

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00085648	2 Total pages filed: 45
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI David A.	OFFICE USE ONLY	
	NICKNAME LAST SUFFIX Covey	Date Received ELECTRONICALLY FILED 07/15/2024	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE PO Box 722 Mauriceville, TX 77626		Date Hand-delivered or Date Postmarked
			Receipt # Amount
			Date Processed
			Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mark		
	NICKNAME LAST SUFFIX Covey		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 8774 Earsel Rd Orange, TX 77632		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (409) 221-9995		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 05/19/2024 06/30/2024		
10 ELECTION	ELECTION DATE Month Day Year 05/28/2024		ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) State Representative District 21	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2 of 45

13 C / OH NAME Covey, David A.	14 Filer ID (Ethics Commission Filers) 00085648
---------------------------------------	---

15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 25.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 95,854.50
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 268,574.15
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 35,417.70
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

David A. Covey

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

3 of 45

18 FILER NAME Covey, David A.		19 Filer ID (Ethics Commission Filers) 00085648
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 77,731.81
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 18,122.69
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 268,574.15
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/29 Rpt: 4/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Scott <hr/> 6 Contributor address; City; State; Zip Code chicago, IL 60657	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexandra, Deborah <hr/> Contributor address; City; State; Zip Code Stow, OH 44224	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almgrem, Kim <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78028	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Babcock, Larry <hr/> Contributor address; City; State; Zip Code Elms Creeks, NE 68836	Amount of Contribution (\$) \$95.70
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Angie <hr/> Contributor address; City; State; Zip Code Terrell, TX 75160	Amount of Contribution (\$) \$47.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/29 Rpt: 5/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barekman, Cheryl <hr/> 6 Contributor address; City; State; Zip Code Eules, TX 76039	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnhart , Ann <hr/> Contributor address; City; State; Zip Code Katy, TX 77493	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnhart, Roger <hr/> Contributor address; City; State; Zip Code Odessa, TX 79764	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Barnhart Bolt
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, James <hr/> Contributor address; City; State; Zip Code Vianna, VA 22181	Amount of Contribution (\$) \$47.70
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boone, AiLeen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78259	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/29 Rpt: 6/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breaux, Jonathan <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77705	7 Amount of Contribution (\$) \$18.90
8 Principal occupation / Job title (See Instructions) teacher		9 Employer (See Instructions) Nederland ISD
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Irless <hr/> Contributor address; City; State; Zip Code Paducah, TX 79248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Sandra <hr/> Contributor address; City; State; Zip Code Middleton, TN 38052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Tim <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$4.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Rick <hr/> Contributor address; City; State; Zip Code Roanoke, VA 24018	Amount of Contribution (\$) \$23.70
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/29 Rpt: 7/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cairns, John <hr/> 6 Contributor address; City; State; Zip Code Mount Belvieu, TX 77580	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cappel, Jason <hr/> Contributor address; City; State; Zip Code Boliver, TX 77650	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) ATT
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caron, Deborah <hr/> Contributor address; City; State; Zip Code Mission, TX 78574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, David <hr/> Contributor address; City; State; Zip Code Temple, TX 76504	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Coy <hr/> Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$23.70
Principal occupation / Job title (See Instructions) Supervisor		Employer (See Instructions) Shell Oil

