### CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1	Filer ID (Eth	ics Commission Filers)	2 Total pages filed:				OFFICE U	SEONLY
	00021143		62				Date Received	
3	CANDIDATE /	MS / MRS / MR	FIRST			MI	ELECTRONICAL	LY FILED
	OFFICEHOLDER NAME	The Honorable	Tracy O.				07/15/2024	
		NICKNAME	LAST			SUFFIX		
			King				Date Hand-delivered or D	Date Postmarked
4	ORIGINAL	January 15	Runoff		Other (s	pecify)		
	REPORT TYPE	X July 15	Exceeded modifie	d reporting lim	nit		Receipt #	Amount
		30th day before election	15th day after can appointment (offic		er			
		8th day before election	Final Report (Atta				Date Processed	
5	ORIGINAL PERIOD	Month Day Yea	ar	Month	Day	Year	Date Imaged	
	COVERED	01/01/2024	THROUGH		30/2024		Date imaged	
6	EXPLANATION OF (							
	The corrected report	contains information that w	as not available when	the original	report was	filed.		
ľ	AFFIDAVIT			vear, or affir I correct.	m, under pe	enalty of perjury	, that this corrected	report is true
			Ch	eck the box	next to any	and all applica	ble statements:	
			X	was mad	e in good fa	ith and without	affirm that the origin an intent to mislead ned in the report.	
							, that I am filing this c ess day after the date	
				that the re swear, or	eport as orig	ginally filed is ir any error or or	nission in the report a	ete. I
					The	Honorable Tr	racy O. King	
					Signatu	re of Candidate	e or Officeholder	
	AFFIX NOTARY ST	AMP / SEAL ABOVE						
	Sworn to and subsc	ribed before me, by the sai	d			, this t	he	day
	of	, 20, to cer	tify which, witness my	hand and s	eal of office	<b>)</b> .		
	Signature of offic	er administering oath	Printed name of c	officer admir	isterina oat	th	Title of officer admini	stering oath
⊢		Jan Storing Out				-		
		Remember To At Nee	tach Any Part Of ded To Report A				ort Form	
			•	•				

### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to comple	ete this form.	1 Filer ID (Ethics Commis 00021143		<ol> <li>Total pages file</li> <li>62</li> </ol>		
3 CANDIDATE /	MS / MRS / MR	FIRST		MI			
OFFICEHOLDER	The Honorable				OFFICE U	SEONLY	
NAME		Tracy O.			Date Received		
					ELECTRONICA	LLY FILED	
					07/15/2024		
	NICKNAME	LAST		SUFFIX	0111012024		
		King					
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered or	Date Postmarked	
OFFICEHOLDER	333 East Main Street						
MAILING					Receipt #	Amount	
ADDRESS	Suite 1						
Change of Address	Uvalde, TX 78801				Date Processed		
					Date Processed		
					Date Imaged		
5 CAMPAIGN	MS / MRS / MR	FIRST		MI			
TREASURER NAME	Mrs.	Cheryl B.					
	NICKNAME	LAST		SUFFIX			
				30111X			
		King					
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	APT	/ SUITE #; CITY;	STA	TE; ZIP CODE	
TREASURER ADDRESS	333 East Main Street						
	Suite 1						
(Residence or Business)							
	Uvalde , TX 78801						
7 CAMPAIGN	AREA CODE PHON	E NUMBER E	XTENSION				
TREASURER			ATENSION				
PHONE	(830) 278-7601						
8 REPORT TYPE		-			• • • •		
	January 15	30th day before	election	Runoff	15th day after cam appointment (office		
	X July 15	8th day before e		Exceeded modified	Final Report (Attac		
				reporting limit			
9 PERIOD COVERED	Month Day Year			Month Day	Year		
COVERED	01/01/2024	TH	IROUGH	06/30/2024	1		
10 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month Day Year	PI	rimary	Runoff	Other		
			eneral	 Special			
			eneral	Special			
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)		
	State Representative Distr	ict 80		State Representa	ative District 80		
	I			1			
		GO T	O PAGE 2				
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.us	6	Versio	n V4.1.0.d378aba0	
,							

### CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM C/OH COVER SHEET PG 2 3 of 62

13 C / OH NAME	King, Tracy O. (The H	14 Filer ID ( 00021143	Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	Dolitical contributions accepted or political expenditur These expenditures may have been made without th officeholders are required to report this information	he 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 ADDRES	S			
<b>16</b> CONTRIBUTION TOTALS						
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	)	<b>\$</b> 0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEM	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 18,107.34		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	AST DAY OF THE	<b>\$</b> 230,754.53		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS ( TING PERIOD	OF THE LAST DAY	<b>\$</b> 0.00		
17 AFFIDAVIT	-					
		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.				
		The Hono	orable Tracy O. King	l		
			Candidate or Officehol			
AFFIX NO	TARY STAMP / SEAL AB	DVE				
Sworn to and subse	cribed before me, by the s	aid	. this the	day		
		ertify which, witness my hand and seal of office.	, · · · · · · ·	,		
Signature of offic	cer administering	Printed name of officer administering	Title of officer	administering oath		
Forms provided by Te	xas Ethics Commission	www.ethics.state.tx.us	,	Version V4.1.0.d378aba0		

SUBTOTALS - C/OH	СС	FORM C/OH OVER SHEET PG 3 4 of 62
18 FILER NAME King, Tracy O. (The Honorable)	<b>19</b> Filer ID 00021143	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	<b>\$</b> 2,569.92
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	\$	
8. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	<b>\$</b> 15,537.42	
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 CONTRIBUTIO	ONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

# 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/Politica Credit Card Payment	Accounting/Banking Fees Office Over Consulting Expense Food/Beverage Expense Polling Exp Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment The Instruction Guide explains how to con				yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor	ead/Rental Expense Transportation Equipment & Related Expense nse Travel in District ense Travel Out of District ges/Contract Labor OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 1/1 Rpt: 5/62		King, Tracy	O. (The Honora	able)				00021143	
4	Date	5	Payee name							
	06/01/2024		LEC Legacy	, LTD						
6	Amount (\$)	7	Payee addres	s; City;	State	; Zip Co	le			
	\$350.00		333 E. Main	Street						
			Uvalde, TX 7	78801						
8	PURPOSE	(a)	Category (See	e Categories listed at t	he top of this sch	nedule)	(b) Description			
	OF EXPENDITURE			ead/Rental Ex		,			de of Texas. Com	
									officeholder living	
							Rent for Carri	μαι	gir or onicen	older purposes
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offic	eholder name	(	Dffice sou	Jht		Office he	eld
	Date		Payee name							
	06/12/2024		The Flower I	Patch						
	Amount (\$)		Payee addres	s; City;	State	; Zip Co	le			
	\$75.78									
			Uvalde, TX 7	78801						
	PURPOSE OF EXPENDITURE	(a)		e Categories listed at t Memorials Exp		iedule)	Check if Austin	, TX,	de of Texas. Com officeholder living n or officeho	
	Complete ONLY if direct		Candidate/Offic	eholder name	(	Jffice soug	Jht		Office he	eld
	expenditure to benefit C/OI	Н								
	Date		Payee name							
	06/14/2024		Uvalde Lead	ler News						
	Amount (\$)		Payee addres	s; City;	State	; Zip Co	le			
	\$72.00		110 N. East	Street						
			Uvalde, TX 7	78701						
	PURPOSE OF			e Categories listed at t	he top of this sch	nedule)	(b) Description	out	de of Texas. Com	plata Sahadula T
	EXPENDITURE		Advertising E	Expense					officeholder living	
										officeholder purposes
							_			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	C	Office sou	Jht		Office he	eld

EXPENDITURES MADE BY CREDIT CARD						ILE F4	
		ENDITURE CATEGORIE		.,			
Advertising Expense Accounting/Banking Consulting Expense	Event Exp Fees	0	oan Repayment/Re ffice Overhead/Rer olling Expense	ntal Expense Tra	licitation/Fundraising Expense ansportation Equipment & Relate avel in District	ed Expense	
Contributions/ Donations Made By Candidate/Officeholder/Politica	By - Gift/Awards/Memorials Expense Printi		rinting Expense alaries/Wages/Con	Tra	avel of District avel Out of District THER (enter a category not listed	d above)	
	Ũ	ruction Guide explains how	-			a aboro)	
<b>1</b> Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Comm	nission Filers)	
Sch: 1/57 Rpt: 6/62	King, Tracy O. (The	e Honorable)			00021143		
4 CREDIT CARD	Name of fina	ncial institution			<b>¢</b> E 600	) 2E	
ISSUER CitiCards			EXPENDITURES \$ 5,609.3 CHARGED TO A CREDIT				
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
	\$34.00	01/03/2024					
7 PAYEE	(a) Payee name		(b) Payee a	ddress:	City, State	e, Zip Code	
			127 IH-35	-		,	
	Exxon - Devine						
			Devine, T				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript		eholder purposes		
Travel Out of District				ampaign or onice	enoluer purposes		
					officebolder living evenese		
			L L L L L L L L L L L L L L L L L L L	Check if Austin, TX,	officeholder living expense Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
	\$29.23	01/04/2024					
DAVEE							
PAYEE	(a) Payee name		(b) Payee a 407 E Gai		City, State	e, Zip Code	
	Uvalde Country Club						
			Uvalde, TX 78801				
PURPOSE OF	(a) Category	<i></i>	(b) Description				
	(See Categories listed at the top of this schedule) Food/Beverage Expense		Meeting for campaign or officeholder purposes				
X Political			_				
Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	ce sought	Check if Austin, TX,	officeholder living expense Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Onicenoider	name Om	sought		Onice neid		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
	\$54.46	01/04/2024					
PAYEE	(a) Payee name		(b) Payee a		City, State	e, Zip Code	
	Austin Land & Catt	e	1205 N La	amar Blvd			
			Austin, TX	79703			
PURPOSE OF	(a) Category		(b) Descript				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Meeting fo	or campaign or o	officeholder purposes		
X Political	Foourbeverage Expe	1130					
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	ce sought		Office held	-	
expenditure to benefit C/OH							

