidate/Officeholder name Office sought Office held	• •		Our Highest (Office health an arrange of the country of the countr
Date 03/02/2024 Payete County Sheriff's Memorial & Benevolent Society  Amount (\$) Payee address; City; State; Zip Code 1646 N. Jefferson St.  La Grange, TX 78945  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Candidate/Officeholder/Political Committee  Complete ONLY if direct expenditure to benefit C/OH  Date 04/09/2024  Amount (\$) Payee name Fort Bend County Republican Party  Amount (\$) Payee address; City; State; Zip Code P.O. Box 461  Sugar Land, TX 77487  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder name  (b) Description Office held  Date OF EXPENDITURE  (b) Description Check if vavel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation  (b) Description Check if Austin, TX, officeholder living expense Donation  (c) Check if Austin, TX, officeholder living expense Donation  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct Candidate/Officeholder name  Office sought  Office held			
Amount (\$)			
Amount (\$)			·
\$500.00 1646 N. Jefferson St.  La Grange, TX 78945  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete QNLY if direct expenditure to benefit C/OH  Date ONLY if Death County Republican Party  Amount (\$) Payee address; City; State; Zip Code  \$1,000.00 \$P.O. Box 461  Sugar Land, TX 77487  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete QNLY if direct  Candidate/Officeholder/Political Committee  Complete QNLY if direct  Candidate/Officeholder name  Office sought  Office held  Office Sought  Office held  Office Sought  Office held  Office held  Complete QNLY if direct  Candidate/Officeholder name  Office sought  Office held  Office held	03/	/02/2024	Fayette County Sheriff's Memorial & Benevolent Society
La Grange, TX 78945	Am	nount (\$)	Payee address; City; State; Zip Code
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct expenditure to benefit C/OH  Date O4/09/2024  Payee name Fort Bend County Republican Party  Amount (\$) Payee address; City; State; Zip Code \$1,000.00  P.O. Box 461  Sugar Land, TX 77487  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct Candidate/Officeholder name Office sought  Ob Description  Check if vavel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if vavel o		\$500.00	1646 N. Jefferson St.
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct expenditure to benefit C/OH  Date O4/09/2024  Payee name Fort Bend County Republican Party  Amount (\$) Payee address; City; State; Zip Code \$1,000.00  P.O. Box 461  Sugar Land, TX 77487  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct Candidate/Officeholder name Office sought  Ob Description  Check if vavel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if vavel o			
Complete ONLY if direct expenditure to benefit C/OH  Date ONLY end of the sought of the schedule of the schedu			La Grange, TX 78945
Complete ONLY if direct expenditure to benefit C/OH  Date ONLY and date of Donation  Payee name Fort Bend County Republican Party  Amount (\$) Payee address; City; State; Zip Code \$1,000.00 P.O. Box 461  Sugar Land, TX 77487  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Candidate/Officeholder/Political Committee  Complete ONLY if direct Candidate/Officeholder name Office sought Office held  Complete ONLY if direct Candidate/Officeholder name Office sought Office held  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
Complete ONLY if direct expenditure to benefit C/OH  Date	E		Contributions/Donations Made by
Complete ONLY if direct expenditure to benefit C/OH  Date			Carlandato, Cinicon Ciacin, Cinical Committee
Date 04/09/2024 Payee name Fort Bend County Republican Party  Amount (\$) Payee address; City; State; Zip Code \$1,000.00 P.O. Box 461  Sugar Land, TX 77487  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
Date 04/09/2024 Payee name Fort Bend County Republican Party  Amount (\$) Payee address; City; State; Zip Code \$1,000.00 P.O. Box 461  Sugar Land, TX 77487  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct Candidate/Officeholder name Office sought Office held	Co	mplete ONLY if direct	Candidate/Officeholder name Office sought Office held
Amount (\$)  Payee address; City; State; Zip Code  \$1,000.00  P.O. Box 461  Sugar Land, TX 77487  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Candidate/Officeholder/Political Committee  Candidate/Officeholder name  Office sought  Candidate/Officeholder name  Office sought  Office held		•	<b>v</b>
Amount (\$)  Payee address; City; State; Zip Code  \$1,000.00  P.O. Box 461  Sugar Land, TX 77487  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Candidate/Officeholder/Political Committee  Candidate/Officeholder name  Office sought  Candidate/Officeholder name  Office sought  Office held	Dat	te	Payee name
Amount (\$) Payee address; City; State; Zip Code  \$1,000.00 P.O. Box 461  Sugar Land, TX 77487  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held			
\$1,000.00  P.O. Box 461  Sugar Land, TX 77487  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Candidate/Officeholder/Political Committee  Candidate/Officeholder name  Complete ONLY if direct  Sugar Land, TX 77487  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Donation  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held			
Sugar Land, TX 77487  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct  Candidate/Officeholder name  Candidate/Officeholder name  Office sought  Obscription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held	ı Am	( )	
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct  Candidate/Officeholder name  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense Donation  Office held		\$1,000.00	P.U. B0X 461
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct  Candidate/Officeholder name  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense Donation  Office held			
OF EXPENDITURE  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct  Candidate/Officeholder name  Complete ONLY if direct  Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held			Sugar Land, TX 77487
EXPENDITURE  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct  Complete ONLY if direct  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Complete ONLY if direct  Complete ONLY if direct  Complete ONLY if direct  Contributions/Donations Made By Candidate/Officeholder living expense  Donation  Complete ONLY if direct  Contributions/Donations Made By Candidate/Officeholder name  Complete ONLY if direct  Contributions/Donations  Contributions/Donations  Contributions/Donations/Donations  Contributions/Donations/Donations  Contributions/Donat			
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	E		Contributions Made by
Complete ONLY if direct Candidate/Officeholder name Office sought Office held			l —
			Donation
	Co	mnlete ONLV if direct	Candidate/Officeholder name Office sought Office held
			<b>y</b>