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/29 Rpt: 8/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Checo, Pedro <hr/> 6 Contributor address; City; State; Zip Code Woodlands, TX 77380	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Software		9 Employer (See Instructions) PSE
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, David <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$95.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colemanares, Don <hr/> Contributor address; City; State; Zip Code Spring Branch, TX 78070	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Deborah <hr/> Contributor address; City; State; Zip Code Cartersville, GA 30120	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Costello, Steven <hr/> Contributor address; City; State; Zip Code Lake Jackson, TX 77566	Amount of Contribution (\$) \$23.70
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Silberman Law Firm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/29 Rpt: 9/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Covey, Lydia (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Orange, TX 77632	
8 Principal occupation / Job title (See Instructions) secretary		9 Employer (See Instructions) Maplecrest Baptist
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cringeane, George	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Renton, WA 98055	
Principal occupation / Job title (See Instructions) Security		Employer (See Instructions) Allied
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutler, Beverly	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Pasadena, TX 77503	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dannenmaier, Joe	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darr, Bev	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Polk City, ID 50226	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/29 Rpt: 10/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deboyce, Nocholas <hr/> 6 Contributor address; City; State; Zip Code Garfield, NJ 07026	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Claims Adjuster		9 Employer (See Instructions) AG Admin
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dehart, Kemberly <hr/> Contributor address; City; State; Zip Code Witchata Falls, TX 76302	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devoll, George <hr/> Contributor address; City; State; Zip Code Red Oak, TX 75154	Amount of Contribution (\$) \$95.70
Principal occupation / Job title (See Instructions) Security		Employer (See Instructions) Allied
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorman, DeeAnn <hr/> Contributor address; City; State; Zip Code Forrest Park, IL 60130	Amount of Contribution (\$) \$23.70
Principal occupation / Job title (See Instructions) Data Engineer		Employer (See Instructions) Catholic Charities
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehlinger, Travis <hr/> Contributor address; City; State; Zip Code Paris, TX 75462	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) HVAC		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/29 Rpt: 11/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evenhouse, Katrina (Mrs.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Dickinson, TX 77539	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) n/a
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fallon, Andrew	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Johnson City, TN 37615	
Principal occupation / Job title (See Instructions) Tri City Remodeling		Employer (See Instructions) Owner
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fie, Ma	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Castro Valley, CA 94546-1961	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finkle, Philip	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Marietta, GA 30064	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Daar	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Grosse Pointe Woods, MI 48236	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/29 Rpt: 12/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, Ronnie <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78247	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Folk, James <hr/> Contributor address; City; State; Zip Code York, PA 17406	Amount of Contribution (\$) \$95.70
Principal occupation / Job title (See Instructions) Loan Officer		Employer (See Instructions) Export-Import Bank
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Linda <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76132	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galkowski, Ray <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$47.70
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallimore, Alex <hr/> Contributor address; City; State; Zip Code Huntington, WA 25705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Delivery Driver		Employer (See Instructions) Pizza Hut

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/29 Rpt: 13/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallimore, Alex <hr/> 6 Contributor address; City; State; Zip Code Huntington, WA 25705	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Delivery Driver		9 Employer (See Instructions) Pizza Hut
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallimore, Alex <hr/> Contributor address; City; State; Zip Code Huntington, WA 25705	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Delivery Driver		Employer (See Instructions) Pizza Hut
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardener, Margaret <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$95.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gastley, Andy <hr/> Contributor address; City; State; Zip Code Weeki Wachee, FL 34614	Amount of Contribution (\$) \$47.70
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaylyn, Devine <hr/> Contributor address; City; State; Zip Code Pearland, TX 77581	Amount of Contribution (\$) \$95.79
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Gaylyn Promotions

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/29 Rpt: 14/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, Wayne <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77070	7 Amount of Contribution (\$) \$14.10
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Blake <hr/> Contributor address; City; State; Zip Code Granby, CT 06035	Amount of Contribution (\$) \$23.70
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Donna <hr/> Contributor address; City; State; Zip Code Placentia, CA 92870	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Gorden <hr/> Contributor address; City; State; Zip Code Witchata, KS 67226	Amount of Contribution (\$) \$23.70
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Collins
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grigassy, Chris <hr/> Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Landlord		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/29 Rpt: 15/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gubson, John <hr/> 6 Contributor address; City; State; Zip Code Port Aransas, TX 78373	7 Amount of Contribution (\$) \$23.70
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halloran, Daniel <hr/> Contributor address; City; State; Zip Code Scottsdale, AZ 85257	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heathcock, James <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75027	Amount of Contribution (\$) \$95.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Leroy <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hess, Thomas <hr/> Contributor address; City; State; Zip Code Lewes, DE 19958-1474	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/29 Rpt: 16/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickman, MAtt	7 Amount of Contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code Humble, TX 77346-2903		
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Craig Tech
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickman, MAtt	Amount of Contribution (\$) \$95.70
Contributor address; City; State; Zip Code Humble, TX 77346-2903		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Craig Tech
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodgson, Timothy	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Courtland, CA 95615		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holt, James	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Groves, TX 77619		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoover, Brandon	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Bellville, TX 77418		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Laser Midstream

