# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commi 00085754		2 Total pages f	filed: 70
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	Caroline			Date Received	
					ELECTRONIC	ALLY FILED
	NICKNAME	LACT		CHEEN	07/15/2024	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	NICKNAME	LAST Harris Davila		SUFFIX	01713/2024	
		nailis Daviia				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING	P. O. Box 700					
ADDRESS					Receipt #	Amount
Change of Address	Round Rock, TX 78680				Date Processed	
"					Date Processed	
					Date Imaged	
					Date imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER	Mrs.	Amberly		•••		
NAME	IVII 3.	7 tillberry				
	NICKNAAAE			CUEEIV		
	NICKNAME	LAST Ward		SUFFIX		
		vvaiu				
2 0445404	OTDEET ADDRESS (410 DO	DOV DI E40E)	4.00	F / OLUTE // OLT)	0.7	
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO	BOX PLEASE);	AP	Γ / SUITE #; CITY	; SI	ATE; ZIP CODE
ADDRESS	1201 Winding Way					
(Residence or Business)						
	Georgetown, TX 78628					
7 CAMPAIGN	AREA CODE PHON	IE NUMBER E	XTENSION			
TREASURER		IE NOMBER E	EVICION			
PHONE	(979) 219-3729					
8 REPORT						
TYPE	January 15	30th day before	election	Runoff	15th day after ca	ampaign treasurer
		_ ′		_	appointment (off	
	X July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (At	tach C/OH-FR)
				reporting innit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2024	TH	ROUGH	06/30/20	24	
10 ELECTION	ELECTION DATE	<u>_</u>		ELECTION TYPE		
	Month Day Year	l LIP	rimary	Runoff	Other	
		□G	eneral	Special		
				<u> </u>		
11 OFFICE	OFFICE HELD (if any)	ı		12 OFFICE SOUGH	Γ (if known)	
	State Representative Distr	rict 52			,	
	·					
		GO T	O PAGE 2			

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 70

13 C / OH NAME	<b>14</b> Filer ID (	Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
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)	\$ 50,006.15
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 62,223.90
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 70,301.93
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		The Henera	ble Caroline Harris Da	ovila
			f Candidate or Officehole	
AFFIX NO	TARY STAMP / SEAL AB	S		
Sworn to and subs	cribed before me by the s	aid	this the	day
		ertify which, witness my hand and seal of office.	, uno uic	uuy
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

## **SUBTOTALS - C/OH**

# FORM C/OH COVER SHEET PG 3

			C	OVER SHEET PG 3 3 of 70
	ER NAM	ΛΕ vila, Caroline (The Honorable)	<b>19</b> Filer ID 00085754	(Ethics Commission Filers)
		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 50,006.15
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		\$		
4.		\$		
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	\$ 44,886.48	
6.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 9,000.00	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	\$	
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 8,337.42
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains ho	w to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/12 Rpt: 4/70	
2	FILER NAME Harris Davila	a, Caroline (The Honorable)			3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 05/09/2024	<ul><li>5 Full name of contributor AMGEN PAC</li><li>6 Contributor address; City; S</li></ul>	x out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$1,000.00
		Thousand Oaks, CA 913					
8	Principal occu	pation / Job title (See Instruction	s)	9 Employer (See Instructions	s)		
	Date 05/29/2024	Full name of contributor Allen Boone Humphries Contributor address; City; S		)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	Houston, TX 77027 pation / Job title (See Instruction	s)	Employer (See Instructions	<u> </u> S)		
	Date 02/28/2024	Full name of contributor American Electric Power Contributor address; City; S Washington, DC 20004				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	<u> </u> 		
	Date 05/29/2024	Full name of contributor Ancira Strategic Partners Contributor address; City; S Austin, TX 78701				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	5)		
	Date 05/29/2024	Full name of contributor Aransas-Corpus Christi F Contributor address; City; S Corpus Christi, TX 78403	State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	5)		
				l			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/12 Rpt: 5/70	
2	FILER NAME Harris Davila	a, Caroline (The Honorable)		3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 02/28/2024	Full name of contributor		7	Amount of Contribution (\$)	\$1,500.00
_	<u> </u>	Dallas, TX 75240				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 02/14/2024	Full name of contributor out-of-state PAC (ID#:_Barrett, Bart  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
	Dringing	Houston, TX 77019	Familia ya (Can Instructiona			
	Real Estate	pation / Job title (See Instructions)	Employer (See Instructions Wood Partners	)		
	Date 05/25/2024	Full name of contributor out-of-state PAC (ID#:_ Biar, Andrew Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
		Houston, TX 77024				
	Principal occu Public Affairs	pation / Job title (See Instructions) S	Employer (See Instructions Strategic Public Affairs	)		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_Blackridge  Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/08/2024	Full name of contributor out-of-state PAC (ID#:_ Bofferding, Mark Contributor address; City; State; Zip Code Leander, TX 78641	)		Amount of Contribution (\$)	\$50.00
	Principal occu Retired	ipation / Job title (See Instructions)	Employer (See Instructions Retired	)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/12 Rpt: 6/70	
2	FILER NAME Harris Davila	a, Caroline (The Honorable)		3	Filer ID (Ethics Commission 00085754	n Filers)
4	Date 05/09/2024	Full name of contributor	C00035675)	7	Amount of Contribution (\$)	\$500.00
_	Deignaignal annu	Washington, DC 20004	In Employer (Con Instruction			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID#:_ CRAFTPAC Contributor address; City; State; Zip Code Austin, TX 78756			Amount of Contribution (\$)	\$500.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/06/2024	Full name of contributor X out-of-state PAC (ID#:_CVS Health PAC  Contributor address; City; State; Zip Code	[ C00384818 )		Amount of Contribution (\$)	\$2,000.00
	Principal occu	Washington, DC 20004  upation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_Cammack and Strong PC Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$300.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 01/27/2024	Full name of contributor out-of-state PAC (ID#:_ Chang, Stephen Contributor address; City; State; Zip Code Leander, TX 78641			Amount of Contribution (\$)	\$25.00
	Principal occu Communicat	ipation / Job title (See Instructions) tions	Employer (See Instructions Texas Oil and Gas Asso		ation	

	MONET	ARY POLITICAL CONTRIBUTION	Ν	IS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 4/12 Rpt: 7/70
2	FILER NAME Harris Davila	a, Caroline (The Honorable)			3	Filer ID (Ethics Commission Filers) 00085754
4	Date 05/15/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Colyandro, John</li> <li>Contributor address; City; State; Zip Code</li> </ul>			7	Amount of Contribution (\$) \$500.00
_	Deireciant	Austin, TX 78701	<u> </u>	Frankrije (Ozakativati		
8	Consultant	pation / Job title (See Instructions)	9	Employer (See Instructions Colyandro Public Affairs		
	Date 01/16/2024	Full name of contributor out-of-state PAC (ID#:_ David L Cook Campaign  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$) \$500.00
	Deireciant	Mansfield, TX 76063	_	Frankrije (Ozakastiana		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Date 05/06/2024	Full name of contributor X out-of-state PAC (ID#:_ Devon Energy PAC  Contributor address; City; State; Zip Code	C0(	0354753 )		Amount of Contribution (\$) \$2,000.00
		Oklahoma City, OK 73102	_		L	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Date 02/28/2024	Full name of contributor out-of-state PAC (ID#:_Fairly, Alex  Contributor address; City; State; Zip Code  Amarillo, TX 79109		)	•	Amount of Contribution (\$) \$10,000.00
	Principal occu Insurance	pation / Job title (See Instructions)		Employer (See Instructions Fairly Group	5)	
	Date 02/28/2024	Full name of contributor out-of-state PAC (ID#:_ Friends of the University PAC Contributor address; City; State; Zip Code Austin, TX 78763		)	•	Amount of Contribution (\$) \$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	

	MONET	ARY POLITICAL (	S	SCHEDULE A1				
	The Instru	ction Guide explains hov	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 5/12 Rpt: 8/70	
2	FILER NAME Harris Davila	a, Caroline (The Honorable)				3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 05/29/2024	<ul><li>5 Full name of contributor Goldsby, Greta</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:		)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Austin, TX 78703 pation / Job title (See Instructions	2)		Employer (See Instructions	;) 		
•	Attorney	pation / 300 title (See instructions	5)		Drenner Group	•)		
	Date 05/29/2024	Full name of contributor Gonzales, Larry Contributor address; City; S			)		Amount of Contribution (\$)	\$500.00
	Principal occu	Round Rock, TX 78681 pation / Job title (See Instructions	s)		Employer (See Instructions	<u> </u> ;)		
	Owner	, , , , , , , , , , , , , , , , , , , ,	,		Desk 138	,		
	Date 05/29/2024	Full name of contributor Graydon Group LLC Contributor address; City; S	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$500.00
		Austin, TX 78701	tin, TX 78701					
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Date 01/16/2024	Full name of contributor Hill, Justin Contributor address; City; S Austin, TX 79746	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$250.00
	Principal occu Retired	pation / Job title (See Instructions	s)		Employer (See Instructions Retired	5)		
	Date 05/29/2024	Full name of contributor Hillco PAC Contributor address; City; S Austin, TX 78701	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIE	BUTION	S		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complet	te this for	n.	1	Total pages Schedule A1: Sch: 6/12 Rpt: 9/70	
2	FILER NAME Harris Davila	, Caroline (The Honorable)			3	Filer ID (Ethics Commission 00085754	n Filers)
4	Date 06/30/2024	<ul> <li>Full name of contributor  out-of-state   Out-of-state</li></ul>		)	7	Amount of Contribution (\$)	\$104.10
8	Dringinal occu	Austin, TX 78717 pation / Job title (See Instructions)	lo.	Employer (See Instructions	·/		
•	Retired	oduon / Job title (See Instructions)	9	Retired	•)		
	Date 05/06/2024	Full name of contributor out-of-state I Houston Pilots PAC  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$500.00
		Deer Park, TX 77536					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 05/29/2024	Full name of contributor out-of-state I Husch Blackwell LLP  Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$500.00
		St. Louis, MO 63105					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 05/29/2024	Full name of contributor out-of-state I Husch Blackwell Strategies  Contributor address; City; State; Zip Code  Jefferson City, MO 65101		)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 01/16/2024	Full name of contributor out-of-state I IBAT PAC Contributor address; City; State; Zip Code  Dallas, TX 75266	PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/12 Rpt: 10/70	
2	FILER NAME Harris Davila	a, Caroline (The Honorable)		3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 02/28/2024	5 Full name of contributor out-of-state PAC (ID#:_ INDEPAC  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$1,000.00
•	Dringing! goog	Austin, TX 78750	O Employer (See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_ Indepent Insurance Agents of TX PAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78768  pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_ LKQ Corporation Employee Good Government Contributor address; City; State; Zip Code Washington, DC 20003	Fund		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 01/16/2024	Full name of contributor out-of-state PAC (ID#:_ Leschber, Larry Contributor address; City; State; Zip Code Hutto, TX 78634			Amount of Contribution (\$)	\$500.00
	Principal occu Farmer	pation / Job title (See Instructions)	Employer (See Instructions Self	)		
	Date 01/16/2024	Full name of contributor out-of-state PAC (ID#:_ Longbow Consulting Partners  Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$350.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL (	CONTRIBUTIO	N	S		SCHEDUI	E A1
	The Instru	ction Guide explains hov	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 8/12 Rpt: 11/70	
2	FILER NAME Harris Davila	ı, Caroline (The Honorable)				3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 04/06/2024	<ul><li>5 Full name of contributor Lucci, Michael</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:_		)	7	Amount of Contribution (\$)	\$500.00
_	Duinning Langu	Leander, TX 78641		_	Franklava (Caa kastuvationa	_		
8	Researcher	pation / Job title (See Instruction	5)	9	Employer (See Instructions Self	s)		
	Date 01/16/2024	Full name of contributor McGuire Woods PAC Contributor address; City; S	x out-of-state PAC (ID#: C		225342 )		Amount of Contribution (\$)	\$250.00
	Drincinal occu	Richmond, VA 23219 pation / Job title (See Instruction:	2)		Employer (See Instructions	·/		
	Fillicipal occu	pation / Job title (See Instruction	5)		Employer (See instructions	·)		
	Date 05/15/2024	Full name of contributor Morgan, Ashley Contributor address; City; S	out-of-state PAC (ID#:_		)		Amount of Contribution (\$)	\$150.00
		Round Rock, TX 78665						
	Principal occu Attorney	pation / Job title (See Instruction	5)		Employer (See Instructions Erben & Yarbrough	s)		
	Date 06/18/2024	Full name of contributor Nimmala, Stree Contributor address; City; S Cedar Park, TX 78613			)		Amount of Contribution (\$)	\$52.05
	Principal occu Software En	pation / Job title (See Instruction: gineer	5)		Employer (See Instructions Humana	5)		
	Date 05/29/2024	Full name of contributor Olander, Gary Contributor address; City; S Houston, TX 77024	out-of-state PAC (ID#:_		)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Banker	pation / Job title (See Instruction	5)		Employer (See Instructions First Tennessee Bank	5)		

