CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comp	plete this form.	1 Filer ID (Ethics Comm 00088236		2 Total pages filed: 28
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
NAME	Ms.	Stacey R.			Date Received ELECTRONICALLY FILED
	NICKNAME	LAST Swann		SUFFIX	07/08/2024
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX; AP P.O. Box 1023	T / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked Receipt # Amount
ADDRESS	TV 70550				Amount
Change of Address	Lampasas, TX 76550				Date Processed
					Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Stacey R.		MI	
	NICKNAME	LAST Swann		SUFFIX	
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO P 1294 County Rd. 1205	O BOX PLEASE);	АР	T / SUITE #; CITY	; STATE; ZIP CODE
(Residence or Business)	Lampasas, TX 76550				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHO (512) 270-1265	ONE NUMBER E	EXTENSION		
8 REPORT TYPE	January 15 X July 15	30th day before 8th day before 6		Runoff Exceeded modified reporting limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year 01/01/2024		IROUGH	Month Day 06/30/202	Year 24
10 ELECTION	ELECTION DATE Month Day Year 11/05/2024		rimary eneral	ELECTION TYPE Runoff Special	Other
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT State Represen	Γ (if known) tative District 68
		GO T	O PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 28

13 C / OH NAME	14 Filer ID 00088236	(Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to d officeholders are required to report this information	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
Ш	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
	5)	\$ 4,595.00		
EXPENDITURE TOTALS		\$ 0.00		
	4. TOTAL POLITIC		\$ 3,356.69	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LASTRICT ${\sf CAST}$	AST DAY OF THE	\$ 3,612.44
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS ITING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		Ms. S	Stacey R. Swann	
		Signature of	Candidate or Officehol	lder
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of office	er administering	Printed name of officer administering	Title of office	r administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				CC	OVER SHE	ET PG 3 3 of 28
	ILER Swan		E acey R. (Ms.)	19 Filer ID 00088236	(Ethics Commi	ssion Filers)
20 S	CHE	DULE	SUBTOTALS			
١	IAME	OF S	SCHEDULE		SUBTOTA	AL AMOUNT
1	. [X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	4,595.00
2	. [\$		
3	. [\$			
4	. [SCHEDULE E: LOANS		\$	
5	. [X	\$	982.65		
6	. [\$			
7	. [SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8	. [X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	1,039.91
g	. [X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	1,334.13
1	.0.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
1	1.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
1	2.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/12 Rpt: 4/28		
2	FILER NAME Swann, Stac			3	Filer ID (Ethics Commission 00088236	n Filers)	
4	Date 04/25/2024	5 Full name of contributor out-of-state PAC (ID#:_Allen, Robin 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$50.00	
_		Brownwood, TX 76801	1				
8	Nurse	pation / Job title (See Instructions)	Employer (See Instructions VA)			
	Date 01/21/2024	Full name of contributor out-of-state PAC (ID#:_ Aubin, Jerry Contributor address; City; State; Zip Code Austin, TX 78749			Amount of Contribution (\$)	\$100.00	
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions BountyJobs)			
	Date 01/23/2024	Full name of contributor out-of-state PAC (ID#:_ Azim, Dalia Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00	
		Austin, TX 78723					
	Principal occu Writer	pation / Job title (See Instructions)	Employer (See Instructions Texas Book Festival)			
	Date 01/21/2024	Full name of contributor out-of-state PAC (ID#:_ Berwald, Juli Contributor address; City; State; Zip Code Austin, TX 78731			Amount of Contribution (\$)	\$100.00	
	Principal occu Writer	pation / Job title (See Instructions)	Employer (See Instructions Self)			
	Date 02/10/2024	Full name of contributor out-of-state PAC (ID#:_ Beshara, Angella Contributor address; City; State; Zip Code Austin, TX 78745			Amount of Contribution (\$)	\$25.00	
	Principal occu Learning Str	pation / Job title (See Instructions) ategist	Employer (See Instructions Apple)			

	MONEI	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULI	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/12 Rpt: 5/28	
2	FILER NAME Swann, Stac	ey R. (Ms.)			3	Filer ID (Ethics Commission 00088236	r Filers)
4	Date 03/10/2024	5 Full name of contributor Beshara, Angella6 Contributor address; City; St	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$25.00
8	Principal occu Learning Str	Austin, TX 78745 pation / Job title (See Instructions ategist)	9 Employer (See Instruction: Apple] s)		
	Date 04/10/2024	Full name of contributor Beshara, Angella Contributor address; City; Si Austin, TX 78745	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occupation / Job title (See Instructions)		Employer (See Instruction:	<u> </u> s)			
	Date 05/10/2024	Full name of contributor Beshara, Angella Contributor address; City; Si	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Austin, TX 78745 pation / Job title (See Instructions)	Employer (See Instruction	s)		
	Learning Str		,	Apple			
06/10/2024 Bes Cor		Full name of contributor Beshara, Angella Contributor address; City; Si Austin, TX 78745	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu Learning Str	pation / Job title (See Instructions ategist)	Employer (See Instruction: Apple	<u>I</u> S)		
	Date 01/21/2024	Full name of contributor Bird, Sarah Contributor address; City; St	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00
	Principal occu Writer	pation / Job title (See Instructions)	Employer (See Instruction: Self	s)		