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/29 Rpt: 17/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houck, Mike	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Myrtle Beach, SC 29579		
8 Principal occupation / Job title (See Instructions) Auditor		9 Employer (See Instructions) SC
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulsman, Susan	Amount of Contribution (\$) \$95.70
Contributor address; City; State; Zip Code Beaverton, OR 97007		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Humphries, Janice	Amount of Contribution (\$) \$47.70
Contributor address; City; State; Zip Code Boerne, TX 78006		
Principal occupation / Job title (See Instructions) Medical Bill		Employer (See Instructions) Self
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Ricky	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Pinehurst, TX 77632		
Principal occupation / Job title (See Instructions) Electrician		Employer (See Instructions) CenterPoint
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Zach	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Johnson City, TN 78636		
Principal occupation / Job title (See Instructions) Electrician		Employer (See Instructions) 3 Phase

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/29 Rpt: 18/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keene, Michael <hr/> 6 Contributor address; City; State; Zip Code Boulder City, NV 89005	7 Amount of Contribution (\$) \$47.70
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Key, Samuel <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knox, Coby <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006	Amount of Contribution (\$) \$191.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Marvin <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Labar, Lee <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$95.70
Principal occupation / Job title (See Instructions) Landscape		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/29 Rpt: 19/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laracuenta, David	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Edgewater, FL 32141		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larence, Robert	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Oakdale, MN 55128		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Sherrial	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dayton, TX 77535		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leininger, James	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code San Antonio, TX 78232		
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self Employed
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leininger, James	Amount of Contribution (\$) \$8,742.36
Contributor address; City; State; Zip Code San Antonio, TX 78232		
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/29 Rpt: 20/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lizzotte, Dean <hr/> 6 Contributor address; City; State; Zip Code McAllen, TX 78504	7 Amount of Contribution (\$) \$9.30
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loos, Mark <hr/> Contributor address; City; State; Zip Code Colorado Springs, CO 80923	Amount of Contribution (\$) \$23.70
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marinko, Tom <hr/> Contributor address; City; State; Zip Code Kershaw, SC 29067	Amount of Contribution (\$) \$4.50
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matern Carcano, Tobi <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Realestate		Employer (See Instructions) Self
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAdams, Robert <hr/> Contributor address; City; State; Zip Code Homer, LA 71040	Amount of Contribution (\$) \$47.70
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/29 Rpt: 21/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McEntee, Bob <hr/> 6 Contributor address; City; State; Zip Code Ogden, UT 84404	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Logistics		9 Employer (See Instructions) DoD
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinzie, Roger <hr/> Contributor address; City; State; Zip Code Pipe Creek, TX 78063	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNary, Ed <hr/> Contributor address; City; State; Zip Code Fallbrooke, CA 92088	Amount of Contribution (\$) \$95.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meux, Maya <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) radiologist		Employer (See Instructions) CPMC
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miles, Mark <hr/> Contributor address; City; State; Zip Code Bullard, TX 75757	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/29 Rpt: 22/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, John	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Waco, TX 76708		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Monty	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Gordonsville, VA 22942		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulkey, Deborah	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Roswell, NM 88201		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Steve (Mr.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Port Neches, TX 77651		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newell, Herbert	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Auburn, TX 36879		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/29 Rpt: 23/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman, Anne <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77025	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Kenneth <hr/> Contributor address; City; State; Zip Code Silverdale, WA 98383	Amount of Contribution (\$) \$23.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noble, Steven <hr/> Contributor address; City; State; Zip Code Lafayette Hill, PA 19444	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Bannon, Glenn (Mr.) <hr/> Contributor address; City; State; Zip Code Glendale, AZ 85302	Amount of Contribution (\$) \$95.70
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Penrod, Joshua <hr/> Contributor address; City; State; Zip Code Austin, TX 78251	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/29 Rpt: 24/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piacenti, Glenda <hr/> 6 Contributor address; City; State; Zip Code Porter, TX 77365	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Putman, Dale <hr/> Contributor address; City; State; Zip Code Mecosta, MN 49332-9579	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Truck driver		Employer (See Instructions) Big Rapids
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rach, Edna <hr/> Contributor address; City; State; Zip Code Hemphill, TX 75948	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) homemaker
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rainwater, Keith <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76033	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) TMH
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rebers, Brad <hr/> Contributor address; City; State; Zip Code Lakewood, CT 80215	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/29 Rpt: 25/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riffle, Paul <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79602	7 Amount of Contribution (\$) \$17.76
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ristow, James <hr/> Contributor address; City; State; Zip Code San Diego, CA 92107	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritche, Jack <hr/> Contributor address; City; State; Zip Code Houston, TX 77090	Amount of Contribution (\$) \$23.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Ned <hr/> Contributor address; City; State; Zip Code Chandler, AZ 85248	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodeheaver, TL <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77713	Amount of Contribution (\$) \$95.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/29 Rpt: 26/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Molly	7 Amount of Contribution (\$) \$47.70
6 Contributor address; City; State; Zip Code Houston, TX 77023		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, Jesse	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Palm Bay, FL 32909		
Principal occupation / Job title (See Instructions) Paramedic		Employer (See Instructions) Coastal Ambulance
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, Ned	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Canyon Lake, TX 78133		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) QIC
Date 05/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shurts, Wayne	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Montgomery, TX 77356		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slator, Lori	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Fort Wayne, IN 46818		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/29 Rpt: 27/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, James <hr/> 6 Contributor address; City; State; Zip Code Eules, TX 76039	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Robert <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$47.70
Principal occupation / Job title (See Instructions) Senior Software Engineer		Employer (See Instructions) Everywhere
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spitale, Luke <hr/> Contributor address; City; State; Zip Code Okemah, OK 74859	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Brent <hr/> Contributor address; City; State; Zip Code Bullard, TX 75757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Johnson Lab & Supply
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stavrowsky, Matthew <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$23.70
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/29 Rpt: 28/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, David <hr/> 6 Contributor address; City; State; Zip Code Rockdale, TX 76567	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans United for a Conservative Majority <hr/> Contributor address; City; State; Zip Code Victoria, TX 77901	Amount of Contribution (\$) \$50,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Cheryl <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, David <hr/> Contributor address; City; State; Zip Code Carlisle, PA 17013	Amount of Contribution (\$) \$4.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Unangst, Joanne <hr/> Contributor address; City; State; Zip Code Orange, TX 77630	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/29 Rpt: 29/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veazey, William	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Santa Barbara, CA 93105		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velazquez, George	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Huntley, IL 60142		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, William	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Houston, TX 77040		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Kevin	Amount of Contribution (\$) \$47.70
Contributor address; City; State; Zip Code Saint Paul, MN 55115		
Principal occupation / Job title (See Instructions) Manufacturer		Employer (See Instructions) Federal Ammunition
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Ed	Amount of Contribution (\$) \$23.70
Contributor address; City; State; Zip Code Middlebury, VT 05753		
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) Valley Bible Church