	MONET	ARY POLITICAL (	CONTRIBUTIO	N	S		SCHEDUI	E A1
	The Instru	ction Guide explains hov	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 9/12 Rpt: 12/70	
2	FILER NAME Harris Davila	a, Caroline (The Honorable)				3	Filer ID (Ethics Commission 00085754	on Filers)
4	Date 06/30/2024	Full name of contributor     Parkinson, Thomas     Contributor address; City; S	out-of-state PAC (ID#:		)	7	Amount of Contribution (\$)	\$50.00
•	Dringing Lagge	San Antonio, TX 78217	T	_	Employer (Coo Instructions	<u></u>		
8	Retired	pation / Job title (See Instructions	5)	9	Employer (See Instructions Retired	5)		
	Date 04/25/2024	Full name of contributor Polk, Douglas Contributor address; City; S					Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78738  pation / Job title (See Instructions	3)		Employer (See Instructions	رب 		
	Owner	pation / oob title (See Instructions			Doug Polk LLC	,,		
	Date 02/28/2024	Full name of contributor  RECA-Good Government  Contributor address; City; S			)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701						
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	s)		
	Date 01/25/2024	Full name of contributor Russell, Matthew Contributor address; City; S Austin, TX 78711	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$500.00
	Principal occu Consultant	pation / Job title (See Instructions	s)		Employer (See Instructions Texas Star Alliance	5)		
	Date 01/16/2024	Full name of contributor Rust, Dawn Contributor address; City; S Round Rock, TX 75664	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Retired	pation / Job title (See Instructions	5)		Employer (See Instructions Retired	5)		

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDUI	DULE A1	
	The Instru	ction Guide explains hov	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 10/12 Rpt: 13/70		
2	FILER NAME Harris Davila	FILER NAME Harris Davila, Caroline (The Honorable)			3	Filer ID (Ethics Commission 00085754	on Filers)		
4	Date 01/16/2024	<ul><li>5 Full name of contributor Shoup, Gregory</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:_		)	7	Amount of Contribution (\$)	\$250.00	
•	Dringing oggu	Hutto, TX 76034	2)	•	Employer (See Instructions	<u></u>			
8	Retired	pation / Job title (See Instructions	5)	9	Employer (See Instructions Retired	·)			
	Date Full name of contributor out-of-state PAC (ID#:)  01/16/2024 Stromberg, Larry  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$25.00				
Taylor, TX 76574  Principal occupation / Job title (See Instructions)  Employer (See Instructions)		s)							
Retired			Retired	,					
Date Full name of contributor out-of-state PAC (ID#:_02/28/2024 Stromberg, Larry  Contributor address; City; State; Zip Code			)		Amount of Contribution (\$)	\$25.00			
		Taylor, TX 76754							
	Principal occu Retired	pation / Job title (See Instructions	5)		Employer (See Instructions Retired	5)			
	Date 01/16/2024	Full name of contributor Stromberg, Larry Contributor address; City; S Taylor, TX 76574			)	•	Amount of Contribution (\$)	\$25.00	
		Employer (See Instructions Retired	5)						
	Date 05/29/2024	Full name of contributor TXTA TruckPAC Contributor address; City; S Austin, TX 78762	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$2,000.00	
	Principal occu	I pation / Job title (See Instructions	5)		Employer (See Instructions	5)			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE <b>A1</b>		
	The Instru	ction Guide explains hov	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/12 Rpt: 14/70		
2	FILER NAME Harris Davila	ILER NAME Iarris Davila, Caroline (The Honorable)			3	Filer ID (Ethics Commission 00085754	on Filers)	
4	Date 05/29/2024	5 Full name of contributor out-of-state PAC (ID#:)  Texas Lobby Partners  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00		
		Austin, TX 78701						
8	Principal occu	pation / Job title (See Instructions	5)	9 Employer (See Instruction	s)			
	Date 05/29/2024	Full name of contributor Texas Oral & Maxillofacia Contributor address; City; S				Amount of Contribution (\$)	\$1,000.00	
	Principal occu	San Antonio, TX 78230 pation / Job title (See Instruction:	5)	Employer (See Instruction	 s)			
				p - 3 - (	-,			
	Date 05/09/2024	Full name of contributor  Texas Society of Architec  Contributor address; City; S		)		Amount of Contribution (\$)	\$1,000.00	
	Dringing! goog	Austin, TX 78702 pation / Job title (See Instruction:	2)	Employer (See Instruction	<u>e)</u>			
	r incipal occu	pation / 300 title (See instruction.	5)	Employer (See instruction	3)			
	Date 01/16/2024	Full name of contributor The Cigna Group Employ Contributor address; City; S Washington, DC 20004		000085316		Amount of Contribution (\$)	\$500.00	
	<u>_</u>			Employer (See Instruction	s)			
	Date 02/28/2024	Full name of contributor Werner, Johnnie Ann Contributor address; City; S Taylor, TX 76574	out-of-state PAC (ID#:_ tate; Zip Code			Amount of Contribution (\$)	\$100.00	
	Principal occu Retired	pation / Job title (See Instruction:	5)	Employer (See Instruction Retired	s)			

TARY POLITICAL CONTRIBUT	TIONS	SCHEDULE A1
ruction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 12/12 Rpt: 15/70	
ME vila, Caroline (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085754
<ul> <li>Full name of contributor  out-of-state PAC (IE Wholesale Beer Distributors of TX PAC</li> <li>Contributor address; City; State; Zip Code</li> </ul>	D#:)	7 Amount of Contribution (\$) \$1,000.00
Austin, TX 78701		
ccupation / Job title (See Instructions)	9 Employer (See Instruction	s)
	ruction Guide explains how to complete thing  ME  vila, Caroline (The Honorable)  5 Full name of contributor out-of-state PAC (III Wholesale Beer Distributors of TX PAC  6 Contributor address; City; State; Zip Code  Austin, TX 78701	tila, Caroline (The Honorable)  5 Full name of contributor out-of-state PAC (ID#:) Wholesale Beer Distributors of TX PAC  6 Contributor address; City; State; Zip Code  Austin, TX 78701

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total nagge Schodule F1:	1
Ė	Total pages Schedule F1: Sch: 1/18 Rpt: 16/70	Harris Davila, Caroline (The Honorable)    3 Filer ID (Ethics Commission Filers)   00085754
4	Date	5 Payee name
	02/16/2024	Iphone Citizen
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$74.91	One Citizens Plaza
		Providence, RI 02903
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Phone monthly user fee
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
L		·
	Date	Payee name
L	03/18/2024	Iphone Citizen
	Amount (\$)	Payee address; City; State; Zip Code
	\$74.91	One Citizens Plaza
		Providence, RI 02903
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Phone monthly user fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	04/16/2024	Iphone Citizen
	Amount (\$)	Payee address; City; State; Zip Code
	\$74.91	One Citizens Plaza
		Providence, RI 02903
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Phone monthly user fee
	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 Commi Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
-	Sch: 2/18 Rpt: 17/70	Harris Davila, Caroline (The Honorable)
4	Date	5 Payee name
	05/01/2024	Annunciation Maternity Home
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,350.00	3610 Shell Rd
		Georgetown, TX 78628
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXI ENDITORE	Candidate/Officeholder/Political Committee
		Event sponsorship
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/15/2024	Apple.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.56	1 Infinite Loop
		Cupertino, CA 95014
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Subscription for campaign office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	05/14/2024	Apple.com
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.56	1 Infinite Loop
		Cuparting CA 05014
		Cupertino, CA 95014
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Taxes Complete Schedule T
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Subscription for campaign office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

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

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

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: 3/18 Rpt: 18/70	Harris Davila, Caroline (The Honorable) 00085754
4	Date	5 Payee name
	05/20/2024	Apple.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$21.64	1 Infinite Loop
		Cupertino, CA 95014
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Subscription for campaign office
		Subsection for sumparing the sum of the sum
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>1</del>
	Date	Payee name
	01/16/2024	Bank of America
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,000.00	100 North Tryon Street
		Charlotte, NC 28255
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Bill Payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/17/2024	Bank of America
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	100 North Tryon Street
		Charlotte, NC 28255
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Bill Payment
		Diii i dyment
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	•

### SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/18 Rpt: 19/70	Harris Davila, Caroline (The Honorable) 00085754
4	Date	5 Payee name
	05/29/2024	Bank of America
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$7,000.00	100 North Tryon Street
		Charlotte, NC 28255
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Credit Card Bill
		Great Gura Bill
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_		
	Date	Payee name
	06/27/2024	Bank of America
	Amount (\$)	Payee address; City; State; Zip Code
	\$119.94	100 North Tryon Street
		Charlotte, NC 28255
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Bill Payment
		Siii i ayinone
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Data	David and the second se
	Date 02/21/2024	Payee name  Bank of America
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	100 North Tryon Street
		Charlotte, NC 28255
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Bill Payment
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	
	•	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 5/18 Rpt: 20/70	Harris Davila, Caroline (The Honorable) 00085754
4	Date	5 Payee name
	04/23/2024	Bank of America
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$400.00	100 North Tryon Street
		Charlotte, NC 28255
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Bill Payment
<u>_</u>	Complete ONII V if allows:	Condidate/Officeholder name
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	•	
	Date	Payee name
	05/29/2024	Bank of America
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,432.35	100 North Tryon Street
		Charlotte, NC 28255
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Bill Payment
		Siii i ayinone
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$	Data	Davies same
	Date	Payee name
	02/01/2024	Carter, Charles
	Amount (\$)	Payee address; City; State; Zip Code
	\$900.00	234 Olde Oaks Drive
L		Georgetown, TX 78633
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Signs
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	