	MONET	ARY POLITICAL C	CONTRIBUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 3/12 Rpt: 6/28	
2	FILER NAME Swann, Stac	ey R. (Ms.)			3	Filer ID (Ethics Commission 00088236	n Filers)
4	Date 03/29/2024	5 Full name of contributorBrill, Larry6 Contributor address; City; St.	out-of-state PAC (ID#: ate; Zip Code		7	Amount of Contribution (\$)	\$100.00
8	Principal occur	Austin, TX 78750 pation / Job title (See Instructions	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Employer (See Instructions	<u>''</u>		
0	Not Employe		,	Not Employed	>)		
	Date 06/24/2024	Full name of contributor Brock, David Contributor address; City; St			•	Amount of Contribution (\$)	\$50.00
	Dringinal occur	Dublin, TX 76446 pation / Job title (See Instructions	, I	Employer (See Instructions	-/- 		
	Not Employe		,	Not Employed	o)		
	Date 01/21/2024	Full name of contributor Castellano, Lorrie Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Palo Alto, CA 94301					
	Principal occu Psychothera	pation / Job title (See Instructions pist)	Employer (See Instructions Ms.	5)		
	Date Full name of contributor out-of-state PAC (ID#: 01/21/2024 Cohagan, Carolyn		out-of-state PAC (ID#:ate; Zip Code)	•	Amount of Contribution (\$)	\$250.00
	Principal occu Writer	pation / Job title (See Instructions)	Employer (See Instructions Self	5)		
	Date 01/21/2024	Full name of contributor Condie, Daemon Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	5)		
	, .						

	MONET	ARY POLITICAL C	ONTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how t	to complete this for	n.	1	Total pages Schedule A1: Sch: 4/12 Rpt: 7/28	
2	FILER NAME Swann, Stac	ey R. (Ms.)			3	Filer ID (Ethics Commission 00088236	n Filers)
4	Date 01/21/2024	Full name of contributor Deborah, Unferth Contributor address; City; State	out-of-state PAC (ID#: te; Zip Code)	7	Amount of Contribution (\$)	\$50.00
		Austin, TX 78703	ļ				
8	Principal occu Professor	pation / Job title (See Instructions)	9	Employer (See Instructions UT Austin	s)		
	Date 01/23/2024	Full name of contributor [Faraone, Amanda Contributor address; City; Stat)		Amount of Contribution (\$)	\$25.00
	Principal occu	Austin, TX 78723 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Associate Publisher			American Short Fiction	,		
	Date 01/20/2024	Full name of contributor Filipelli, Laurie Contributor address; City; Stat	out-of-state PAC (ID#: te; Zip Code)	•	Amount of Contribution (\$)	\$100.00
		Austin, TX 78745					
	Principal occu College Cou	pation / Job title (See Instructions) nselor		Employer (See Instructions Self	s)		
	Date Full name of contributor out-of-state 02/08/2024 Fitzgerald, Lance		out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu Publishing	pation / Job title (See Instructions)		Employer (See Instructions PRH	5)		
	Date 01/21/2024	Full name of contributor Geist, Sasha Contributor address; City; Stat Long Island City, NY 11101)	•	Amount of Contribution (\$)	\$5.00
	Principal occu Educator	pation / Job title (See Instructions)		Employer (See Instructions Benchmark Education	5)		

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 5/12 Rpt: 8/28	
2	FILER NAME Swann, Stac	ey R. (Ms.)			3	Filer ID (Ethics Commission 00088236	n Filers)
4	Date 02/18/2024	5 Full name of contributorGriffith, Vive6 Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)	7	Amount of Contribution (\$)	\$100.00
_	5	Austin, TX 78741	T _a	5 1 (0 1 1 1	<u></u>		
8	Educator	pation / Job title (See Instructions)	9	Employer (See Instructions Clemente Course in the		ımanities	
	Date 01/21/2024	Full name of contributor Harad, Alyssa Contributor address; City; Sta)		Amount of Contribution (\$)	\$100.00
	Principal occu	Austin, TX 78722 pation / Job title (See Instructions)		Employer (See Instructions	 ;)		
	Writer	,		Self	,		
	Date 01/12/2024	Full name of contributor Haram, Michele Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)		Amount of Contribution (\$)	\$100.00
		Austin, TX 78749					
	Principal occu Sales	pation / Job title (See Instructions)		Employer (See Instructions Cypress Grove Cheese	5)		
	Date 06/08/2024	Full name of contributor Haram, Michele Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)		
	Date 01/21/2024	Full name of contributor Hugg, Hillery Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		