	SCHEDULE F4							
	EXPE	ENDITURE CATEGOR	RIES FOR BOX 10(a)					
Contributions/ Donations Made By - Gift/Awa Candidate/Officeholder/Political Committee Legal S		rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.	Trans Travel Travel	tation/Fundraising Expense portation Equipment & Related Expense I in District I Out of District ER (enter a category not listed above)			
1 Tatal warman Oak a dula E tu					Files ID (Ethics Commission Filese)			
1 Total pages Schedule F4: Sch: 2/57 Rpt: 7/62	King, Tracy O. (The	Hoporable)			Filer ID (Ethics Commission Filers) 0021143			
4 CREDIT CARD	Name of final	5 TOTAL OF UNITEM		0021143				
ISSUER	see previous		EXPENDITURES CHARGED TO A CH CARD	\$	5,609.35			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer P	aid			
	\$123.60	01/04/2024						
7 PAYEE	(a) Payee name	•	(b) Payee address;		City, State, Zip Code			
			260 W North Lane					
	Affordable Storage	#4						
			Uvalde, TX 78801					
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top	of this schedule)	()	Storage for campaign or officeholder purposes				
Office Overhead/Rental Expense			eterage for eampaig					
X Political								
Non-Political		of Texas. Complete Schedule		ıstin, TX, offi	ceholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name C	office sought	(	Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$8.39	(b) Date of Charge 01/05/2024	(c) Date(s) Credit Card	I Issuer P	aid			
PAYEE	(a) Payee name		(b) Payee address;		City, State, Zip Code			
			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	185 Berry Street				
	Lyft, Inc.		-	Suite 5000				
				San Francisco, CA 94107				
PURPOSE OF	(a) Category		(b) Description	54107				
EXPENDITURE	(See Categories listed at the top	of this schedule)		Taxi for campaign or officeholder purposes				
Delition	Travel Out of District		Taxi for campaign of oncentitider purposes					
X Political								
Non-Political		of Texas. Complete Schedule			ceholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name C	office sought	(	Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	I Issuer P	aid			
	\$8.76	01/05/2024						
PAYEE	(a) Payee name	•	(b) Payee address;		City, State, Zip Code			
			185 Berry Street					
	Lyft, Inc.		Suite 5000					
			San Francisco, CA 9	94107				
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top	of this schedule)	Taxi for campaign o	r officeh	older purposes			
X Political	Travel Out of District							
Non-Political								
		of Texas. Complete Schedule			ceholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name C	office sought	(	Office held			
expenditure to benefit C/OH								

	EXPI	ENDITURE CATEGORI	ES FOR BOX 10(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award	erage Expense Is/Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
	The Inst	ruction Guide explains ho	ow to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Sch: 3/57 Rpt: 8/62	King, Tracy O. (The	e Honorable)		00021143		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZEI EXPENDITURES CHARGED TO A CRED CARD	<b>\$</b> 5,609.35		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid		
	\$55.00	01/05/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	Cricket Wireless LL	.C	575 Morose Dr. NE			
			Atlanta, GA 30324			
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Office Overhead/Ren		Phone for campaign or o	officeholder purposes		
X Political		lai Expense				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	Check if Austin, T	X, officeholder living expense		
9 Complete ONLY if direct Candidate/Officeholder name Office sought				Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid		
	\$38.31	01/06/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	Broadway 830		100 E. Main Street			
			Uvalde, TX 78801			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top	,	Meeting for campaign of	officeholder purposes		
X Political	Food/Beverage Expe	nse				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	Check if Austin, T	X, officeholder living expense		
Complete ONLY if direct	Candidate/Officeholder	name Off	fice sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid		
	\$8.27	01/06/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	(d) r dyce hame		185 Berry Street			
	Lyft, Inc.		Suite 5000			
			San Francisco, CA 9410	70		
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top	of this schedule)	Taxi for campaign or off	iceholder purposes		
X Political	Travel Out of District					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T		X, officeholder living expense		
Complete <u>ONLY</u> if direct	Candidate/Officeholde	•	fice sought	Office held		
expenditure to benefit C/OH						