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/29 Rpt: 30/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wickstrom, Marry	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Minneapolis, MN 55417		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Christi	Amount of Contribution (\$) \$47.70
Contributor address; City; State; Zip Code Fort Worth, TX 76110		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Southwest
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Susan	Amount of Contribution (\$) \$47.70
Contributor address; City; State; Zip Code Cedar Park, TX 78613		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wittmer, Charles	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Crawford, TX 76638		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yoe, John	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code New Braunfels, TX 78132		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/29 Rpt: 31/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) baradar, Jean <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77720	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) bennett, Bernice <hr/> Contributor address; City; State; Zip Code Sunrise Beach, TX 78643	Amount of Contribution (\$) \$249.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mcnuttt, Bob <hr/> Contributor address; City; State; Zip Code Corsicana, TX 75151	Amount of Contribution (\$) \$479.70
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Bakery
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) schuler, George <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77498	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Sign Co
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) todd, Dwight <hr/> Contributor address; City; State; Zip Code Fort Wayne, IN 46814	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/29 Rpt: 32/45
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) tomalonis, Tom <hr/> 6 Contributor address; City; State; Zip Code Addison, TX 75001	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Campat

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/2 Rpt: 33/45	
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 05/22/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dan Patrick Campaign	8 Amount of contribution (\$) \$2,670.44	9 In-kind contribution description Campaign Endorsement Text Messages
	7 Contributor address; City; State; Zip Code Houston, TX 77046	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 05/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dan Patrick Campaign	Amount of contribution (\$) \$2,397.40	In-kind contribution description Campaign Endorsement Text Messages
	Contributor address; City; State; Zip Code Houston, TX 77046	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gun Owners of America, Inc. (#0080699)	Amount of contribution (\$) \$2,379.95	In-kind contribution description Tour Expenses
	Contributor address; City; State; Zip Code Springfield , VA 22151	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/2 Rpt: 34/45	
2 FILER NAME Covey, David A.		3 Filer ID (Ethics Commission Filers) 00085648	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 05/30/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leininger, James	8 Amount of contribution (\$) \$10,674.90	9 In-kind contribution description Volunteers
	7 Contributor address; City; State; Zip Code San Antonio, TX 78232	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Doctor		11 Employer (FOR NON-JUDICIAL) (See instructions) Self Employed	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 1/11 Rpt: 35/45	2	FILER NAME Covey, David A.	3	Filer ID (Ethics Commission Filers) 00085648
4	Date 05/20/2024	5	Payee name Anthem Media		
6	Amount (\$) \$50,871.68	7	Payee address; City; State; Zip Code 6412 Soter Parkway Austin, TX 78735		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 06/20/2024		Payee name Anthem Media		
	Amount (\$) \$24,119.56		Payee address; City; State; Zip Code 6412 Soter Parkway Austin, TX 78735		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 05/23/2024		Payee name Armada		
	Amount (\$) \$28,272.00		Payee address; City; State; Zip Code 3742 North Federal HWY #1032 Lighthouse Point, FL 33064		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Broadcast		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/11 Rpt: 36/45	2 FILER NAME Covey, David A.	3 Filer ID (Ethics Commission Filers) 00085648
---	--	--

4 Date 05/28/2024	5 Payee name Bluestone Creatives LLC