### SCHEDULE F1

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/18 Rpt: 21/70	Harris Davila, Caroline (The Honorable) 00085754
4	Date	5 Payee name
	03/18/2024	Carter, Charles
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$360.00	234 Olde Oaks Drive
		Georgetown, TX 78633
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Signs
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	06/27/2024	Drenner, Keaton
	Amount (\$)	Payee address; City; State; Zip Code  1404 Rockcliff Rd
	\$1,200.00	1404 ROCKCIIII Ru
		Austin, TX 78730
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign work
		5 m. p. 191
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	06/28/2024	Evans, Michelle
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	3102 Willow Cove
		Round Rock, TX 78664
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	ense Pi Si	-	nse es/Contract Labor	Trav	vel in District vel Out of Dis IER (enter a		
1	Total pages Schedule F1:							er ID	(Ethics Commission Fi	lers)
	Sch: 7/18 Rpt: 22/70	Harris Dav	ila, Caroline (The Ho	onorable)			000	085754		
4	Date	5 Payee name								
	04/05/2024	Goat Threa								
6	Amount (\$)	7 Payee addre		State; Z	Zip Code	)				
	\$760.00	205 Mercy	vvay							
		Liberty Hill	, TX 78642							
8	PURPOSE	(a) Category (	See Categories listed at the top	p of this schedu	ıle) (b	) Description				
	OF EXPENDITURE	Advertising	j Expense			Check if travel Check if Austir			plete Schedule T.	
						Campaign sh		oidei liviilį	g expense	
						. •				
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Offic	ce sough	t		Office he	eld	
_	Date	Daylog name								
	04/30/2024	Payee name Gomez, M								
	Amount (\$)	Payee addre		State; Z	Zip Code	1				
	\$149.00	1616 W 6tl	•	J. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.		•				
	,,									
		Austin, TX	78703							
	PURPOSE OF		See Categories listed at the top		<sub>ile)</sub> (b	Description	outoid- : f	Toyes O-	unloto Cohedula T	
	EXPENDITURE	Office Ove	rhead/Rental Expens	se		Check if travel Check if Austir			plete Schedule T. g expense	
						Reimbursem				
L										
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Offic	ce sough	t		Office he	eld	
	Date	Payee name	9							
	05/28/2024	Gomez, M	elva							
	Amount (\$)	Payee addr	ess; City;	State; Z	Zip Code	)				
	\$5,000.00	1616 W 6tl	n St							
		Austin, TX	78703							
	PURPOSE OF		See Categories listed at the top		ıle) (k	) Description				
	EXPENDITURE	Salaries/W	ages/Contract Labo	r		Check if travel Check if Austir			plete Schedule T. a expense	
						Campaign w			, <sub>.</sub> ,	
	Complete ONLY if direct expenditure to benefit C/Ol		ficeholder name	Offic	ce sough	t		Office he	eld	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 8/18 Rpt: 23/70	Harris Davila, Caroline (The Honorable) 00085754
4	Date	5 Payee name
	03/29/2024	Gomez, Melva
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$62.00	1616 W 6th St
		Austin, TX 78703
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Reimbursement for campaign travel
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/16/2024	Iphone Citizen
	Amount (\$)	Payee address; City; State; Zip Code
	\$74.91	One Citizens Plaza
		Providence, RI 02903
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Phone monthly user fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/16/2024	Iphone Citizen
	Amount (\$)	Payee address; City; State; Zip Code
	\$74.91	One Citizens Plaza
		Providence, RI 02903
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Phone monthly user fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

### SCHEDULE F1

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

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

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

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/18 Rpt: 24/70	Harris Davila, Caroline (The Honorable) 00085754
4	Date	5 Payee name
	06/17/2024	Iphone Citizen
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$74.91	One Citizens Plaza
		Providence, RI 02903
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Phone monthly user fee
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experience to benefit Gree	
	Date	Payee name
	02/02/2024	JC & KTG Consulting
	Amount (\$)	Payee address; City; State; Zip Code
	\$333.33	9900 Spectrum Dr
		Austin, TX 78717
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Campaign work
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	5.	
	Date 02/02/2024	Payee name
		JC & KTG Consulting
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,333.33	9900 Spectrum Dr
		Austin, TX 78717
	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
		Campaign work
		- Campaign non
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>y</b>
_		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment		ategory not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	(Ethics Commission Filers)
	Sch: 10/18 Rpt: 25/70	Harris Davila, Caroline (The Honorable) 00085754	
4	Date	5 Payee name	
	04/04/2024	JC & KTG Consulting	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,333.33	9900 Spectrum Dr	
		Austin, TX 78717	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete.	ete Schedule T
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Compl Check if Austin, TX, officeholder living of	
		Campaign work	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hel	d
9	expenditure to benefit C/O		u
	Date	Payee name	
	04/04/2024	JC & KTG Consulting	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	9900 Spectrum Dr	
		Austin, TX 78717	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Compl	
		Consulting fees	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office hel	d
	Date	Payee name	
	04/04/2024	JC & KTG Consulting	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$80.00	9900 Spectrum Dr	
		Austin, TX 78717	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
		Campaign work	pyperise
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hel	d
	expenditure to benefit C/OI	DH .	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		OTHER (enter a category not listed above)
L		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
L	Sch: 11/18 Rpt: 26/70	Harris Davila, Caroline (The Honorable)	00085754
4	Date	5 Payee name	
	06/03/2024	JC & KTG Consulting	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,000.00	9900 Spectrum Dr	
		Austin, TX 78717	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Calaries, Wages, Corniact Easter	utside of Texas. Complete Schedule T. TX, officeholder living expense
		Campaign wo	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	05/28/2024	JG Media	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,775.00	16225 Impact Way	
		Pflugerville, TX 78660	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Onice Overhead/Nertial Expense	utside of Texas. Complete Schedule T. TX, officeholder living expense
		Campaign me	
		- Campaign in	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
	Date	Payee name	
	02/02/2024	Kronda Thimesch Campaign	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	1301 Justin Road	
		Lewisville, TX 75077	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Continuations wade by	utside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Check if Austin, Donation	TX, officeholder living expense
		Solidion	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
Eo:	rms provided by Tayas F	thics Commission www.athics state ty us	Version V/1 1 0 d278aha0

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 12/18 Rpt: 27/70	2 FILER NAME Harris Davila, Caroline (The Honorable)  3 Filer ID (Ethics Commission Filers) 00085754
4 Date	5 Payee name
05/16/2024	Self, Landon
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,360.00	19532 Chayton Cr
	Dflugarvilla, TV 70660
	Pflugerville, TX 78660
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Campaign work
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/25/2024	Self, Landon
Amount (\$)	Payee address; City; State; Zip Code
\$2,720.00	19532 Chayton Cr
+=,:=0:00	2002 01113,1011 01
	Pflugerville, TX 78660
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.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Campaign work
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Data	
Date	Payee name
02/09/2024	Senior Access
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	2498 E Palm Valley
	David David TV 70005
	Round Rock, TX 78665
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Donation
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

l	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
4	Sch: 13/18 Rpt: 28/70  Date	Harris Davila, Caroline (The Honorable)  5 Payee name
L	01/03/2024	Starbucks
6	Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 501 W 15th St  Austin, TX 78701
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Refreshments during campaign travel
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 01/04/2024	Payee name Starbucks
	Amount (\$) \$25.00	Payee address; City; State; Zip Code 501 W 15th St
		Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Refreshments during campaign travel
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 01/08/2024	Payee name Starbucks
	Amount (\$) \$25.00	Payee address; City; State; Zip Code 501 W 15th St
		Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Refreshments during campaign travel
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### 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	/ - Il Com	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Overh Polling Expe Printing Expe Salaries/Wag	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: 14/18 Rpt: 29/70	l	Harris Davila, Caroline (The Honoral	ole)			00085754
4	Date	5	Payee name			<u> </u>	
	01/08/2024	ı	Starbucks				
6	Amount (\$) \$25.00	í	501 W 15th St	te; Zip Codo	9		
_		<u> </u>	Austin, TX 78701	1.0			
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this s Food/Beverage Expense	schedule) (I	Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense uring campaign travel
9	Complete ONLY if direct expenditure to benefit C/Oh		andidate/Officeholder name	Office sough	nt		Office held
	Date	ı	Payee name				
	02/02/2024		Starbucks				
	Amount (\$)	l		te; Zip Code	e		
	\$25.00		501 W 15th St Austin, TX 78701				
	PURPOSE OF EXPENDITURE	ı	Category (See Categories listed at the top of this s Food/Beverage Expense	schedule) (I	Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense uring campaign travel
	Complete ONLY if direct expenditure to benefit C/Oh		andidate/Officeholder name	Office sough	nt		Office held
	Date 03/11/2024	ı	Payee name Starbucks				
	Amount (\$) \$25.00	l	Payee address; City; Sta 501 W 15th St	te; Zip Code	e		
		,	Austin, TX 78701				
	PURPOSE OF EXPENDITURE	ı	Category (See Categories listed at the top of this s Food/Beverage Expense	schedule) (I	Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense uring campaign travel
	Complete ONLY if direct expenditure to benefit C/Oh		andidate/Officeholder name	Office sough	nt		Office held
	orms provided by Tayas Ethics Commission www.athics state ty us Version V/ 1.0 d278aba0						

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 15/18 Rpt: 30/70	Harris Davila, Caroline (The Honorable)
4	Date	5 Payee name
	03/19/2024	Starbucks
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.00	501 W 15th St
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Refreshments during campaign travel
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Payee name
	03/19/2024	Starbucks
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	501 W 15th St
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	LXFLNDITORL	Check if Austin, TX, officeholder living expense
		Refreshments during campaign travel
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	04/29/2024	Starbucks
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	501 W 15th St
	,	
		Austin, TX 78701
	DUDDOG-	Tu.
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Food/Reverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Refreshments during campaign travel
		Transamonta damig dampaign davor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schodule F1:	T
	Total pages Schedule F1: Sch: 16/18 Rpt: 31/70	Harris Davila, Caroline (The Honorable)
Ļ	•	
4	Date	5 Payee name
L	06/12/2024	Starbucks
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.00	501 W 15th St
		Austin, TX 78701
8	PURPOSE	
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Refreshments during campaign travel
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
H	Date	Payee name
	06/17/2024	Starbucks
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	501 W 15th St
L		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LA LIBITORE	Check if Austin, TX, officeholder living expense
		Refreshments during campaign travel
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	01/19/2024	Texas House of Representatives
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	PO Box 2910
		Austin, TX 78768
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Supplies for political office
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H