### SCHEDULE F4

	SCHEDULE F4				
	EXPE	ENDITURE CATEGOR	IES FOR BOX 10(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	rage Expense s/Memorials Expense ices	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)	
4 Tatal warman Oaka shila Edu	· · · · · · · · · · · · · · · · · · ·			<b>0</b> Files ID (Ethics Commission Files)	
1 Total pages Schedule F4: Sch: 4/57 Rpt: 9/62	King, Tracy O. (The	e Honorable)		3 Filer ID (Ethics Commission Filers) 00021143	
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZ	FD	
ISSUER	see previous		EXPENDITURES CHARGED TO A CRE CARD	\$ 5,609.35	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid	
	\$102.21	01/06/2024			
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	
			14455 N. Hayden Rd.		
	Godaddy.com		Suite 219		
			Scottsdale, AZ 85260		
8 PURPOSE OF	(a) Category		(b) Description		
EXPENDITURE	(See Categories listed at the top	of this schedule)	., .	paign or officeholder purposes	
X Political Office Overhead/Rental Expense					
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				n, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held	
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid	
	\$128.69	01/06/2024			
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	
	(a) r ayee hame		350 Ellis Street		
	Norton Antivirus				
			Mountain View , CA 94	4043	
PURPOSE OF	(a) Category		(b) Description		
EXPENDITURE	(See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Antivirus for campaign or officeholder purposes		
X Political					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austir	n, TX, officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held	
expenditure to benefit C/OH					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid	
	\$37.96	01/08/2024			
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	
			401 S Getty St		
	5 Points Market				
			Uvalde, TX 78801		
PURPOSE OF	(a) Category		(b) Description		
EXPENDITURE	(See Categories listed at the top	of this schedule)	Fuel for campaign or c	officeholder purposes	
X Political	Travel In District			- ·	
Non-Political		of Toylog Complete Calarit			
		of Texas. Complete Schedule		n, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held	

	SCHEDULE F4							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expr Fees Food/Beve / - Gift/Award I Committee Legal Serv	arage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement S Office Overhead/Rental Expense Ti Polling Expense Ti Printing Expense Ti	olicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District THER (enter a category not listed above)				
1 Total pages Schedule F4:	2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)				
Sch: 5/57 Rpt: 10/62	King, Tracy O. (The	e Honorable)		00021143				
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZED					
ISSUER	see previous		EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 5,609.35				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$68.81	01/11/2024						
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
			301 East Main Street					
	Evett's BBQ							
			Uvalde , TX 78801					
8         PURPOSE OF EXPENDITURE         (a) Category           (See Categories listed at the top of this schedule)			· ·	(b) Description				
	Food/Beverage Expe	•	Meeting for campaign or officeholder purposes					
X Political								
Non-Political (C) Check if travel outside of Texas. Complete Schedule T.				, officeholder living expense				
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Of	ffice sought	Office held				
expenditure to benefit C/OH PAYMENT	(a) Amount Chargod	(b) Data of Charge	(a) Data(a) Cradit Card Janua	r Doid				
PATNENT	(a) Amount Charged \$276.85	(b) Date of Charge 01/11/2024	(c) Date(s) Credit Card Issue	i Faiu				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
			105 S Highland Ave	105 S Highland Ave				
	Hotel Saint George							
			Marfa, TX 79843					
PURPOSE OF EXPENDITURE	(a) Category	of this schedule)	(b) Description					
_	(See Categories listed at the top of this schedule) Travel Out of District		Lodging for campaign or	Lodging for campaign or officeholder purposes				
X Political								
Non-Political		of Texas. Complete Schedule		, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Of	ffice sought	Office held				
expenditure to benefit C/OH PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Daid				
			(C) Date(S) Credit Card Issue					
	\$77.42	01/12/2024						
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
			2026 East Main Street					
	Casal's Package St	tore						
			Uvalde, TX 78801					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	office belder summer				
	Event Expense		Supplies for campaign or	uncenoider purposes				
X Political								
Non-Political		of Texas. Complete Schedule		, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Of	ffice sought	Office held				