	MONET	ARY POLITICAL C	ONTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how t	to complete this for	n.	1	Total pages Schedule A1: Sch: 6/12 Rpt: 9/28	
2	FILER NAME Swann, Stac	ey R. (Ms.)			3	Filer ID (Ethics Commission 00088236	n Filers)
4	Date 01/22/2024	5 Full name of contributor [Hunter, Allison6 Contributor address; City; Stat	out-of-state PAC (ID#: te; Zip Code		7	Amount of Contribution (\$)	\$100.00
0	Dringing aggr	Austin, TX 78751	lo.	Employer (See Instructions	_		
0	Literary Age	pation / Job title (See Instructions) nt	9	Employer (See Instructions Janklow & Nesbit)		
	Date 01/21/2024	Full name of contributor Jones, George Contributor address; City; Stat				Amount of Contribution (\$)	\$50.00
	Dringing aggr	Austin, TX 78731	1	Employer (See Instructions	_		
	Not Employe	pation / Job title (See Instructions) ed		Not Employed	')		
	Date 06/08/2024	Full name of contributor Jontow, Erin Contributor address; City; Stat	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$25.00
		Venice, CA 90291					
	Principal occu TV Exec	pation / Job title (See Instructions)		Employer (See Instructions John Wells Productions	()		
	Date 01/30/2024	Full name of contributor Kallmerten, Taeler Contributor address; City; Stat Austin, TX 78702	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$20.00
	Principal occu Events Direc	pation / Job title (See Instructions)		Employer (See Instructions First Light Books)		
	Date 01/25/2024	Full name of contributor Katzman, Judith Contributor address; City; Stat Austin, TX 78723	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
			<u>, </u>				

	MONET	ARY POLITICAL CONTRIBUTI	O۱	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 7/12 Rpt: 10/28	
2	FILER NAME Swann, Stac	ey R. (Ms.)			3	Filer ID (Ethics Commission 00088236	n Filers)
4	Date 06/22/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$40.00
_	<u> </u>	Austin, TX 78739		5 1 (0 1 1 1			
8	Editor	pation / Job title (See Instructions)	9	Employer (See Instructions Self	5)		
	Date 01/15/2024	Full name of contributor out-of-state PAC (ID# Lineberger, Ernest Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	Carollton, TX 75007 pation / Job title (See Instructions)		Employer (See Instructions	رد 		
	Capacity Planning			Texas Instruments	,,		
	Date 03/11/2024	Full name of contributor out-of-state PAC (ID#:) Liu, Yvonne Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
		Rancho Palos Verdes, CA 90275					
	Principal occu Writer	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 01/21/2024	Full name of contributor out-of-state PAC (ID# Lowry, Mary Contributor address; City; State; Zip Code Austin, TX 78751)		Amount of Contribution (\$)	\$25.00
	Principal occu Writer	pation / Job title (See Instructions)		Employer (See Instructions Simon & Shuster	5)		
	Date 01/31/2024	Full name of contributor out-of-state PAC (ID# Luo, Susan Contributor address; City; State; Zip Code New York, NY 10023)		Amount of Contribution (\$)	\$50.00
	Principal occu Writer	pation / Job title (See Instructions)		Employer (See Instructions Self	s)		
			•				

	MONET	ARY POLITICAL (CONTRIBUTIO	Ν	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 8/12 Rpt: 11/28	
2	FILER NAME Swann, Stac	ey R. (Ms.)				3	Filer ID (Ethics Commission 00088236	n Filers)
4	Date 02/08/2024	5 Full name of contributor Maddie, Stough6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$50.00
_	5	Dublin, OH 43016	` I	_	5 1 (0 1 1 1	<u></u>		
8	HR Director	pation / Job title (See Instructions	;) 	9	Employer (See Instructions Eagan Immigration	5)		
	Date 02/12/2024	Full name of contributor McDowell, Jessica Contributor address; City; Si)		Amount of Contribution (\$)	\$30.00
	Dringing age	Graham, TX 76450	. I		Employer (See Instructions	<u></u>		
	Principal occu Pet Care Sei	pation / Job title (See Instructions rvice	5)		Employer (See Instructions Self	5)		
	Date 04/23/2024	Full name of contributor McDowell, Jessica Contributor address; City; Si	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$25.00
		Graham, TX 76450						
	Principal occu Pet Care Sei	pation / Job title (See Instructions rvice	i) 		Employer (See Instructions Self	5)		
	Date 01/13/2024	Full name of contributor McPhee, Carolyn Contributor address; City; St Chicago, IL 60605)		Amount of Contribution (\$)	\$100.00
	Principal occu Director	pation / Job title (See Instructions	5)		Employer (See Instructions AbbVie	5)		
	Date 02/02/2024	Full name of contributor Meyers, Jill Contributor address; City; Si Austin, TX 78723	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$200.00
	Principal occu Editor	pation / Job title (See Instructions	s)		Employer (See Instructions A Strange Object	s)		