### 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 Committe

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: 17/18 Rpt: 32/70	Harris Davila, Caroline (The Honorable) 00085754
4	Date	5 Payee name
	02/01/2024	Texas House of Representatives
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	PO Box 2910
		Austin, TX 78768
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Supplies for political office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	06/26/2024	Unchained Foundation
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	263 Housefinch Loop
		Leander, TX 78641
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officenoider/Political Committee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	н
_	Date	Payee name
	02/08/2024	Williamson Co. Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	716 S Rock St
	, , , , , , , , , , , , , , , , , , , ,	
		Georgetown, TX 78626
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXI ENDITORE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Event sponsorship
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

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

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	·	3 Filer ID (Ethics Commission Filers)
	Sch: 18/18 Rpt: 33/70	Harris Davila, Caroline (The Honorable)	00085754
4	Date	5 Payee name	
	01/25/2024	Winred	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$180.98	1776 Wilson Blvd	
		Arlington, VA 22209	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	1 1 000	outside of Texas. Complete Schedule T.  TX, officeholder living expense
		I — — — — — — — — — — — — — — — — — — —	e donations from 01/25/24-06/30/24
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

#### UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(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 Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 34/70 Harris Davila, Caroline (The Honorable) 00085754 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS \$ 5 Date Payee name 06/30/2024 **Berry Communications** Amount (\$) Payee address; State; Zip Code \$9,000.00 1014 Milton Street Austin, TX 78704 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign consulting fees 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### **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

The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	Total pages Schedule F4: 2 FILER NAME					3 Filer ID (Ethics Commission Filers)		
Sch: 1/36 Rpt: 35/70	Harris Davila, Caro	line (The Honorable)		00085754				
4 CREDIT CARD ISSUER		ncial institution America	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged \$21.64	(b) Date of Charge 01/02/2024	(c) Date(s) Credit Card Issuer 01/02/2024	r Paid				
7 PAYEE	(a) Payee name  Adobe, Inc.		(b) Payee address; 345 Park Ave	City,	State,	Zip Code		
	( ) 5 :		San Jose, CA 95110					
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Software for campaign					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$24.82	(b) Date of Charge 01/03/2024	(c) Date(s) Credit Card Issuer 01/03/2024	r Paid				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Hill Country Spring		10019 S I-35 Frontage Rd	I				
			Austin, TX 78747					
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Water for political office					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin TX	officeholder living expe	ense			
Complete ONLY if direct	Candidate/Officeholder		e sought	Office held				
expenditure to benefit C/OH			· ·					
PAYMENT	(a) Amount Charged \$12.78	(b) Date of Charge 01/04/2024	(c) Date(s) Credit Card Issuer 01/04/2024	Paid				
PAYEE	(a) Payee name  Dropbox		(b) Payee address; 1800 Owens St San Francisco, CA 94158	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Description Software for campaign					
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	officeholder living expe	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				

### **EXPENDITURES MADE BY CREDIT CARD**

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	l pages Schedule F4: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
	Sch: 2/36 Rpt: 36/70	Harris Davila, Caro	line (The Honorable)			00085754		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$21.00	(b) Date of Charge 01/16/2024	(c) Date(s) 01/16/20	) Credit Card Issuei 124	r Paid		
7	PAYEE	(a) Payee name Mailchimp			ngier Ave. NE	City,	State,	Zip Code
8	PURPOSE OF	(a) Category		(b) Descri	GA 30308			
ľ	EXPENDITURE  X Political	(See Categories listed at the top Office Overhead/Reni			n mailing softwar	re		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 01/18/2024	(c) Date(s 01/18/20	) Credit Card Issuer 124	r Paid		
	PAYEE	(a) Payee name  Hutto Chamber of (	Commerce	(b) Payee 122 East	St	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descri		ıpaign staff		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	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 \$32.28	(b) Date of Charge 01/19/2024	(c) Date(s 01/19/20	) Credit Card Issuer 124	r Paid		
	PAYEE	(a) Payee name Leander Area Repu	ublican Women	(b) Payee PO Box		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descri	ption gistration for cam	paign staff		
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin					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		
Г								

## 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

	I ne inst	ruction Guide explains now	to complete tr	nis form.			
1 Total pages Schedule F4: 2 FILER NAME					3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 3/36 Rpt: 37/70	Harris Davila, Caro	line (The Honorable)			00085754		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$31.04	(b) Date of Charge 01/22/2024	(c) Date(s) 01/22/202	Credit Card Issuer 24	Paid		
7 PAYEE	(a) Payee name Tiff's Treats		(b) Payee a 1806 Nue	ces St	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Refreshments for campaign meeting				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	name Office	e sought		Office held			
PAYMENT	(a) Amount Charged \$17.05	(b) Date of Charge 01/23/2024	(c) Date(s) 01/23/202	Credit Card Issuer 24	Paid		
PAYEE	(a) Payee name Zoom		San Jose,	en Boulevard CA 95113	City,	State,	Zip Code
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Descript Online me	cion eeting software			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$24.52	(b) Date of Charge 01/29/2024	(c) Date(s) 01/29/202	Credit Card Issuer 24	Paid		
PAYEE	(a) Payee name SquareSpace, Inc.		(b) Payee a 8 Clarkson New York		City,	State,	Zip Code
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Rent	,	(b) Descript Online car	tion			
Non-Political (c) Check if travel outside of Texas. Complete Schedule T				Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Öffice	e sought		Office held		

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission								
Sch: 4/36 Rpt: 38/70	Harris Davila, Caro	line (The Honorable)		00085754							
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$							
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid							
	\$19.92	01/30/2024	01/30/2024								
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State	Zip Code						
	Uber		1515 3rd St								
			San Francisco, CA 94158	3							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description								
X Political	Travel In District	of this schedule)	Ride during campaign trip	0							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense							
9 Complete ONLY if direct				Office held							
expenditure to benefit C/OH											
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 01/31/2024	er Paid							
	\$18.90	01/31/2024	01/31/2024								
PAYEE	(a) Payee name		(b) Payee address;	City, State	Zip Code						
	Uber		1515 3rd St								
			San Francisco, CA 94158	3							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cahadula)	(b) Description								
X Political	Travel In District	or tris scriedule)	Ride during campaign trip	0							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	X, officeholder living expense							
Complete ONLY if direct	Candidate/Officeholder	name Offic	ffice sought Office held								
expenditure to benefit C/OH											
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid							
	\$21.64	01/31/2024	01/31/2024								
PAYEE	(a) Payee name	ı	(b) Payee address;	City, State	Zip Code						
			345 Park Ave								
	Adobe, Inc.										
			San Jose, CA 95110								
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description								
	Office Overhead/Rent	,	Software for campaign								
ı =	X Political										
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.									
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held							
I			•								

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Comm	ission Filers)						
Sch: 5/36 Rpt: 39/70	Harris Davila, Caro	line (The Honorable)		00085754							
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$							
6 PAYMENT	(a) Amount Charged \$900.00	(b) Date of Charge 02/02/2024	(c) Date(s) Credit Card Issuer 02/02/2024	Paid							
7 PAYEE	(a) Payee name  Advantage Direct C	Consulting	(b) Payee address; 1421 Prince Street Suite 220 Alexandria, VA 22314	City, State	, Zip Code						
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description Phone banking and block	walking software							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense							
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
PAYMENT	(a) Amount Charged \$8.97	(b) Date of Charge 02/02/2024	(c) Date(s) Credit Card Issuer 02/02/2024	<sup>r</sup> Paid							
PAYEE	(a) Payee name Uber		(b) Payee address; 1515 3rd St San Francisco, CA 94158	City, State	, Zip Code						
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Ride during campaign trip								
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 \$24.82	(b) Date of Charge 02/02/2024	(c) Date(s) Credit Card Issuer 02/02/2024	· Paid							
PAYEE	(a) Payee name Hill Country Spring		(b) Payee address; 10019 S I-35 Frontage Rd Austin, TX 78747	City, State	, Zip Code						
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense			(b) Description Water for political office								
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		officeholder living expense							
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							

### SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,	
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
	Sch: 6/36 Rpt: 40/70	Harris Davila, Caro	line (The Honorable)			00085754			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$			
6	PAYMENT	(a) Amount Charged \$8.95	(b) Date of Charge 02/05/2024	(c) Date(s) 02/05/20	) Credit Card Issuel 124	r Paid			
7	PAYEE	(a) Payee name Uber		(b) Payee 1515 3rd		City,	State,	Zip Code	
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	ense		
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	xpenditure to benefit C/OH				Office held			
	PAYMENT	(a) Amount Charged \$11.10	(b) Date of Charge 02/05/2024	(c) Date(s) 02/05/20	) Credit Card Issuel 124	r Paid			
	PAYEE	(a) Payee name Uber		(b) Payee 1515 3rd		City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri	ncisco, CA 94158 ption ing campaign trip				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	ı	Check if Austin, TX,	officeholder living exp	ense		
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT	(a) Amount Charged \$8.94	(b) Date of Charge 02/05/2024	(c) Date(s) 02/05/20	) Credit Card Issuel 124	r Paid			
	PAYEE	(a) Payee name Uber		(b) Payee 1515 3rd San Frar		City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri	ption ing campaign trip				
	Non-Political	(7)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
1									

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete tl	his form.			
1	Total pages Schedule F4:	al pages Schedule F4: 2 FILER NAME					s Commiss	sion Filers)
,	Sch: 7/36 Rpt: 41/70	Harris Davila, Caro	line (The Honorable)			00085754		
	CREDIT CARD SSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$6.42	(b) Date of Charge 02/05/2024	(c) Date(s) 02/05/202	Credit Card Issuer 24	Paid		
7	PAYEE	(a) Payee name Uber		(b) Payee a 1515 3rd		City,	State,	Zip Code
-	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Ride during campaign trip				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
	9 Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name Office sought  Office sought			Office held				
	PAYMENT	(a) Amount Charged \$7.91	(b) Date of Charge 02/05/2024	02/05/202		<sup>*</sup> Paid		
	PAYEE	(a) Payee name Uber		(b) Payee a	St	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descript	cisco, CA 94158 tion ng campaign trip			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	. [	Check if Austin, TX,	officeholder living expe	ense	
	Complete ONLY if direct penditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$12.78	(b) Date of Charge 02/05/2024	(c) Date(s) 02/05/202	Credit Card Issuer 24	· Paid		
	PAYEE	(a) Payee name  Dropbox		(b) Payee a 1800 Owe San Franc		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Descript	tion for campaign			
	Non-Political Complete ONLY if direct penditure to benefit C/OH	Y if direct						

### SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)
	Sch: 8/36 Rpt: 42/70	Harris Davila, Caro	line (The Honorable)			00085754		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$3.00	(b) Date of Charge 02/08/2024	(c) Date(s) 02/08/20	) Credit Card Issuel 124	r Paid		
7	PAYEE	(a) Payee name Uber		(b) Payee 1515 3rd		City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$75.00	(b) Date of Charge 02/13/2024	(c) Date(s) 02/13/20	) Credit Card Issuel 124	r Paid		
	PAYEE	(a) Payee name  Taylor Chamber of	Commerce	(b) Payee 1519 N M Taylor, T	Main St	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descri		paign staff		
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$95.77	(b) Date of Charge 02/14/2024	(c) Date(s) 02/14/20	) Credit Card Issuel 124	r Paid		
	PAYEE	(a) Payee name  Good Luck Grill		(b) Payee 14605 FI Manor, T	M 973	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descri Meal dur	ption ing campaign tra	vel		
	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
ı								