-----------------------------	--

6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 605 Steeplechase Dr. Bedford, TX 76021
------------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media
---------------------------------	--	--

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 06/27/2024	Payee name CWS Research LLC
--------------------	--------------------------------

Amount (\$) \$12,000.00	Payee address; City; State; Zip Code 8313 Mimi Lane Austin, TX 78724
----------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
-------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 05/30/2024	Payee name Cajun Ventures
--------------------	------------------------------

Amount (\$) \$3,669.67	Payee address; City; State; Zip Code 1925 Texas Avenue #2835 Bridge City, TX 77611
---------------------------	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Catering
-------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/11 Rpt: 37/45	2 FILER NAME Covey, David A.	3 Filer ID (Ethics Commission Filers) 00085648
---	--	--

4 Date 05/22/2024	5 Payee name Catamaran Consulting
-----------------------------	---

6 Amount (\$) \$86,558.72	7 Payee address; City; State; Zip Code 1920 Hillhurst Ave Los Angeles, CA 90027
-------------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
---------------------------------	--	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 05/23/2024	Payee name Catamaran Consulting
--------------------	------------------------------------

Amount (\$) \$28,020.00	Payee address; City; State; Zip Code 1920 Hillhurst Ave Los Angeles, CA 90027
----------------------------	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 05/25/2024	Payee name Constant Contact
--------------------	--------------------------------

Amount (\$) \$58.63	Payee address; City; State; Zip Code 1601 Trapelo Rd Waltham, MA 02451
------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email
------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/11 Rpt: 38/45	2 FILER NAME Covey, David A.	3 Filer ID (Ethics Commission Filers) 00085648
---	--	--

4 Date 05/24/2024	5 Payee name Covey, David (Mr.)
-----------------------------	---

6 Amount (\$) \$1,060.00	7 Payee address; City; State; Zip Code PO Box 722 Mauriceville, TX 77626
------------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Loan Repayment
---------------------------------	---	--

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 05/19/2024	Payee name Exxon Hampshire
--------------------	-------------------------------

Amount (\$) \$30.00	Payee address; City; State; Zip Code 24061 Hwy 73 N. Winnie, TX 77665
------------------------	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 05/19/2024	Payee name Exxon Hampshire
--------------------	-------------------------------

Amount (\$) \$12.82	Payee address; City; State; Zip Code 24061 Hwy 73 N. Winnie, TX 77665
------------------------	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
-------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/11 Rpt: 39/45	2 FILER NAME Covey, David A.	3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/21/2024	5 Payee name Exxon Hampshire	
6 Amount (\$) \$30.58	7 Payee address; City; State; Zip Code 24061 Hwy 73 N. Winnie, TX 77665	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/02/2024	Payee name Google Gsuite	
Amount (\$) \$15.35	Payee address; City; State; Zip Code 1600 Amplitheatre Parkway Mountainview, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/16/2024	Payee name Mailchimp	
Amount (\$) \$115.94	Payee address; City; State; Zip Code Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 6/11 Rpt: 40/45	2	FILER NAME Covey, David A.	3	Filer ID (Ethics Commission Filers) 00085648
4	Date 06/17/2024	5	Payee name Mailmeteor		
6	Amount (\$) \$24.99	7	Payee address; City; State; Zip Code 43 Auguste Blanqui BLVD. Paris 75013 France		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 05/27/2024		Payee name Market Basket		
	Amount (\$) \$35.15		Payee address; City; State; Zip Code 11816 Hwy 62 N. Mauricaville, TX 77632		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 05/27/2024		Payee name Padre Escapes		
	Amount (\$) \$315.96		Payee address; City; State; Zip Code 14945 S Padre Island Padre Island, TX 78597		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Strategy Event		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/11 Rpt: 41/45	2 FILER NAME Covey, David A.	3 Filer ID (Ethics Commission Filers) 00085648
---	--	--