	MONET	ARY POLITICAL CONTR	IBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to compl	ete this forr	m.	1	Total pages Schedule A1: Sch: 9/12 Rpt: 12/28	
2	FILER NAME Swann, Stac	ey R. (Ms.)			3	Filer ID (Ethics Commission 00088236	n Filers)
4	Date 01/21/2024	 Full name of contributor out-of-star out-o)	7	Amount of Contribution (\$)	\$100.00
8	Principal occur	Austin, TX 78704 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
Ü	Not Employe			Not Employed	',		
	Date 06/22/2024	Muszynski, Stacy)		Amount of Contribution (\$)	\$100.00
		Austin, TX 78758			_		
	Principal occupation / Job title (See Instructions) Writer-Editor			Employer (See Instructions Cognizant	5)		
	Date 01/22/2024	Full name of contributor out-of-sta ODonnell, Heather Contributor address; City; State; Zip Code	te PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Austin, TX 78723					
	Principal occu Tech	pation / Job title (See Instructions)		Employer (See Instructions Indeed	5)		
	Date 06/22/2024	Oertel, Lauren				Amount of Contribution (\$)	\$25.00
	Principal occu Organizer	pation / Job title (See Instructions)		Employer (See Instructions Indivisible	5)		
	Date 06/23/2024	Overton, David	te PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Partner	pation / Job title (See Instructions)		Employer (See Instructions Opus Faveo Innovation		velopment	
			1			· · · · · · · · · · · · · · · · · · ·	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/12 Rpt: 13/28	
2	FILER NAME Swann, Stac			3	Filer ID (Ethics Commission 00088236	n Filers)
4	Date 01/21/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$25.00
_		Austin, TX 78752				
8	Principal occu Professor	ipation / Job title (See Instructions)	9 Employer (See Instructions UT Austin)		
	Date 01/22/2024	Perri, Shannon Contributor address; City; State; Zip Code Austin, TX 78745			Amount of Contribution (\$)	\$100.00
	Drincinal occu		Employer (See Instructions			
	Marketing Chris Perri Law					
	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Austin, TX 78705				
	Principal occu Editor	pation / Job title (See Instructions)	Employer (See Instructions American Short Fiction)		
	Date 01/21/2024	Full name of contributor out-of-state PAC (ID#:_ Resjek, Charley Contributor address; City; State; Zip Code Austin, TX 78705			Amount of Contribution (\$)	\$250.00
	Principal occu Retail Manag	pation / Job title (See Instructions) gement	Employer (See Instructions Barnes and Noble)		
	Date 01/21/2024	Full name of contributor out-of-state PAC (ID#:_Sailer, Cecily Contributor address; City; State; Zip Code Austin, TX 78745			Amount of Contribution (\$)	\$55.00
	Principal occu Creativity Co	pation / Job title (See Instructions)	Employer (See Instructions self-employed)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/12 Rpt: 14/28	
2	FILER NAME Swann, Stac			3	Filer ID (Ethics Commission 00088236	n Filers)
4	Date 01/21/2024	 Full name of contributor out-of-state PAC (ID#:_Smith, Rose Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$100.00
_		Austin, TX 78704	la = 1 (0 1 1 1)			
8	Principal occu writer	pation / Job title (See Instructions)	9 Employer (See Instructions self	i) 		
	Date Full name of contributor out-of-state PAC (ID#:) O6/29/2024 Stowe, Judith Contributor address; City; State; Zip Code Tioga, TX 76271				Amount of Contribution (\$)	\$25.00
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Tioga, TX 76271				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	<u> </u>		
	Date 01/03/2024	Full name of contributor out-of-state PAC (ID#:_ Swann, Stacey Contributor address; City; State; Zip Code Lampasas, TX 76550			Amount of Contribution (\$)	\$500.00
	Principal occu Writer and E	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 05/28/2024	Full name of contributor out-of-state PAC (ID#:_ Tucker, Terry Contributor address; City; State; Zip Code Lampasas, TX 76550			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	ipation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	<u> </u>		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 12/12 Rpt: 15/28
2	FILER NAME Swann, Stac			3 Filer ID (Ethics Commission Filers) 00088236
4	Date 02/08/2024	5 Full name of contributor out-of-state PAC (ID#:_ Vormelker, Eric 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$35.00
8	Dringing aggr	Austin, TX 78752 upation / Job title (See Instructions)	9 Employer (See Instructions	
•	Technical Co		Texas Heath and Huma	
	Date 02/08/2024	Full name of contributor out-of-state PAC (ID#:_ Weisenberg, Marit Contributor address; City; State; Zip Code Austin, TX 78704)	Amount of Contribution (\$) \$100.00
	Principal occu Writer	rincipal occupation / Job title (See Instructions) Employer (See Instructions) Self)
	Date 03/02/2024	Full name of contributor out-of-state PAC (ID#:_ West, Sasha Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$100.00
		Austin, TX 78723		
	Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions St. Edward's University)
	Date 01/22/2024	Full name of contributor out-of-state PAC (ID#:_Zopp, Frances G Contributor address; City; State; Zip Code Austin, TX 78757)	Amount of Contribution (\$) \$25.00
	Principal occu Fitness Coa	pation / Job title (See Instructions)	Employer (See Instructions Self)

SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/7 Rpt: 16/28	Swann, Stacey R. (Ms.) 00088236
4	Date	5 Payee name
	01/14/2024	Act Blue
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$7.90	ActBlue Technical Services 366 Summer Street
		Somerville, MA 02114
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Act Blue Service Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	01/21/2024	Act Blue
	Amount (\$) \$65.03	Payee address; City; State; Zip Code ActBlue Technical Services 366 Summer Street
	QU.CUQ	Actblue Technical Services 300 Summer Street
		Somerville, MA 02114
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Act Blue Service Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	02/11/2024	Act Blue
	Amount (\$)	Payee address; City; State; Zip Code
	\$11.28	ActBlue Technical Services 366 Summer Street
		Somerville, MA 02114
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Act Blue Service Fee
		, 181 2 183 33 1183 1 33
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to comp	iplete tl	his form.	
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
	Sch: 2/7 Rpt: 17/28	Swann, Stacey R. (Ms.)		00088236	
4	Date	5 Payee name		·	
	02/18/2024	Act Blue			
6	Amount (\$)	7 Payee address; City; State; Zip Code	le		
	\$5.14	ActBlue Technical Services 366 Summer Street			
		Somerville, MA 02114			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)		escription	
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
				t Blue Service Fee	
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held	_
	expenditure to benefit C/OI	1			
Т	Date	Payee name			=
	03/03/2024	Act Blue			
	Amount (\$)	Payee address; City; State; Zip Code	le		_
	\$5.93	ActBlue Technical Services 366 Summer Street			
		Somerville, MA 02114			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De:	escription	_
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.	
	ZAI ZAISTONZ			Check if Austin, TX, officeholder living expense	
			AC	t blue Service Fee	
H	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held	_
	expenditure to benefit C/OI				
-	Date	Payee name			=
	03/10/2024	Act Blue			
	Amount (\$)	Payee address; City; State; Zip Code	le		_
	\$0.99	ActBlue Technical Services 366 Summer Street			
		Somerville, MA 02114			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) De:	escription	_
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITORE			Check if Austin, TX, officeholder living expense	
			AC	t Blue Service Fee	
_	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held	_
	expenditure to benefit C/OI	•		Office field	
					_

SCHEDULE F1

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gilt/Awards/Memorials Expense Legal Services The Instruction Guide explains	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	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 3/7 Rpt: 18/28		Swann, Stacey R. (Ms.)				00088236
4	Date	5	Payee name			<u> </u>	
	01/28/2024		Act Blue				
6	Amount (\$)	7	Payee address; City; State	e; Zip Cod	e		
	\$24.31		ActBlue Technical Services 366 Sumr Somerville, MA 02114				
8	PURPOSE OF EXPENDITURE	ı	Category (See Categories listed at the top of this sci	hedule) (=	, TX,	de of Texas. Complete Schedule T. officeholder living expense Pee
9	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Office soug	ht		Office held
	Date		Payee name				
	02/04/2024		Act Blue				
	Amount (\$)		Payee address; City; State	; Zip Cod	е		
	\$10.67		ActBlue Technical Services 366 Sumr Somerville, MA 02114	mer Street			
	PURPOSE OF EXPENDITURE	ı	Category (See Categories listed at the top of this sci Fees	hedule) (<u> </u>	, TX,	de of Texas. Complete Schedule T. officeholder living expense Pee
	Complete ONLY if direct expenditure to benefit C/Oh		andidate/Officeholder name	Office soug	ht		Office held
	Date 06/30/2024	ı	Payee name Act Blue				
	Amount (\$) \$1.98		Payee address; City; State ActBlue Technical Services 366 Sumr Somerville, MA 02114	e; Zip Cod ner Street			
	PURPOSE	├		17	h) Description		
	OF EXPENDITURE		Category (See Categories listed at the top of this sci	hedule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense
	Complete ONLY if direct expenditure to benefit C/Oh		andidate/Officeholder name	Office soug	ht		Office held
	rms provided by Tayas F	thic	e Commission www.othics	ototo tv			Version V// 1.0 d278aha0