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve - Gift/Award	erage Expense P s/Memorials Expense P	ES FOR BOX 10(a) oan Repayment/Reimbursement ffice Overhead/Rental Expense olling Expense anaris/Wages/Contract Labor OTHER (enter a category not listed above)				
	Ũ	ruction Guide explains how	0				
<b>1</b> Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
Sch: 6/57 Rpt: 11/62	King, Tracy O. (The	e Honorable)			00021143		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	5,609.3	35
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid		
	\$37.90	02/13/2024					
7 PAYEE	(a) Payee name	•	(b) Payee ad	ddress;	City,	State,	Zip Code
	Exxon, : Pearsall		111 Interst	ate 35			
			Pearsall, T	X 78061			
8 PURPOSE OF	(a) Category		(b) Descripti	on			
EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Fuel for ca	mpaign or offic	eholder purpo	ses	
Non-Political	(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX			officeholder living ex	kpense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder		ce sought	_	Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid		
	\$33.72	01/16/2024					
PAYEE	(a) Payee name Oasis Outback	I	(b) Payee ao 2900 E Ma		City,	State,	Zip Code
			Uvalde, TX	(78801			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expe	,	(b) Descripti Meeting fo	on r campaign or d	officeholder pu	urposes	
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	 	Check if Austin TX	officeholder living ex	vnense	
Complete ONLY if direct	Candidate/Officeholder	•	ce sought		Office held		
expenditure to benefit C/OH			Ū				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid		
	\$158.78	01/16/2024					
PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code
	Uvalde Country Clu	ıb	407 E Gar				·
			Uvalde, TX	(78801			
PURPOSE OF	(a) Category		(b) Descripti				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Meeting fo	r campaign or (	officeholder pu	urposes	
Non-Political				<b>1</b>			
		of Texas. Complete Schedule T.		Check if Austin, TX,	Office held	kpense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offi	ce sought		Office held		

### SCHEDULE F4

	SCHEDULE F4						
	EXPI	ENDITURE CATEGOR	RIES FOR BOX 10(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politice	/ - Gift/Award al Committee Legal Serv	erage Expense s/Memorials Expense rices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1 Total pages Cabadula E4	i			3 Filer ID (Ethics Commission Filers)			
1 Total pages Schedule F4: Sch: 7/57 Rpt: 12/62	King, Tracy O. (The	Honorable)		00021143			
•		ncial institution	5 TOTAL OF UNITEMIZE				
4 CREDIT CARD ISSUER	see previous		EXPENDITURES CHARGED TO A CREI CARD	<b>\$</b> 5,609.35			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid			
	\$21.65	01/17/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Murphy Oil Compa	ov/	P.O. Box 7000				
		ny					
			El Dorado, AR 71738-7	7000			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Fuel for campaign or o	ficabaldar purpasas			
Travel Out of District							
			- <b>D</b> ai 177 - 7				
9 Complete <u>ONLY</u> if direct	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	I. Check if Austin,	, TX, officeholder living expense Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid			
	\$165.18	01/19/2024					
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
	Austin Land & Catt	٩	1205 N Lamar Blvd				
	(a) Catagony		Austin, TX 78703				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Meeting for campaign or officeholder purposes				
X Political	Food/Beverage Expe	nse	weeting for earnpaight				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		, TX, officeholder living expense			
Complete <u>ONLY</u> if direct	Candidate/Officeholder		office sought	Office held			
expenditure to benefit C/OH			U U				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid			
	\$37.66	01/19/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
		1	US Hwy 285				
	Chevron - Fort Stoo	ckton					
			Fort Stockton, TX 7973	35			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
	Travel Out of District		Fuel for campaign or o	ilicenolaer purposes			
X Political							
Non-Political		of Texas. Complete Schedule		, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held			

	SCHEDULE F4						
	EXPE	ENDITURE CATEGOR	RIES FOR BOX 10(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	y - Gift/Award al Committee Legal Serv	erage Expense s/Memorials Expense rices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
<b>1</b> Total pages Schedule F4:	i			3 Filer ID (Ethics Commission Filers)			
Sch: 8/57 Rpt: 13/62	King, Tracy O. (The	Honorable)		00021143			
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZE				
ISSUER		revious	EXPENDITURES CHARGED TO A CRED CARD	<b>\$</b> 5,609.35			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
	\$37.81	01/19/2024					
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
	Shell Oil - Frederick	veburg.	24 FM 1376				
		sburg					
			Fredericksberg, TX 786	24			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Fuel for campaign or off	ficeholder nurnoses			
X Political	Travel Out of District		r der för campaign ör ön	neenolder purposes			
Non-Political			- <b>D</b> autro r				
9 Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	Diffice sought	TX, officeholder living expense Office held			
expenditure to benefit C/OH			mee sought				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid			
	\$2.00	01/20/2024					
PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code			
			185 Berry Street				
	Lyft, Inc.		Suite 5000				
			San Francisco, CA 941	07			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Taxi for campaign or off	ficeholder purpeses			
X Political	Travel Out of District		Taxi for campaight of on				
Non-Political			T Dobashić Austin	TV - 45 - b - b - b - b - b - b - b - b - b -			
Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	Diffice sought	TX, officeholder living expense Office held			
expenditure to benefit C/OH			moo oougin				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
	\$6.57	01/21/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Luff Inc		185 Berry Street				
	Lyft, Inc.		Suite 5000				
			San Francisco, CA 941	07			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Taxi for campaign or off	ficeholder nurnoses			
X Political	Travel Out of District			ncenolael halhoses			
Non-Political							
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, <sup>-</sup>	TX, officeholder living expense Office held			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Oniceriolder		since sought				