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete thi	s form.					
1 Total pages Schedule F4:	1 Total pages Schedule F4: 2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)		
Sch: 9/36 Rpt: 43/70	Harris Davila, Caro	line (The Honorable)			00085754				
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED TURES D TO A CREDIT	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	Paid				
	\$119.35	02/15/2024	02/15/2024	4					
7 PAYEE	(a) Payee name		(b) Payee ac	ldress;	City,	State,	Zip Code		
	First Watch		2701 D Pa	rker dr. Ste 300	)				
			Round Rock, TX 78681						
8 PURPOSE OF	(a) Category	of this cohodule)	(b) Description						
EXPENDITURE  X Political	(See Categories listed at the top Food/Beverage Exper		Meal during	g campaign tra	vel				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
9 Complete ONLY if direct	Candidate/Officeholder	er name Office sought			Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge		redit Card Issuer	Paid				
	\$21.00	02/16/2024	02/16/2024	1					
PAYEE	(a) Payee name		(b) Payee ac	ldress;	City,	State,	Zip Code		
	Mailchimp		405 N Ang	ier Ave. NE					
			Atlanta, GA	30308					
PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodule)	(b) Description						
EXPENDITURE	Office Overhead/Rent		Campaign mailing software						
X Political		•							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	ffice sought Office held						
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C 02/19/2024	Credit Card Issuer	Paid				
	\$29.39	02/19/2024	02/19/2024	+					
PAYEE	(a) Payee name		(b) Payee ac	ldress;	City,	State,	Zip Code		
			1515 3rd S	it					
	Uber Eats								
			San Franci	sco, CA 94158					
PURPOSE OF	(a) Category	of this cahadula)	(b) Description						
EXPENDITURE (See Categories listed at the top of this schedule)  Food/Beverage Expense			Meal during	g campaign tra	vel				
X Political									
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	ense			
			e sought		Office held				
expenditure to benefit C/OH	<u> </u>								

### SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 10/36 Rpt: 44/70	Harris Davila, Caro	line (The Honorable)			00085754		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$17.05	(b) Date of Charge 02/23/2024	(c) Date(s) 02/23/20	) Credit Card Issuer 124	Paid		
7	PAYEE	(a) Payee name Zoom			address; den Boulevard e, CA 95113	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	ense	
<b>9</b>	expenditure to benefit C/OH					Office held		
	PAYMENT	(a) Amount Charged \$121.47	(b) Date of Charge 02/26/2024	(c) Date(s) 02/26/20	) Credit Card Issuer 124	Paid		
	PAYEE	(a) Payee name Hilton Hotels			t Trenton Road	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descrip	ı, TX 78539 otion ring campaign tra	vel		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$121.47	(b) Date of Charge 02/26/2024	(c) Date(s) 02/26/20	) Credit Card Issuer 124	Paid		
	PAYEE	(a) Payee name Hilton Hotels			address; t Trenton Road , TX 78539	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descrip Hotel dur	otion ring campaign tra	vel		
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
1								

### SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 11/36 Rpt: 45/70	Harris Davila, Caro	line (The Honorable)			00085754		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$31.13	(b) Date of Charge 02/26/2024	(c) Date(s 02/26/20	) Credit Card Issuei 124	r Paid		
7 PAYEE	(a) Payee name Chick-Fil-A			nterstate 35	City,	State,	Zip Code
A PURPOSE OF	(a) Catagony		(b) Descri	cos, TX 78666			
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		Meal during campaign travel				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH	() (	I (1) = 1 ( 5)	1 ( ) = . ( )				
PAYMENT	(a) Amount Charged \$24.52	(b) Date of Charge 02/28/2024	02/28/20	) Credit Card Issuei 124	r Paid		
PAYEE (a) Payee name (b) Payee address;				address;	City,	State,	Zip Code
	SquareSpace, Inc.		8 Clarks	on St			
				k City, NY 10014			
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	otion ampaigning			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX.	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	·	e sought		Office held		
PAYMENT	(a) Amount Charged \$52.93	(b) Date of Charge 02/29/2024	(c) Date(s) 02/29/20	) Credit Card Issuer 124	r Paid		
PAYEE	(a) Payee name Rivery Coffee			address; ery Blvd Suite 21 own, TX 78628	City, 55	State,	Zip Code
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descri Refreshr	otion nents during cam	paign travel		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

Rivery Coffee  Rivery Coffee  Rivery Coffee  Rivery Coffee  Refreshments during campaign travel  Condidate/Officeholder name  Office sought  Office sought  Office held  Refreshments during campaign travel  Condidate/Officeholder name  Office sought  Office sought  Office held  Refreshments during campaign travel  Condidate/Officeholder name  Office sought  Office sought  Office held  Refreshments during campaign travel  Condidate/Officeholder name  Office sought  Office sought  Office held  Office held  PAYMENT  (a) Amount Charged  (b) Date of Charge  (c) Date(s) Credit Card Issuer Paid  Oz/29/2024  (b) Description  Satisfaction of this schedule)  Satisfaction of this schedule)  Office Overhead/Rental Expense  Complete QNLY if direct expenditure to benefit C/OH  PAYMENT  (a) Amount Charged  (b) Date of Charge  (c) Date(s) Credit Card Issuer Paid  O3/01/2024		The Inst	ruction Guide explains how	to complete this form.				
A CREDIT CARD ISSUER   Name of financial institution See previous   S TOTAL OF UNITEMIZED EXPENDITURES EXPENDITURES EXPENDITURES EXPENDITURES EXPENDITURES EXPENDITURES EXPENDITURES EXPENDITURES EXPENDITURE (A) Amount Charged (b) Date of Charge (0.729/2024   0.729	1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Fil				
SSUER   See previous   EXPENDITURE   CARGED TO A CREDIT CARD	Sch: 12/36 Rpt: 46/70	Harris Davila, Caro	line (The Honorable)		00085754			
\$4.28   02/29/2024   02/29/20				EXPENDITURES CHARGED TO A CREDIT				
Rivery Coffee  Rivery Coffee  Respenditure    A consider of travel consider of treats Complete Schedule	6 PAYMENT				r Paid			
Refreshments during campaign travel	7 PAYEE			1500 Rivery Blvd Suite 21				
9 Complete QNLY if direct expenditure to benefit C/OH  PAYMENT  (a) Amount Charged \$21.64  (b) Date of Charge Q2/29/2024  (c) Date(s) Credit Card Issuer Paid Q2/29/2024  PAYEE  (a) Payee name Adobe, Inc.  (a) Category (See Categories listed at the top of this schedule) Q1/29/2024  (b) Payee address; City, State, Zip Cod Q3/29/2024  (c) Description Software for campaign  (d) Description Software for campaign  (e) Candidate/Officeholder name  Office Sought  Office Sought  Office held  PAYMENT  (a) Amount Charged (b) Date of Charge Q3/29/2024  (c) Candidate/Officeholder name  Office sought  Office sought  Office held	EXPENDITURE  X Political	(See Categories listed at the top		1 ' '	paign travel			
expenditure to benefit C/OH  PAYMENT  (a) Amount Charged \$21.64  (b) Date of Charge 02/29/2024  (c) Date(s) Credit Card Issuer Paid 02/29/2024  PAYEE  (a) Payee name Adobe, Inc.  (a) Category See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Payee address; City, State, Zip Cod 345 Park Ave  San Jose, CA 95110  PURPOSE OF EXPENDITURE	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
PAYEE  (a) Payee name Adobe, Inc.  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Payee address; City, State, Zip Cod 345 Park Ave San Jose, CA 95110  PURPOSE OF EXPENDITURE    Political	expenditure to benefit C/OH			e sought	Office held			
Adobe, Inc.    San Jose, CA 95110	PAYMENT				r Paid			
PURPOSE OF EXPENDITURE	PAYEE		pe, Inc. 345 Park Ave		City, State, Zip Code			
Complete ONLY if direct expenditure to benefit C/OH  PAYMENT  (a) Amount Charged \$35.23  (b) Date of Charge 03/01/2024  PAYEE  (a) Payee name  (b) Payee address; City, State, Zip Cod 11655 Research Blvd  Austin, TX 78759  PURPOSE OF EXPENDITURE  [X] Political  [X] Political  [X] Political  [X] Political  [X] Political  [X] Complete ONLY if direct  Candidate/Officeholder name  (b) Date of Charge 03/01/2024  (c) Date(s) Credit Card Issuer Paid 03/01/2024  (d) Date(s) Credit Card Issuer Paid 03/01/2024  (e) Date(s) Credit Card Issuer Paid 03/01/2024  (d) Date(s) Credit Card Issuer Paid 03/01/2024  (e) Date(s) Credit Card Issuer Paid 03/01/2024  (b) Payee address; City, State, Zip Code 11655 Research Blvd 11655 R	EXPENDITURE	(See Categories listed at the top		(b) Description				
expenditure to benefit C/OH  PAYMENT  (a) Amount Charged \$35.23  (b) Date of Charge 03/01/2024  PAYEE  (a) Payee name (b) Payee address; City, State, Zip Code 11655 Research Blvd  Shell Oil Austin, TX 78759  PURPOSE OF EXPENDITURE (See Categories listed at the top of this schedule) Travel In District  (c) Check if travel outside of Texas. Complete Schedule T.  Complete ONLY if direct  (c) Date(s) Credit Card Issuer Paid 03/01/2024  (d) Date(s) Credit Card Issuer Paid 03/01/2024  (b) Payee address; City, State, Zip Code 11655 Research Blvd  (b) Description  Fuel during campaign travel		<u> </u>	· · · · · · · · · · · · · · · · · · ·	le T. Check if Austin, TX, officeholder living expense				
\$35.23  O3/01/2024  PAYEE  (a) Payee name  Shell Oil  PURPOSE OF EXPENDITURE  X Political  Non-Political  Non-Political  Complete ONLY if direct  Candidate/Officeholder name  O3/01/2024  (b) Payee address; City, State, Zip Code 11655 Research Blvd  Austin, TX 78759  (b) Description  Fuel during campaign travel  Check if Austin, TX, officeholder living expense  Office sought  O3/01/2024		Candidate/Officeholder	name Office	e sought	Office held			
Shell Oil    Shell Oil   Austin, TX 78759	PAYMENT	1 ` '	l ` ′		r Paid			
EXPENDITURE    X   Political	PAYEE			11655 Research Blvd	City, State, Zip Code			
Complete ONLY if direct	EXPENDITURE	(See Categories listed at the top	of this schedule)					
	Non-Political	(c) Check if travel outside	ule T. Check if Austin, TX, officeholder living expense					
		Candidate/Officeholder	name Office	e sought	Office held			