4 Date 05/28/2024	5 Payee name Padre Escapes
-----------------------------	--------------------------------------

6 Amount (\$) \$947.89	7 Payee address; City; State; Zip Code 14945 S Padre Island Padre Island, TX 78597
----------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event
---------------------------------	--	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 05/28/2024	Payee name Palms Event Center
--------------------	----------------------------------

Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 4121 I-10 Orange, TX 77632
---------------------------	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Watch Party
-------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 06/17/2024	Payee name Palms Event Center
--------------------	----------------------------------

Amount (\$) \$450.00	Payee address; City; State; Zip Code 4121 I-10 Orange, TX 77632
-------------------------	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security
-------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/11 Rpt: 42/45	2 FILER NAME Covey, David A.	3 Filer ID (Ethics Commission Filers) 00085648
4 Date 06/09/2024	5 Payee name Rumbleup	
6 Amount (\$) \$19.00	7 Payee address; City; State; Zip Code 2001 K St NW Washington D.C., DC 20006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/21/2024	Payee name Smith, Tracy	
Amount (\$) \$178.61	Payee address; City; State; Zip Code 167 CR 233 Brookland, TX 75931	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/23/2024	Payee name Solutions for TE	
Amount (\$) \$21,699.74	Payee address; City; State; Zip Code 4238 Lomo Alto Ct Dallas, TX 75219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 9/11 Rpt: 43/45	2	FILER NAME Covey, David A.	3	Filer ID (Ethics Commission Filers) 00085648
4	Date 05/27/2024	5	Payee name Springhill		
6	Amount (\$) \$1,525.08	7	Payee address; City; State; Zip Code 411 Bowie St San Antonio, TX 78205		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Date 05/19/2024		Candidate/Officeholder name Office sought Office held		
	Amount (\$) \$749.16		Payee name Subway Payee address; City; State; Zip Code 1090 Texas Ave Bridge City, TX 77611		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Food		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Date 05/19/2024		Candidate/Officeholder name Office sought Office held		
	Amount (\$) \$6.92		Payee name Subway Payee address; City; State; Zip Code 1090 Texas Ave Bridge City, TX 77611		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Expense		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/11 Rpt: 44/45	2 FILER NAME Covey, David A.	3 Filer ID (Ethics Commission Filers) 00085648
--	--	--

4 Date 05/20/2024	5 Payee name The Record Newspapers
-----------------------------	--

6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code P.O. Box 1008 Bridge City, TX 77611
----------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense AD
---------------------------------	--	--

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 06/18/2024	Payee name Tractor Supply
--------------------	------------------------------

Amount (\$) \$19.95	Payee address; City; State; Zip Code 2020 IH 10 Orange, TX 77630
------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stake
-------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 05/20/2024	Payee name Walmart
--------------------	-----------------------

Amount (\$) \$196.96	Payee address; City; State; Zip Code 3460 N. Main St. Vidor, TX 77662
-------------------------	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad Support
-------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/11 Rpt: 45/45	2 FILER NAME Covey, David A.	3 Filer ID (Ethics Commission Filers) 00085648
4 Date 05/27/2024	5 Payee name flying J	
6 Amount (\$) \$34.88	7 Payee address; City; State; Zip Code 7112 I-10 Orange, TX 77632	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Set Up
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/27/2024	Payee name flying J	
Amount (\$) \$30.98	Payee address; City; State; Zip Code 7112 I-10 Orange, TX 77632	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/27/2024	Payee name mccoys	
Amount (\$) \$253.93	Payee address; City; State; Zip Code 4514 W Lutcher dr Orange, TX 77632	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stakes
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held