	SCHEDULE F4						
	EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award al Committee Legal Serv	rage Expense s/Memorials Expense ices	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)			
<b>1</b> Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 9/57 Rpt: 14/62	King, Tracy O. (The	e Honorable)		00021143			
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZE				
ISSUER		revious	EXPENDITURES CHARGED TO A CREE CARD	<b>\$</b> 5,609.35			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
	\$32.98	01/21/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Suprice Dectourant		501 W. Main Street				
	Sunrise Restaurant						
			Uvalde, TX 78801				
8 PURPOSE OF EXPENDITURE	(a) Category	of this schedule)	(b) Description				
	(See Categories listed at the top of this schedule) Food/Beverage Expense		Meeting for campaign or officeholder purposes				
X Political							
Non-Political         (c)         Check if travel outside of Texas. Complete Schedule T.				TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name C	ffice sought	Office held			
expenditure to benefit C/OH				new Deid			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
	\$39.31	01/27/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
			1151 US Why 90				
	Walmart 4102						
			Castroville, TX 78009				
PURPOSE OF	(a) Category		(b) Description				
	(See Categories listed at the top Office Overhead/Rent		Supplies for campaign	or officeholder purposes			
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 C	office sought	Office held			
expenditure to benefit C/OH		1	1				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
	\$59.49	01/28/2024					
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
	E Dointe Market		401 S Getty St				
	5 Points Market						
			Uvalde, TX 78801				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	ficebolder purpesse			
	Travel In District	·····,	Fuel for campaign or of	incendider purposes			
X Political	L						
Non-Political		of Texas. Complete Schedule		TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name C	ffice sought	Office held			

				CONE	
	EXPI	ENDITURE CATEGORIE	S FOR BOX 10(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Exp. Fees Food/Beve y - Gift/Award	ense Lu O erage Expense P s/Memorials Expense P	ban Repayment/Reimbursement ffice Overhead/Rental Expense olling Expense rinting Expense	Solicitation/Fundraising Expens Transportation Equipment & Re Travel in District Travel Out of District OTHER (enter a category not li	elated Expense
	The Inst	ruction Guide explains ho	w to complete this form.		
<b>1</b> Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Co	mmission Filers)
Sch: 10/57 Rpt: 15/62	King, Tracy O. (The	e Honorable)		00021143	
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$ 5,6	609.35
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid	
	\$48.21	01/29/2024			
7 PAYEE	(a) Payee name	1	(b) Payee address;	City, St	ate, Zip Code
	Bottle N Bag		N US Hwy 83		
			Uvalde, TX 78801		
8 PURPOSE OF	(a) Category		(b) Description		
EXPENDITURE	(See Categories listed at the top Event Expense	of this schedule)	Supplies for campaign or	r officeholder purpos	ies
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, T	X, officeholder living expense	
9 Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH				Office held	
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid	
	\$48.72	02/01/2024			
PAYEE	(a) Payee name		(b) Payee address;	City, St	ate, Zip Code
	5 Points Market		401 S Getty St		
			Uvalde, TX 78801		
PURPOSE OF	(a) Category		(b) Description		
EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Fuel for campaign or officeholder purposes		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, T	X, officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder	name Offi	ce sought	Office held	
expenditure to benefit C/OH					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid	
	\$143.71	02/02/2024			
PAYEE	(a) Payee name		(b) Payee address;	City, St	ate, Zip Code
			407 E Garden St		
	Uvalde Country Clu	ıb			
			Uvalde, TX 78801		
PURPOSE OF	(a) Category	-646	(b) Description		
	(See Categories listed at the top Food/Beverage Expe		Meeting for campaign or	officeholder purpose	es
X Political					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, T	X, officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder	name Offi	ce sought	Office held	
expenditure to benefit C/OH					