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commis	sion Filers)			
	Sch: 13/36 Rpt: 47/70	Harris Davila, Caro	line (The Honorable)			00085754					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZ IDITURES GED TO A CRE	\$					
6	PAYMENT	(a) Amount Charged \$21.00	(b) Date of Charge 03/04/2024	(c) Date(s 03/04/20	) Credit Card Is 124	ssuer Paid					
7	PAYEE	(a) Payee name Plaza Saltillo		(b) Payee 901 E 15 Austin, T	ith ST	City,	State,	Zip Code			
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri		aign travel					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austi	n, TX, officeholder living ex	pense				
	Office sought C/OH Candidate/Officeholder name Office sought				Office held						
	PAYMENT	(a) Amount Charged \$16.92	(b) Date of Charge 03/04/2024	(c) Date(s 03/04/20	) Credit Card Is 124	ssuer Paid					
	PAYEE	(a) Payee name Uber		(b) Payee 1515 3rd		City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austi	n, TX, officeholder living ex	pense				
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$12.78	(b) Date of Charge 03/04/2024	(c) Date(s 03/04/20	) Credit Card Is 124	ssuer Paid					
	PAYEE	(a) Payee name  Dropbox		(b) Payee 1800 Ow San Fran		City, 1158	State,	Zip Code			
	PURPOSE OF EXPENDITURE  X Political Non-Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Descri Software	for campaig						
$\vdash$		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austi	n, TX, officeholder living ex Office held	pense				
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	name Office	z souyni		Onice field					
ı											

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	sion Filers)			
	Sch: 14/36 Rpt: 48/70	Harris Davila, Caro	line (The Honorable)			00085754					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDI	\$					
6	PAYMENT	(a) Amount Charged \$30.82	(b) Date of Charge 03/04/2024	(c) Date(s) 03/04/20	) Credit Card Issue 24	er Paid					
7	PAYEE	(a) Payee name Hill Country Spring		(b) Payee 10019 S Austin, T	I-35 Frontage R	City, d	State,	Zip Code			
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Descri							
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX	(, officeholder living ex	pense				
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$11.82	(b) Date of Charge 03/07/2024	(c) Date(s) 03/07/20	) Credit Card Issue 24	er Paid					
	PAYEE	(a) Payee name Uber		(b) Payee 1515 3rd San Fran		City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX	(, officeholder living ex	pense				
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$16.04	(b) Date of Charge 03/08/2024	(c) Date(s) 03/08/20	) Credit Card Issue 24	er Paid					
	PAYEE	(a) Payee name Uber		(b) Payee 1515 3rd San Frar		City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE  X Political Non-Political	(a) Category (See Categories listed at the top Travel In District	•	(b) Descri	ng campaign tri						
$\vdash$	Ш	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Cneck if Austin, TX	Office held	pense				
е	Complete ONLY if direct expenditure to benefit C/OH	Januluale/Officeriolder	name Office	Jougni		Onice Helu					
I											

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
Sch: 15/36 Rpt: 49/70	Harris Davila, Carol	line (The Honorable)		00085754					
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED						
ISSUER	see pr	revious	EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b>					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid					
	\$85.78	03/11/2024	03/11/2024						
7 PAYEE	(a) Payee name	I	(b) Payee address;	City, State, Zip Code					
	Uber Eats		1515 3rd St						
			San Francisco, CA 94158						
8 PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE  X Political	(See Categories listed at the top Food/Beverage Exper		Meal during campaign tra	vel					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense					
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issue 03/11/2024			r Paid					
	\$3.28	03/11/2024	03/11/2024						
PAYEE	E (a) Payee name (b) Payee addre		(b) Payee address;	City, State, Zip Code					
	Libor		1515 3rd St						
	Uber								
	( ) -		San Francisco, CA 94158						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
l <u> </u>	Travel In District	, , , , , , , , , , , , , , , , , , ,	Ride during campaign trip						
X Political	<u> </u>		<u> </u>						
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Daid					
FAIMENI	` '		03/11/2024	r alu					
	\$37.88	03/11/2024							
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code					
			1515 3rd St						
	Uber								
			San Francisco, CA 94158						
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top  Travel In District	or this schedule)	Ride during campaign trip						
X Political									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense					
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held					
expenditure to benefit C/OH									

### SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 16/36 Rpt: 50/70	Harris Davila, Caro	line (The Honorable)			00085754		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$45.98	(b) Date of Charge 03/11/2024	(c) Date(s 03/11/20	) Credit Card Issuer 124	Paid		
7	PAYEE	(a) Payee name Uber		(b) Payee 1515 3rd		City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
<b>9</b>	expenditure to benefit C/OH				Office held			
	PAYMENT	(a) Amount Charged \$21.00	(b) Date of Charge 03/18/2024	(c) Date(s 03/18/20	) Credit Card Issuer 124	Paid		
	PAYEE	(a) Payee name  Mailchimp		(b) Payee address; 405 N Angier Ave. NE Atlanta, GA 30308		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Campaign mailing software				
	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 \$7.10	(b) Date of Charge 03/18/2024	(c) Date(s 03/18/20	) Credit Card Issuer )24	<sup>*</sup> Paid		
	PAYEE	(a) Payee name Uber		(b) Payee 1515 3rd San Frar	•	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri Ride dur	ption ing campaign trip			
L	Non-Political					officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
ı								

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filer	rs)	
Sch: 17/36 Rpt: 51/70	Harris Davila, Caro	line (The Honorable)		00085754		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$7.39	(b) Date of Charge 03/18/2024	(c) Date(s) Credit Card Issue 03/18/2024	r Paid		
7 PAYEE	(a) Payee name Uber		(b) Payee address; 1515 3rd St San Francisco, CA 94158	City, State, Zip C	ode	
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Ride during campaign trip	)		
Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.	<b>_</b>	, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	Office held			
PAYMENT	(a) Amount Charged \$14.98	(b) Date of Charge 03/18/2024	(c) Date(s) Credit Card Issue 03/18/2024	r Paid		
PAYEE	Uber		(b) Payee address; 1515 3rd St	City, State, Zip C	ode	
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	San Francisco, CA 94158 (b) Description Ride during campaign trip			
Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.	<b>_</b>	, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$17.96	(b) Date of Charge 03/18/2024	(c) Date(s) Credit Card Issue 03/18/2024	r Paid		
PAYEE	(a) Payee name Uber		(b) Payee address; 1515 3rd St San Francisco, CA 94158	City, State, Zip C	ode	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Ride during campaign trip			
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Öffice	e sought	Office held		
I						

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)
Sch: 18/36 Rpt: 52/70	Harris Davila, Caro	line (The Honorable)			00085754		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$8.91	(b) Date of Charge 03/18/2024	(c) Date(s) 0 03/18/2024	Credit Card Issuer 4	r Paid		
7 PAYEE	(a) Payee name Uber		(b) Payee at 1515 3rd S		City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descripti	<u> </u>			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought				Office held			
PAYMENT	(a) Amount Charged \$61.91	(b) Date of Charge 03/20/2024	(c) Date(s) 0 03/20/2024	Credit Card Issuei 4	r Paid		
PAYEE	(a) Payee name Uber Eats		(b) Payee at 1515 3rd S		City,	State,	Zip Code
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	· ·	(b) Description  Meal during campaign travel				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Γ	Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	<b>-</b>	Office held		
PAYMENT	(a) Amount Charged \$7.12	(b) Date of Charge 03/22/2024	(c) Date(s) 0 03/22/2024	Credit Card Issuei 4	r Paid		
PAYEE	(a) Payee name Uber		(b) Payee at 1515 3rd S		City,	State,	Zip Code
PURPOSE OF (a) Category  EXPENDITURE (See Categories listed at the top of this schedule)  Travel In District		(b) Descripti					
Non-Political	(8)			Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Com	mission Filers)			
Sch: 19/36 Rpt: 53/70	Harris Davila, Caro	line (The Honorable)		00085754				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$17.05	03/25/2024	03/25/2024					
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, Stat	te, Zip Code			
	Zoom		55 Almaden Boulevard					
			San Jose, CA 95113					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
X Political	Office Overhead/Ren	,	Online meeting software					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$6.60	03/25/2024	03/25/2024					
PAYEE (a) Payee name			(b) Payee address;	City, Stat	te, Zip Code			
	Uber		1515 3rd St					
			San Francisco, CA 94158	3				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description					
X Political	Travel In District	of this schedule)	Ride during campaign trip	)				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$7.73	03/25/2024	03/25/2024					
PAYEE	(a) Payee name	1	(b) Payee address;	City, Stat	te, Zip Code			
			1515 3rd St					
	Uber							
			San Francisco, CA 94158	3				
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top  Travel In District	of this schedule)	Ride during campaign trip	)				
X Political								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	ule T. Check if Austin, TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held				

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)			
	Sch: 20/36 Rpt: 54/70	Harris Davila, Caro	line (The Honorable)			00085754					
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF EXPENDIT CHARGED CARD		\$					
6	PAYMENT	(a) Amount Charged \$8.97	(b) Date of Charge 03/25/2024	(c) Date(s) Cre 03/25/2024	edit Card Issuer	Paid					
7	PAYEE	(a) Payee name Uber		(b) Payee add 1515 3rd St		City,	State,	Zip Code			
Ļ		(-) O-t			co, CA 94158						
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Ride during	n campaign trip						
	Non-Political	( )	of Texas. Complete Schedule T.		Check if Austin, TX, o	officeholder living expe	ense				
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
е	expenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged \$13.91	(b) Date of Charge 03/25/2024	(c) Date(s) Credit Card Issuer 03/25/2024		Paid					
	PAYEE	(a) Payee name	•	(b) Payee add	ress;	City,	State,	Zip Code			
		Uber		1515 3rd St							
				San Francisco, CA 94158							
	PURPOSE OF EXPENDITURE    Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Ride during	n campaign trip						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX. o	officeholder living expe	ense				
┝	Complete ONLY if direct	Candidate/Officeholder	·	e sought		Office held					
e	expenditure to benefit C/OH			· ·							
	PAYMENT	(a) Amount Charged \$24.52	(b) Date of Charge 03/28/2024	(c) Date(s) Cre 03/28/2024	edit Card Issuer	Paid					
	PAYEE	(a) Payee name SquareSpace, Inc.		(b) Payee addr 8 Clarkson Si New York Cit		City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Online camp							
L	Non-Political	(6) 🗀				officeholder living expe	ense				
е	Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name Office sought					Office held					

### SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

		The Inst	ruction Guide explains how	to complete	this form.	(1 11 11 11 11 11 11 11 11 11 11 11 11 1	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)
	Sch: 21/36 Rpt: 55/70	Harris Davila, Caro	line (The Honorable)			00085754		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$21.64	(b) Date of Charge 04/01/2024	04/01/20		Paid		
7	PAYEE	(a) Payee name  Adobe, Inc.		(b) Payee 345 Park		City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TY	officeholder living exp	ense	
9	Complete ONLY if direct	Candidate/Officeholder		e sought	CHECK II Austili, 17,	Office held		
	expenditure to benefit C/OH			J				
	PAYMENT	(a) Amount Charged \$10.83	(b) Date of Charge 04/02/2024	(c) Date(s 04/02/20	) Credit Card Issuer 124	Paid		
	PAYEE	(a) Payee name  Hill Country Spring		(b) Payee address; 10019 S I-35 Frontage Ro		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		Austin, T (b) Descri Water fo				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$8.41	(b) Date of Charge 04/04/2024	(c) Date(s 04/04/20	) Credit Card Issuer 124	Paid		
	PAYEE	(a) Payee name Race Trac		(b) Payee 6607 Cir Austin, T	cle S Rd	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri Fuel duri	ption ng campaign trav	rel		
L	Non-Political	100				officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
ı								