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/7 Rpt: 19/28	Swann, Stacey R. (Ms.) 00088236
4	Date	5 Payee name
	06/23/2024	Act Blue
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3.95	ActBlue Technical Services 366 Summer Street
		Somerville, MA 02114
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Act Blue Service Fee
		, lot Blue Galvida i Ga
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
<u> </u>	<u> </u>	
	Date	Payee name
	06/16/2024	Act Blue
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.99	ActBlue Technical Services 366 Summer Street
		Somerville, MA 02114
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Act Blue Service Fee
		Act Blue Service Lee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/09/2024	Act Blue
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.88	ActBlue Technical Services 366 Summer Street
		Somerville, MA 02114
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Act Blue Service Fee
_	Occupation ONE VIII	On didn't 10 ff a balden name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Onanara to bonom O/OI	

SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/7 Rpt: 20/28	Swann, Stacey R. (Ms.) 00088236
4	Date	5 Payee name
	06/02/2024	Act Blue
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$0.99	ActBlue Technical Services 366 Summer Street
		Somerville, MA 02114
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Act Blue Service Fee
		, lot Blue Galvida i Ga
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	_	
	Date	Payee name
	05/12/2024	Act Blue
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.99	ActBlue Technical Services 366 Summer Street
		Somerville, MA 02114
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Act Blue Service Fee
		Act blue Service Lee
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/28/2024	Act Blue
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.97	ActBlue Technical Services 366 Summer Street
		Somerville, MA 02114
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Act Blue Service Fee
	Complete ONII V if allows:	Condidate/Officeholder name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense 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		mmittee L	Gift/Awards/Memorials E Legal Services The Instruction Guid	·		ages	/Contract Labor		Travel Out of Di OTHER (enter a	istrict a category not listed abo	ove)
1	Total pages Schodule F1:	2			•		-		3	Filer ID	(Ethics Commissi	on Eilere\
	Total pages Schedule F1:	 		ov D. (Ma.)					J		(Eurica Commissi	011111013)
	Sch: 6/7 Rpt: 21/28	L	Swann, Stac	ey K. (MS.)						00088236		
4	Date	5	Payee name									
	04/14/2024		Act Blue									
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Cod	de					
	\$0.99			nnical Services 3								
	Ψ0.00		, lotBido i doi	milioai Goi Vidoo C	oo cammo	01.001						
			Somerville, N	ИА 02114 								
8	PURPOSE	(a)	Category (See	e Categories listed at the	top of this schedu	ule) ((b)	Description				
	OF EXPENDITURE		Fees					므			nplete Schedule T.	
								Check if Austin,			g expense	
								Act Blue Servi	ıce	ree		
9	Complete ONLY if direct		Candidate/Offic	eholder name	Offi	ice soug	ht			Office h	eld	
L	expenditure to benefit C/OI	Н										
	Date		Payee name									
	03/31/2024		Act Blue									
	Amount (\$)	\vdash	Payee addres	s; City;	State; 2	Zip Cod	de.					
	\$3.95		•	nnical Services 3	•	•						
	Ψ3.93		ACIDIUE TECI	illical Services c	Joo Sullille	Jucci						
			Somerville, N	ИА 02114								
	PURPOSE	(a)	Category (See	e Categories listed at the	top of this schedu	ule) ((b)	Description				
	OF EXPENDITURE		Fees					Check if travel or	utsi	de of Texas. Con	nplete Schedule T.	
	LXI LINDITORL							Check if Austin,			g expense	
								Act Blue Servi	ice	Fee		
	Complete ONLY if direct		Candidate/Offic	eholder name	Offi	ice soug	ht			Office h	eld	
L	expenditure to benefit C/OI											
	Date		Payee name									
	03/17/2024		Act Blue									
\vdash	Amount (\$)	\vdash	Payee addres	s; City;	State; 2	Zin Cod	le					
	\$3.95		-	nnical Services 3								
	Ф3.95		ACIDIUE TECI	iiiicai Services s	Julillier Ood	Jueel						
L		L	Somerville, N	ИА 02114 ———————————————————————————————————			_					
	PURPOSE	(a)	Category (See	Categories listed at the	top of this schedu	ule) ((b)	Description				
	OF EXPENDITURE		Fees					ш			nplete Schedule T.	
	LAI LIBITOIL							Check if Austin,			g expense	
								Act Blue Servi	ıce	Fee		
	Complete ONLY if direct		Candidate/Offic	eholder name	Offi	ice soug	ht			Office h	eld	
L	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 C