### SCHEDULE F4

	SCHEDULE F4							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expe Fees Food/Beve /- Gift/Award I Committee Legal Serv	rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	blicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District THER (enter a category not listed above)				
	· · · · · · · · · · · · · · · · · · ·	ruction Guide explains n	ow to complete this form.	1				
<b>1</b> Total pages Schedule F4:				<b>3</b> Filer ID (Ethics Commission Filers)				
Sch: 11/57 Rpt: 16/62	King, Tracy O. (The	e Honorable)		00021143				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 5,609.35				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$6.95	02/02/2024						
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code				
			185 Berry Street					
	Lyft, Inc.		Suite 5000					
			San Francisco, CA 94107	,				
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Taxi for campaign or offic	eholder purposes				
X Political								
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 sought Office held				Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$24.00	(b) Date of Charge 02/03/2024	(c) Date(s) Credit Card Issue	r Paid				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
			407 E Garden St					
	Uvalde Country Clu	D	Uvalde, TX 78801					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top		Meeting for campaign or o	officeholder purposes				
X Political	Food/Beverage Expe	nse						
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		ffice sought	Office held				
expenditure to benefit C/OH			Ŭ					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$120.00	02/03/2024						
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
			407 E Garden St					
	Uvalde Country Clu	ıb						
			Uvalde, TX 78801					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Meeting for campaign or o	officeholder purposes				
X Political								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, TX,	officeholder living expense				
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Of	ffice sought	Office held				
expenditure to benefit C/OH								

				0		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Pol	Event Ex Fees Food/Bev By - Gift/Awar	rerage Expense F ds/Memorials Expense F	ES FOR BOX 10(a) oan Repayment/Reimbursement Office Overhead/Rental Expense Printing Expense Printing Expense alaries/Wages/Contract Labor	Solicitation/Fundraisir Transportation Equipr Travel in District Travel Out of District OTHER (enter a categ	nent & Related E	
	The Ins	truction Guide explains ho	w to complete this form.			
1 Total pages Schedule F	4: 2 FILER NAME			3 Filer ID (Et	hics Commiss	ion Filers)
Sch: 12/57 Rpt: 17/6	2 King, Tracy O. (Th	e Honorable)		00021143		
4 CREDIT CARD ISSUER		ancial institution previous	5 TOTAL OF UNITEM EXPENDITURES CHARGED TO A CI CARD	\$	5,609.3	5
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid		
	\$123.60	02/03/2024				
7 PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code
	Affordable Storage	e #4	260 W North Lane			
			Uvalde, TX 78801			
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the to Office Overhead/Ren	,	Storage for campaig	n or officeholder p	urposes	
Non-Political	(C) Check if travel outside	e of Texas. Complete Schedule T	Check if Au	stin, TX, officeholder living e	exnense	
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought			Office held			
expenditure to benefit C/O			C C			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid		
	\$34.97	02/03/2024				
PAYEE	(a) Payee name Shell Oil Sabinal	1	(b) Payee address; 101 West Fisher Av	City, enue	State,	Zip Code
			Sabinal, TX 78881			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Travel In District	p of this schedule)	(b) Description Fuel for campaign o	r officeholder purpo	oses	
Non-Political	(C) Check if travel outside	e of Texas. Complete Schedule T	Check if Au	stin, TX, officeholder living e	xpense	
Complete ONLY if direct			ce sought	Office held	•	
expenditure to benefit C/O	н					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid		
	\$43.90	02/05/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Exxon, : Pearsall		111 Interstate 35			·
			Pearsall, TX 78061			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the to	p of this schedule)	Fuel for campaign o	r officeholder purpo	oses	
X Political	Travel In District					
Non-Political	(c) Check if travel outside	e of Texas. Complete Schedule T		stin, TX, officeholder living e	vnense	
Complete ONLY if direct		· · · · · · · · · · · · · · · · · · ·	ce sought	Office held	vhense	
expenditure to benefit C/O			ee oougin	Child Held		