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)		
Sch: 22/36 Rpt: 56/70	Harris Davila, Caro	line (The Honorable)		00085754				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged \$25.68	(b) Date of Charge 04/04/2024	(c) Date(s) Credit Card Issuel 04/04/2024	Paid				
7 PAYEE	(a) Payee name  Race Trac		(b) Payee address; 6607 Circle S Rd	City,	State,	Zip Code		
	( ) 5 :		Austin, TX 78745					
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Fuel during campaign trav	rel				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense			
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$12.78	(b) Date of Charge 04/04/2024	(c) Date(s) Credit Card Issuer 04/04/2024	<sup>•</sup> Paid				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Dropbox		1800 Owens St					
			San Francisco, CA 94158					
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Software for campaign					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chack if Austin TX	officeholder living expe	nse			
Complete ONLY if direct	Candidate/Officeholder	·	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$7.73	(b) Date of Charge 04/05/2024	(c) Date(s) Credit Card Issuer 04/05/2024	Paid				
PAYEE	(a) Payee name Uber		(b) Payee address; 1515 3rd St San Francisco, CA 94158	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE  X Political	EXPENDITURE (See Categories listed at the top of this schedule)  Travel In District		(b) Description Ride during campaign trip					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete th	is form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 23/36 Rpt: 57/70	Harris Davila, Caro	line (The Honorable)			00085754		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED VITURES ED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$11.96	(b) Date of Charge 04/05/2024	(c) Date(s) ( 04/05/202	Credit Card Issuer 4	Paid		
7	PAYEE	(a) Payee name Uber		(b) Payee a 1515 3rd S San France		City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descript				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH				Office held			
	PAYMENT	(a) Amount Charged \$7.73	(b) Date of Charge 04/05/2024	(c) Date(s) ( 04/05/202	Credit Card Issuer 4			
	PAYEE	(a) Payee name Uber		(b) Payee address; 1515 3rd St		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descript	isco, CA 94158 ion g campaign trip			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Γ	Check if Austin, TX,	officeholder living expe	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$7.25	(b) Date of Charge 04/08/2024	(c) Date(s) ( 04/08/202	Credit Card Issuer 4	Paid		
	PAYEE	(a) Payee name Uber		(b) Payee a 1515 3rd S San Franc		City,	State,	Zip Code
	PURPOSE OF	(a) Category		(b) Descript	ion			
	EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Ride durin	g campaign trip			
	X Political	L						
	Non-Political	(7)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
Г		•						

### SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete thi	s form.		.,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 24/36 Rpt: 58/70	Harris Davila, Carol	line (The Honorable)			00085754		
4 CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$48.55	(b) Date of Charge 04/29/2024	(c) Date(s) C 04/29/2024	redit Card Issuei 1	Paid		
7 PAYEE	(a) Payee name  Capitol Grill		(b) Payee ac 1001 Cong	ress Ave	City,	State,	Zip Code
	( ) -		Austin, TX				
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description	on g campaign tra	vel		
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 so			e sought		Office held		
PAYMENT	(a) Amount Charged \$24.52	(b) Date of Charge 04/29/2024	(c) Date(s) C 04/29/2024	redit Card Issuei 1	Paid		
PAYEE	(a) Payee name SquareSpace, Inc.		(b) Payee address; 8 Clarkson St		City,	State,	Zip Code
				City, NY 10014			
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	-	Office held		
PAYMENT	(a) Amount Charged \$445.07	(b) Date of Charge 04/29/2024	(c) Date(s) C 04/29/2024	redit Card Issuei 1	Paid		
PAYEE	(a) Payee name  Quik Print		(b) Payee ac 410 Congre Austin, TX	ess Ave	City,	State,	Zip Code
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description  Printing for	on campaign sup	plies		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
		<u> </u>					

### SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense

	Candidate/Officeriolder/Folitica	3	ruction Guide explains how	-	Trien (einer a category i	iot iisteu ai	oove)		
1	Total pages Schedule F4:		·	·	3 Filer ID (Ethics	Commiss	sion Filers)		
	Sch: 25/36 Rpt: 59/70		line (The Honorable)		00085754		,		
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6	PAYMENT	(a) Amount Charged \$17.05	(b) Date of Charge 04/30/2024	(c) Date(s) Credit Card Issuel 04/30/2024	r Paid				
7	PAYEE	(a) Payee name Zoom		(b) Payee address; 55 Almaden Boulevard San Jose, CA 95113	City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE  X Political		gory Jories listed at the top of this schedule) Overhead/Rental Expense  (b) Description Online meeting software						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exper	ise			
9 Complete ONLY if direct candidate/Officeholder name Office sought expenditure to benefit C/OH			e sought	Office held					
	PAYMENT	(a) Amount Charged \$21.64	(b) Date of Charge 04/30/2024	(c) Date(s) Credit Card Issue 04/30/2024	r Paid				
	PAYEE (a) Payee name  Adobe, Inc.			(b) Payee address; 345 Park Ave San Jose, CA 95110	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Software for campaign					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exper	ise			
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
	PAYMENT	(a) Amount Charged \$21.00	(b) Date of Charge 05/01/2024	(c) Date(s) Credit Card Issue 05/01/2024	r Paid				
	PAYEE (a) Payee name  Mailchimp		(b) Payee address; 405 N Angier Ave. NE Atlanta, GA 30308	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE  X Political	EXPENDITURE (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense		(b) Description Campaign mailing software					
	Non-Political				officeholder living exper	ise			
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	e sought	Office held					
I									

### SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete thi	s form.		,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commis	sion Filers)
Sch: 26/36 Rpt: 60/70	Harris Davila, Carol	line (The Honorable)			00085754		
4 CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$10.83	(b) Date of Charge 05/02/2024	(c) Date(s) C 05/02/2024	redit Card Issuer I	r Paid		
7 PAYEE	(a) Payee name  Hill Country Spring			35 Frontage Rd	City,	State,	Zip Code
	( ) 5		Austin, TX				
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Water for p	on olitical office			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$8.93	(b) Date of Charge 05/06/2024	(c) Date(s) C 05/06/2024	redit Card Issuer I	Paid		
PAYEE	(a) Payee name Uber		(b) Payee address; 1515 3rd St		City,	State,	Zip Code
				sco, CA 94158			
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Ride during campaign trip				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	- Γ	Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$12.78	(b) Date of Charge 05/06/2024	(c) Date(s) C 05/06/2024	redit Card Issuer I	r Paid		
PAYEE	(a) Payee name  Dropbox		(b) Payee ad 1800 Ower San Franci	•	City,	State,	Zip Code
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Software for	on or campaign			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
		<u> </u>					

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	3 Filer ID (Ethics Com	mission Filers)							
Sch: 27/36 Rpt: 61/70	Harris Davila, Caro	00085754							
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$					
6 PAYMENT	(a) Amount Charged \$7.73	(b) Date of Charge 05/14/2024	(c) Date(s) Credit Card Issuer 05/14/2024	· Paid					
7 PAYEE	(a) Payee name (b) Payee address; Uber 1515 3rd St			City, Stat	e, Zip Code				
			San Francisco, CA 94158						
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Ride during car								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense					
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held					
PAYMENT	(a) Amount Charged \$158.00	(b) Date of Charge 05/14/2024	(c) Date(s) Credit Card Issuer 05/14/2024	Paid					
PAYEE	(a) Payee name		(b) Payee address;	City, Stat	e, Zip Code				
	Texas GOP		1108 Lavaca St, Suite 110	0 # 623					
			Austin, TX 78701						
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Event registration						
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		e sought	Office held					
PAYMENT	(a) Amount Charged \$21.00	(b) Date of Charge 05/16/2024	(c) Date(s) Credit Card Issuer 05/16/2024	Paid					
PAYEE	(a) Payee name Mailchimp		(b) Payee address; 405 N Angier Ave. NE Atlanta, GA 30308	City, Stat	e, Zip Code				
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	,	(b) Description Campaign mailing software						
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					

### SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense
Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.	(9)	,
1 Total pages Schedule F4:	3 Filer ID (Ethics Commission Filers)				
Sch: 28/36 Rpt: 62/70	Harris Davila, Caro	line (The Honorable)		00085754	
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	
6 PAYMENT	(a) Amount Charged \$900.00	(b) Date of Charge 05/22/2024	(c) Date(s) Credit Card Issue 05/22/2024	r Paid	
7 PAYEE  (a) Payee name  Advantage Direct Consulting  8 PURPOSE OF  (a) Category  (See Categories listed at the top of this schedule)			(b) Payee address; 1421 Prince Street Suite 220 Alexandria, VA 22314 (b) Description	City,	State, Zip Code
X Political	Advertising Expense	, , , , , , , , , , , , , , , , , , ,	Phone banking and block	waiking Sollware	
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expen	ise
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held	
PAYMENT	(a) Amount Charged \$28.97	(b) Date of Charge 05/22/2024	(c) Date(s) Credit Card Issue 05/22/2024	r Paid	
PAYEE	(a) Payee name  Amazon.com		(b) Payee address; 410 Terry Ave	City,	State, Zip Code
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		Seattle, WA 98109 (b) Description Supplies for political office	9	
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expen	ise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held	
PAYMENT	(a) Amount Charged \$25.93	(b) Date of Charge 05/23/2024	(c) Date(s) Credit Card Issue 05/23/2024	r Paid	
PAYEE (a) Payee name  DCA Saysibon Pier			(b) Payee address; 2401 Ronald Reagan Wa Arlington, VA 22202	City, shington Nationa	State, Zip Code al Airport
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Meal during campaign tra	vel	
Non-Political  Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T. rname Office	Check if Austin, TX, e sought	officeholder living expen	se

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethio	cs Commiss	sion Filers)					
Sch: 29/36 Rpt: 63/70	Harris Davila, Caro	line (The Honorable)	00085754						
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES ED TO A CREDIT	\$				
6 PAYMENT	(a) Amount Charged \$17.05	(b) Date of Charge 05/23/2024	(c) Date(s) Credit Card Issuer 05/23/2024		r Paid				
7. DAVEE	·	35,25,252							
7 PAYEE	(a) Payee name		(b) Payee ac		City,	State,	Zip Code		
	Zoom		55 Almade	n Boulevard					
			San Jose,						
8 PURPOSE OF	(a) Category	of this cohodula)	(b) Descripti	on eting software					
EXPENDITURE  X Political		(See Categories listed at the top of this schedule) Office Overhead/Rental Expense							
Non-Political	(c) Check if travel outside	(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, of				ense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	_	Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	1 ' ' ' ' ' '	Credit Card Issuer	r Paid				
	\$5.25	05/23/2024	05/23/2024	4					
PAYEE	(a) Payee name		(b) Payee ac	ddroco:	City,	State,	Zip Code		
'**	(a) rayee name			idential Blvd	City,	State,	Zip Code		
	Austin Airport		3000 F1631	ideriliai biva					
			Austin, TX 78719						
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top Food/Beverage Exper	· ·	Refreshments during campaign travel						
X Political	1 Ood/Deverage Exper	1130							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	r Paid				
	\$1,518.77	05/27/2024	05/27/2024	4					
PAYEE	(a) Payee name		(b) Payee ac	ddress.	City,	State,	Zip Code		
'	(a) I ayee name		101 Comm		City,	State,	Zip Couc		
	4Imprint		TOT COMM	icree St					
			Oshkosh, \	WI 54901					
PURPOSE OF	(a) Category		(b) Descripti						
EXPENDITURE	(See Categories listed at the top	of this schedule)	Printing for	campaign mai	ler				
X Political	Advertising Expense								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OH									