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 6/11 Rpt: 14/21	Kitzman Jr., Oliver S. (The Honorable) 00058415
4	Date	5 Payee name
	04/22/2024	Fort Bend County Republican Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,250.00	P.O. Box 461
		Sugar Land, TX 77487
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		2 Silvatori
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
_	Date	Davis same
	05/13/2024	Payee name Fort Bend County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P. O. Box 461
		Sugar Land, TX 77487
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.  Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Davisa nama
	04/04/2024	Payee name Gonzales, Nikki
	Amount (\$)	Payee address; City; State; Zip Code 3113 Aquila Ct
	\$1,010.91	3113 Aquila Ct
		Round Rock, TX 78681
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Event Supplies
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

## SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (output a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	ll Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/11 Rpt: 15/21	Kitzman Jr., Oliver S. (The Honorable) 00058415
4	Date	5 Payee name
	04/04/2024	Gonzales, Nikki
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	3113 Aquila Ct
		Round Rock, TX 78681
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign Staff
		Campaigh Clain
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
•	expenditure to benefit C/OI	
	Date	Payee name
	03/01/2024	Hempstead FFA
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	1440 13th Street
	, ,	
		Hempstead, TX 77445
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	-	Candidate/Officeholder/Political Committee
		Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/15/2024	Her Well
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	511 Velasco St.
		Brookshire, TX 77423
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

## SCHEDULE F1

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

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 8/11 Rpt: 16/21	Kitzman Jr., Oliver S. (The Honorable) 00058415	
4	Date	5 Payee name	
	03/03/2024	Hungerford Community Center	
6	Amount (\$) \$260.00	7 Payee address; City; State; Zip Code 235 Cypress St.  Hungerford, TX 77448	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if Austin, TX, officeholder living expense  Donation	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	03/27/2024	Kitzman, Stan	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3,000.00	PO Box 53	
		Pattison, TX 77466	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Loan Repayment/Expense Reimbursement	
		Loan Repaymond Expense Remisdreement	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	ī
	03/01/2024	Neumann and Company	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$14,416.05	5417 Pine St	
		Bellaire, TX 77401	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Mailer	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	

### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Total mariae Cabadula F1.	
_	Total pages Schedule F1: Sch: 9/11 Rpt: 17/21	2 FILER NAME Kitzman Jr., Oliver S. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00058415
4	Date	5 Payee name
	04/17/2024	Patton, Gavin
6	Amount (\$) \$65.41	7 Payee address; City; State; Zip Code 208 1/2 Ave A  El Campo, TX 77437
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Medical Reimbursement
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/17/2024	Patton, Gavin
	Amount (\$)	Payee address; City; State; Zip Code
	\$763.67	208 1/2 Ave A
		El Campo, TX 77437
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Medical Reimbursement
		Wedloal Relinburgement
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/29/2024	Royal FFA
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	PO Box 489
		Pattison, TX 77466
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	ZA ZIISII SIIZ	Candidate/Officeholder/Political Committee
_	Complete ONU V if allow :	Condidate Office halder name Office accepts
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Credit Card Payment	ai 00ii	The Instruction Guide explains how to co	Ŭ	ete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
l	Sch: 10/11 Rpt: 18/21		Kitzman Jr., Oliver S. (The Honorable)		00058415
4	Date	5	Payee name		<u>'</u>
l	03/09/2024		Royal NHS		
6	Amount (\$)	7	Payee address; City; State; Zip Co	ode	
	\$310.00		34499 Royal Rd.		
l					
l			Brookshire, TX 77423		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE		Contributions/Donations Made By		Check if travel outside of Texas. Complete Schedule T.
l			Candidate/Officeholder/Political Committee		Check if Austin, TX, officeholder living expense  Donation
					Donation
9	Complete ONLY if direct		Candidate/Officeholder name Office sou	l Jaht	Office held
	expenditure to benefit C/O			.g	Ccc
⊨	Date	Π	Payee name		
	03/08/2024		Sealy News		
┝	Amount (\$)		Payee address; City; State; Zip Co	ode	
	\$640.00		327 Fowlkes St		
l					
l			Sealy, TX 77474		
┝	PURPOSE	├	Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE		Advertising Expense	<u> </u>	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE		- '		Check if Austin, TX, officeholder living expense
l					Ad
⊢	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office sou	ıaht	Office held
	expenditure to benefit C/O		onice sol	igiit	Office field
⊨	Data	ı	Davis and a		
l	Date 04/20/2024		Payee name Texas Dept of Criminal Justice		
┝	Amount (\$)		Payee address; City; State; Zip Co	odo	
	\$1,766.64		209 W. 14th St.	Jue	
l	Ψ1,100.04		200 W. 1401 Gt.		
l			Austin, TX 78701		
⊢	PURPOSE	<del> </del>		(h)	Description
	OF	(")	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	(5)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Candidate/Officeholder/Political Committee		Check if Austin, TX, officeholder living expense
					3 Capitol Chairs donated in-kind to: El Campo Rotary Club (Boys & Girls Club)
				Ļ	
	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Officeholder name Office sou	ıght	Office held

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By
Conditional Officeholder/Politics

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
1	Sch: 11/11 Rpt: 19/21	Kitzman Jr., Oliver S. (The Honorable)  00058415		
4	Date	5 Payee name		
	04/20/2024	Texas Dept of Criminal Justice		
6	Amount (\$) \$441.66	7 Payee address; City; State; Zip Code 209 W. 14th St.  Austin, TX 78701		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Candidate/Officeholder/Political Committee    Check if Austin, TX, officeholder living expense     Capitol chair donated in-kind to:     La Grange COC		
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held		
	Date	Payee name		
	04/20/2024	Texas Dept of Criminal Justice		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$441.66	209 W. 14th St.		
		Austin, TX 78701		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense		
		1 Capitol Chair sold at Kitzman For Texas fundraising event		
		Tale man 1 of 10 Ado fandratoling over		
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH			
	Date	Payee name		
	04/20/2024	Wharton County Youth Fair		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$1,175.00	6036 FM 961		
		Wharton, TX 77488		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Candidate/Officeholder/Political Committee		
		Donation		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI			

### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 20/21 Kitzman Jr., Oliver S. (The Honorable) 00058415 Date Payee name 02/28/2024 Bellville Turnverien Pavillion Restor 6 Amount (\$) Payee address; State; Zip Code City; \$2,200.00 966 E Main St Reimbursement from political contributions intended Х Bellville, TX 77418 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE** Venue Rental & Deposit Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 21/21 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Kitzman Jr., Oliver S. (The Honorable) 00058415 8 Amount (\$) Date 5 Name of person from whom amount is received 03/06/2024 \$1,000.00 Bellville Turnverein Pavilion Restor 6 Address of person from whom amount is received; City; State; Zip Code Bellville, TX 77418 Purpose for which amount is received Check if political contribution returned to filer Refund of Event Deposit