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee I	Legal Services The Instruction Cui	Salaries ide explains how to	s/Wage	es/Contract Labor		OTHER (enter	a category not listed above)	
		_		The instruction Gui	ue explains now to t	comp	iete tilis ioiili.	_			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 7/7 Rpt: 22/28		Swann, Stac	ey R. (Ms.)					00088236		
4	Date	5	Payee name								
	06/24/2024		Harland Clar	rke Checks							
6	Amount (\$)	7	Payee addres	s; City;	State; Zip (Code					
	\$170.76		15955 La Ca	antera Parkway							
			San Antonio	, TX 78256							
8	PURPOSE	(a)		e Categories listed at the	a tan of this schodule)	(b)) Description				
	OF	``	Accounting/E		e top of trils scriedule)	(*)		outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		Accounting/	Janking					officeholder livin		
							Physical Che	cks	for Campa	aign Account	
9	Complete ONLY if direct		Candidate/Offic	eholder name	Office so	ought	t		Office h	eld	
	expenditure to benefit C/O	Н									
	Date		Payee name								
	02/26/2024		Texas Demo	ocratic Party							
	Amount (\$)		Payee addres	s; City;	State; Zip (Code					
	\$650.00		PO Box 157	07							
			Austin, TX 7	8761							
	PURPOSE	(a)		e Categories listed at the	e ton of this schedule)	(b)) Description				
	OF	 `´	Fees	e Calegories listed at the	e top of this schedule)	1`		outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		. 000				Check if Austin	, TX,	officeholder livin	g expense	
							VAN Voter Ro	olls	for District	68 for Campaign	
	Complete ONLY if direct		Candidate/Offic	eholder name	Office so	ought	t		Office h	eld	
	expenditure to benefit C/O	Н									
ı											

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

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

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)							
Sch: 1/3 Rpt: 23/28	Swann, Stacey R. (Ms.)		00088236							
4 CREDIT CARD ISSUER		ncial institution clays	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDITORY	\$							
6 PAYMENT	(a) Amount Charged \$34.48	(b) Date of Charge 01/27/2024	(c) Date(s) Credit Card Issue 06/21/2024	er Paid							
7 PAYEE	(a) Payee name Amazon		(b) Payee address; City, State, Zip Code 410 Terry Ave N								
	(a) Oatawari		Seattle, WA 98109								
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Supplies	of this schedule)	(b) Description Office Supplies								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	C, officeholder living expense							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
PAYMENT	(a) Amount Charged \$125.35	(b) Date of Charge 01/10/2024	(c) Date(s) Credit Card Issue 01/26/2024	er Paid							
PAYEE	PAYEE (a) Payee name Hotels.com			City, State, Zip Code e 500							
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	Dallas, TX 75240 (b) Description Payment for hotel in Gair BBQ and meeting	City, State, Zip Code 00 ville, TX for Democratic Club ceholder living expense Office held							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense								
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
PAYMENT	(a) Amount Charged \$95.18	(b) Date of Charge 01/22/2024	(c) Date(s) Credit Card Issue	er Paid							
PAYEE	(a) Payee name Zippity Print		(b) Payee address; 1060 W Bagley Rd #102 Berea, OH 44017	City, State, Zip Code							
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense			(b) Description Rack Cards								
Non-Political Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T. name Office	Check if Austin, TX e sought	C, officeholder living expense Office held							

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

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

		The Inst	ruction Guide explains how	to complete	this form.	(,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
	Sch: 2/3 Rpt: 24/28	Swann, Stacey R. (Ms.)			00088236		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$40.00	(b) Date of Charge 01/26/2024	(c) Date(s) 02/21/20) Credit Card Issuer 24	Paid		
7	PAYEE	(a) Payee name Zippity Print			Bagley Rd #102	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	Berea, O (b) Descrip Added fa		orior order		
	Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX				officeholder living exp	ense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$72.00	(b) Date of Charge 01/29/2024	(c) Date(s) 06/21/20) Credit Card Issuer 24	Paid		
	PAYEE	(a) Payee name Squarespace			address; ICH ST	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	New Yor (b) Descrip Website				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$182.98	(b) Date of Charge 02/12/2024	(c) Date(s) 02/21/20) Credit Card Issuer 24	· Paid		
	PAYEE	(a) Payee name Zippity Print		(b) Payee 1060 W I Berea, O	Bagley Rd #102	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Descrip Business	otion Cards and Bann	ers		
	Non-Political	` 1	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
ı								