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME 3					3 Filer ID (Ethics Commission Filers)				
Sch: 30/36 Rpt: 64/70	Harris Davila, Caro	line (The Honorable)			00085754					
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid					
	\$24.52	05/28/2024	05/28/202	24						
7 PAYEE	(a) Payee name		(b) Payee a	ıddress;	City,	State,	Zip Code			
	SquareSpace, Inc.		8 Clarkson							
				City, NY 10014						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript							
X Political	Office Overhead/Rent		Online car	mpaigning						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	[	Check if Austin, TX,	officeholder living exp	ense				
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid 05/29/2024							
	\$194.48	05/29/2024	05/29/202	.4						
PAYEE (a) Payee name			(b) Payee a	ıddress;	City,	State,	Zip Code			
	Party City Bopis		2601 N In	terstate 35						
			Round Rock, TX 78664							
PURPOSE OF	(a) Category	of Alvin and a dud a N	(b) Descript							
EXPENDITURE  X Political	(See Categories listed at the top Office Overhead/Rent		Supplies for campaign usage							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Г	Check if Austin, TX,	officeholder living exp	ense				
Complete ONLY if direct	Candidate/Officeholder		e sought		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 05/31/202	Credit Card Issuer	Paid					
	\$85.77	05/31/2024								
PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code			
	Chiel Fil A		2350 E Pa	alm Valley Blvd						
	Chick-Fil-A									
				ck, TX 78665						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript							
l <u> </u>	Food/Beverage Exper		ivieai durir	ng campaign trav	vei					
X Political										
Non-Political	(*) <b>—</b>	of Texas. Complete Schedule T.	[	Check if Austin, TX,	officeholder living exp	ense				
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
expenditure to benefit C/OH										

### SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

	The Insti	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,	
1 Total pages Schedule F4: 2 FILER NAME					3 Filer ID (Ethics Commission Filers)			
Sch: 31/36 Rpt: 65/70	Harris Davila, Caroline (The Honorable)				00085754			
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$			
6 PAYMENT	(a) Amount Charged \$21.64	(b) Date of Charge 05/31/2024	(c) Date(s) Credit Card Issuer Paid 05/31/2024					
7 PAYEE	(a) Payee name  Adobe, Inc.		(b) Payee 345 Park		City,	State,	Zip Code	
8 PURPOSE OF	(a) Category		(b) Descri					
EXPENDITURE  X Political	(See Categories listed at the top Office Overhead/Rent		1 ' '	for campaign				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$12.78	(b) Date of Charge 06/04/2024	(c) Date(s) 06/04/20	Credit Card Issue 24	r Paid			
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code	
	Dropbox		1800 Owens St					
			San Francisco, CA 94158					
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Software	otion for campaign				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	I.	Check if Austin, TX,	, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
PAYMENT	(a) Amount Charged \$30.82	(b) Date of Charge 06/04/2024	(c) Date(s) 06/04/20	Credit Card Issue 24	r Paid			
PAYEE	(a) Payee name Hill Country Spring		(b) Payee 10019 S Austin, T	I-35 Frontage Ro	City, d	State,	Zip Code	
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Water for	otion political office				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
Sch: 32/36 Rpt: 66/70	Harris Davila, Caro	line (The Honorable)		00085754					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid					
	\$25.00	06/13/2024	06/13/2024						
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code					
	Hutto Chamber of C	Commerce	122 East St						
			Hutto, TX 78634						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	nnoign stoff					
X Political	Fees	,	Event registration for can	npaign stan					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	K, officeholder living expense					
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid					
	\$625.96	06/17/2024	06/17/2024						
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code					
	Southwest Airlines		2702 Love Field Dr						
			Dallas, TX 75235						
PURPOSE OF	(a) Category	of their coloradials)	(b) Description						
EXPENDITURE 	(See Categories listed at the top  Travel In District	of this schedule)	Airfaire for campaign travel						
X Political									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	K, officeholder living expense					
Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought Office held						
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 06/17/2024	er Paid					
	\$21.00	06/17/2024	00/17/2024						
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code					
			405 N Angier Ave. NE						
	Mailchimp								
			Atlanta, GA 30308						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodule)	(b) Description						
	Office Overhead/Rent	,	Campaign mailing softwa	are					
X Political		· 							
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.	<u> </u>	(, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held					
	,-								

# SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(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

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

Candidate/Officeholder/Politica				THER (enter a category	not listed at	oove)					
4 7	The Instruction Guide explains how to complete this form.      2   FILER NAME   3   Filer   D (Ethics Commission Filers)										
1 Total pages Schedule F4:		Í ,									
Sch: 33/36 Rpt: 67/70	Harris Davila, Carol	00085754									
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES	\$							
ISSUER	see pi	revious	CHARGED TO A CREDIT								
			CARD								
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid							
	\$67.48	06/17/2024	06/17/2024								
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code					
			1515 3rd St								
	Uber										
			San Francisco, CA 94158								
8 PURPOSE OF	(a) Category		(b) Description								
EXPENDITURE	(See Categories listed at the top  Travel In District	of this schedule)	Ride during campaign trip								
X Political	Traver in District										
Non-Political	(c) Check if travel outside	Check if Austin, TX,	officeholder living expe	ense							
9 Complete ONLY if direct	Candidate/Officeholder		e sought	Office held							
expenditure to benefit C/OH			· ·								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid							
	\$30.92	06/18/2024	06/18/2024								
	φ30.92	00/10/2024									
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code					
	(1)		1800 Seaport Blvd	- 5,	,						
	Zazzle, Inc.										
			Redwood City, CA 94063								
PURPOSE OF	(a) Category		(b) Description								
EXPENDITURE	(See Categories listed at the top	of this schedule)	Custom campaign ware								
X Political	Advertising Expense										
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense						
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held							
expenditure to benefit C/OH											
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid							
	\$75.43	06/18/2024	06/18/2024								
PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code					
			1800 Seaport Blvd								
	Zazzle, Inc.										
			Redwood City, CA 94063								
PURPOSE OF	(a) Category		(b) Description								
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Custom campaign ware								
X Political	Travertising Expense										
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense						
Complete ONLY if direct	Candidate/Officeholder		e sought	Office held							
expenditure to benefit C/OH											

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
Sch: 34/36 Rpt: 68/70	Harris Davila, Caro		00085754						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid					
	\$9.99	06/18/2024	06/18/2024						
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Z	Zip Code				
	Door Dash		303 2nd Street						
			San Fransisco, CA 94103	3					
8 PURPOSE OF EXPENDITURE	(a) Category	of this schodulo)	(b) Description						
X Political	1 ' '	(See Categories listed at the top of this schedule) Food/Beverage Expense  Meal during campaign trav							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense					
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid					
	\$26.25	06/20/2024	06/20/2024						
PAYEE	(a) Payee name		(b) Payee address;	City, State, Z	Zip Code				
	Leander Area Repu	ublican Women	PO Box 551						
			Leander, TX 78646						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description  Event registration for campaign staff						
X Political	1 003								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense					
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid					
	\$625.00	06/21/2024	06/21/2024						
PAYEE	(a) Payee name	ı	(b) Payee address;	City, State, Z	Zip Code				
			2900 Crystal Dr #6						
	American Legislativ	e Exchange							
			Arlington, VA 22202						
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description						
EXPENDITURE	Fees	of this scriedule)	Registration fee						
X Political									
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.	<u> </u>	, officeholder living expense					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held					
	·	-	·	-					

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	otal pages Schedule F4: 2 FILER NAME					3 Filer ID (Ethics Commission Filers)			
	Sch: 35/36 Rpt: 69/70	Harris Davila, Caro	line (The Honorable)				00085754			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	NDI	F UNITEMIZED TURES D TO A CREDIT	\$			
6	PAYMENT	(a) Amount Charged \$122.21	(b) Date of Charge 06/24/2024	(c) Date(s 06/24/20		redit Card Issuer I	Paid			
7	PAYEE	(a) Payee name (b) Payee address; 407 E. Fort Street  Detroit, MI 48226			City,	State,	Zip Code			
8	PURPOSE OF EXPENDITURE  Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense  (b) Description Gift for constitutents								
	Non-Political		of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought			Office held			
е	xpenditure to benefit C/OH		1	T						
	PAYMENT	(a) Amount Charged \$17.05	(b) Date of Charge 06/24/2024	(c) Date(s 06/24/20		redit Card Issuer I	Paid			
	PAYEE (a) Payee name Zoom				de	dress; n Boulevard CA 95113	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	iptio					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Г	Check if Austin, TX,	officeholder living exp	ense		
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held			
	PAYMENT	(a) Amount Charged \$123.36	(b) Date of Charge 06/26/2024	(c) Date(s 06/26/20		redit Card Issuer I	<sup>*</sup> Paid			
	PAYEE	(a) Payee name Teleflora			Ves	dress; st Olympic Blvd es, CA 90064	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial	s Expense	(b) Descri Gift for c		stiuents				
$ldsymbol{ldsymbol{ldsymbol{eta}}}$	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	0 001.554	L	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										

# SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(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	/ - Gift/Awar	erage Expense ds/Memorials Expense vices	Printing Expense T	Fravel in District Fravel Out of District DTHER (enter a category not liste	ed above)
L		The Ins	truction Guide explains h	low to complete this form.		
1	Total pages Schedule F4:	3 Filer ID (Ethics Com	mission Filers)			
l	Sch: 36/36 Rpt: 70/70	Harris Davila, Card	oline (The Honorable)	)	00085754	
4	CREDIT CARD	Name of fina	ancial institution	5 TOTAL OF UNITEMIZED	)	
	ISSUER	See r	orevious	EXPENDITURES	<b> \$</b>	
l		000 }	7011040	CHARGED TO A CREDITE CARD	'	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	 er Paid	
				06/28/2024	o	
l		\$24.52	06/28/2024			
<del> -</del>	PAYEE	(a) Dayoo nama		(b) Payee address;	City, Stat	o Zin Codo
ľ	TAILL	(a) Payee name			City, Stat	e, Zip Code
l		SquareSpace, Inc.		8 Clarkson St		
l				Name Of the NIV 1001	4	
<u> </u>	DUDDOSE 05	(a) Catagoni		New York City, NY 10014 (b) Description	4	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to	o of this schedule)	' '		
l		Office Overhead/Rer	•	Online campaigning		
l	X Political					
	Non-Political	(c) Check if travel outside	e of Texas. Complete Schedule		K, officeholder living expense	
	Complete ONLY if direct	Candidate/Officeholde	r name O	ffice sought	Office held	
ex	penditure to benefit C/OH					
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