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Candidate/Officeholder/Politica		ices Sal ruction Guide explains how		THER (enter a category not listed ab	ove)		
1 Total pages Schedule F4:		dotton Guide explains non	to complete this formi	3 Filer ID (Ethics Commiss	ion Eilers)		
Sch: 3/3 Rpt: 25/28	Swann, Stacey R. (Mc)		00088236			
			E TOTAL OF UNITERALIZED	00066230			
4 CREDIT CARD ISSUER		ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES	\$			
.555	see pr	revious	CHARGED TO A CREDIT				
0 00000000	() 4	(1) 5 : (0)	CARD	<u> </u>			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuel 02/21/2024	r Pala			
	\$20.56	02/15/2024	02/21/2024				
7 DAVEE	() =						
7 PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code		
	Amazon		410 Terry Ave N				
			Coottle MA 00100				
8 PURPOSE OF	(a) Category		Seattle, WA 98109 (b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Travel Box for carrying advertising				
X Political	Office Supplies		Trate: 20% for earrying and				
Non-Political	(2) D 01 - 171 - 1 - 111	(T. 0. 1. 0. 1. T.		"			
9 Complete ONLY if direct	(c) Check if travel outside of Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	officeholder living expense Office held			
expenditure to benefit C/OH	Garialadio, Ginocrioladi	That To The Time To Ti	o oodgiit	Omoc noid			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$469.36	05/12/2024	06/26/2024				
	Ψ403.30	03/12/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code		
				vd #100			
	Super Cheap Signs	i					
			Austin, TX 78758				
PURPOSE OF	(a) Category	of this cohodule)	(b) Description				
l <u> </u>	(See Categories listed at the top of this schedule) Advertising Expense			Yard Signs			
X Political	,						
Non-Political	`	of Texas. Complete Schedule T.		officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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		mmittee	Gift/Awards/Memo Legal Services The Instructio	orials Expense				Travel in District Travel Out of District OTHER (enter a category not listed above	ve)
1	Total pages Schedule G:	dule G: 2 FILER NAME			3			3	Filer ID (Ethics Commission	Filers)
	Sch: 1/3 Rpt: 26/28		Swann, Stacey R. (Ms.)					00088236		
4	Date	5 Payee name								
	01/26/2024		Barclays Je	t Blue Maste	rcard					
6	Amount (\$)	7	7 Payee address; City; State; Zip Code							
	\$125.35		P.O. Box 8801							
	Reimbursement from political contributions intended	Wilmington, DE 19899-8801								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)			(b) Description	=	neck if travel outside of Texas. Complete			
	EXPENDITURE	OF Credit Card Payment			L L		neck if Austin, TX, officeholder living expe			
		Hotel in Gair				Hotel in Gainesvi	nesville, visiting Gainesville Democratic Club			
9	Complete ONLY if direct	Car	ndidate/Office	holder name			Office sought		Office held	
	expenditure to benefit C/OH	Jai	Candidate/Officeholder name Office sought Office held							
	Date		Payee name							
	06/26/2024	Barclays Jet Blue Mastercard								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$95.18		P.O. Box 88	301						
	X Reimbursement from political contributions intended		Wilmington	, DE 19899-8	8801					
	PURPOSE		Category (s	ee Categories liste	d at the top of this sch	nedule)	Description	=	neck if travel outside of Texas. Complete	
OF EXPENDITURE Credit		Credit Card	Payment			Latinate St	_	neck if Austin, TX, officeholder living expe	nse	
							Zippity Print card	1S		
Complete ONLY if direct Candidate/Officeholder name					Office sought		Office held			
	expenditure to benefit C/OH									
F	Date		Payee name							
	05/28/2024		•	t Blue Maste	rcard					
H	Amount (\$)									
	\$469.36									
	Reimbursement from political contributions intended		Wilmington	, DE 19899-8	3801					
	PURPOSE Category (See Categories listed at the top of this sche		nedule)	Description	_	neck if travel outside of Texas. Complete				
	OF Credit Card Payment				_	neck if Austin, TX, officeholder living expe	nse			
							Yard Signs from	SUI	PER CHEAP SIGNS	
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Office	holder name			Office sought		Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District 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 G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/3 Rpt: 27/28 Swann, Stacey R. (Ms.) 00088236 Date Payee name 02/21/2024 Barclays Jet Blue Mastercard Amount (\$) Payee address; City; State; Zip Code \$40.00 P.O. Box 8801 Reimbursement from political contributions Х intended Wilmington, DE 19899-8801 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE Zippity Print Cards** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/21/2024 Barclays Jet Blue Mastercard Amount (\$) Payee address; City; State; Zip Code \$34.48 P.O. Box 8801 Reimbursement from political contributions Χ Wilmington, DE 19899-8801 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** Office Supplies from Amazon Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 02/21/2024 Barclays Jet Blue Mastercard Payee address: City; State; Zip Code Amount (\$) \$72.00 P.O. Box 8801 Reimbursement from Χ political contributions intended Wilmington, DE 19899-8801 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** Squarespace Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental 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 Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services 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: 3/3 Rpt: 28/28 Swann, Stacey R. (Ms.) 00088236 Date Payee name 02/21/2024 Barclays Jet Blue Mastercard Amount (\$) Payee address; City; State; Zip Code \$182.98 P.O. Box 8801 Reimbursement from political contributions Х intended Wilmington, DE 19899-8801 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE Business Cards and Banner** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/21/2024 Barclays Jet Blue Mastercard Amount (\$) Payee address; City; State; Zip Code \$20.56 P.O. Box 8801 Reimbursement from political contributions Χ Wilmington, DE 19899-8801 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** Office Supplies Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 01/26/2024 Barclays Jet Blue Mastercard Payee address: City; State; Zip Code Amount (\$) \$294.22 P.O. Box 8801 Reimbursement from Χ political contributions intended Wilmington, DE 19899-8801 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** Website Creation/Hosting to Squarespace

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit

C/OH

Office sought

Office held