Forms provided by Texas Ethics Commission

### SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)     Constitute Ligners     Constitute     Constit     Constitute     Constitute     Constit     Constitute     Co		EXPENDITOR	SCHEDULE F4						
Marking During Controlleg Variations Market Controlleg Variations Market Controlleg Variations Market Controlleg Variations Variations Controlleg Variations Variations Controlleg Variations Controlleg Variations Controlleg Variations Controlleg Variations Controlleg Variations Controlleg Variations Controlleg Variations Schedul Variatio Schedul Variations Schedul Variations Sch									
Account system of Control system of the control s		EXPENDITURE CATEGORIES FOR BOX 10(a)							
Sch: 13/57 Rp: 18/62         King, Tracy O. (The Honorable)         00021143           CREDIT CARD INSURER         Name of finam-loal institution see previous         5         TOTAL OF UNITENIZED CARD.ED TO A CREDIT CARD.ED TO A C		Accounting/Banking Consulting Expense Contributions/ Donations Made By	Fees Food/Beve - Gift/Award I Committee Legal Serv	erage Expense s/Memorials Expense rices	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District			
Sch: 13/57 Rp: 18/62         King, Tracy O. (The Honorable)         00021143           CREDIT CARD INSURER         Name of finam-loal institution see previous         5         TOTAL OF UNITENIZED CARD.ED TO A CREDIT CARD.ED TO A C		Total names Schedule E4:	2 EILER NAME			3 Filer ID (Ethics Commission Filers)			
4       CREDIT CARD ISSUER       Name of financial institution see previous       5       TOTAL OF UNITEMIZED CHARGE TO A CREDIT CHARGE TO A CREDIT S55.00       \$       5,609.35         6       PAYMENT       (a) Amount Charged \$55.00       (b) Date of Charge O2/07/2024       (c) Date(s) Credit Card Issuer Paid         7       PAYEE       (a) Payee name Cricket Wireless LLC       (b) Payee address: Cricket Wireless LLC       City.       State.       Zip Code         8       PURPOSE OF EXPENDITURE       (a) Catagory (se casports listed it me to all this stretule) Office Overhead/Rental Expense       Phone for campaign or officeholder purposes       Phone for campaign or officeholder purposes         9       Complete DALV if direct expenditure to benefit C/OH       (a) Amount Charged S30.56       (b) Date of Charge O2/08/2024       (c) Date(s) Credit Card Issuer Paid       Office held         PAYEE       (a) Payee name HEB #4       (b) Date of Charge O2/08/2024       (b) Payee address: City.       City.       State.       Zip Code         PURPOSE OF EXPENDITURE (C) Check I travel coatiste of Team coatiste of	Ľ			Honorable)					
ISSUER     See previous     EXPENDITURES CARGE TO A CREDIT CARGE TO A CREDIT CARGE TO A CREDIT CARGE TO A CREDIT     \$     5,609.35       6     PAYMENT     (a) Amount Charged S55.00     (b) Date of Charge 02/07/2024     (c) Date(s) Credit Card Issuer Paid       7     PAYEE     (a) Payee name Cricket Wireless LLC     (b) Payee address; Cricket Wireless LLC     City, State, Zip Code       8     PurPOSE OF EXPENDITURE Cricket Wireless LLC     (b) Description Phone for campaign or officeholder purposes     (c) Category Cricket Wireless LLC     (c) Category Cricket Wireless LLC     (c) Category Cricket Wireless LLC     (c) Category Phone for campaign or officeholder purposes       9     Complete DNLY if direct expenditure to benefit C/OH     (a) Amount Charged S30.56     (b) Date of Charge O2/08/2024     (c) Date(s) Credit Card Issuer Paid       PAYEE     (a) Payee name HEB #4     (b) Payee address; City, State, Zip Code 201 E Main St     City, State, Zip Code 201 E Main St       PURPOSE OF EXPENDITURE Complete DNLY if direct expenditure to benefit C/OH     (a) Category Faxed Category     (b) Payee address; City, State, Zip Code 201 E Main St       PURPOSE OF EXPENDITURE Complete DNLY if direct expenditure to benefit C/OH     (c) Category S52.38     (c) Date(s) Credit Card Issuer Paid       PURPOSE OF EXPENDITURE Complete DNLY if direct expenditure to benefit C/OH     (c) Category S52.38     (c) Category S52.38     (c) Date(s) Credit Card Issuer Paid       PURPOSE OF EXPENDITURE Complete DNLY if direct PURPOSE OF EXPENDITU		•		-					
7       PAYEE       (a) Payee name       (b) Payee address:       City,       State,       Zip Code         8       PURPOSE OF EXPENDITURE       (a) Category       (b) Payee address:       City,       State,       Zip Code         9       Complete ONLY if direct       (a) Category       (b) Description       Phone for campaign or office-holder purposes         9       Complete ONLY if direct       Candidate/Office-holder name       Office sought       Office held         9       Complete ONLY if direct       Candidate/Office-holder name       Office sought       Office held         PAYEE       (a) Payee name       (b) Date of Charge       (c) Date (s) Credit Card Issuer Paid       City, State, Zip Code         PAYEE       (a) Payee name       (b) Date of Charge       (c) Date (s) Credit Card Issuer Paid       City, State, Zip Code         PAYEE       (a) Payee name       (b) Date of Charge       (c) Date (s) Credit Card Issuer Paid       City, State, Zip Code         PAYEE       (a) Category       (b) Date of Charge       (b) Description       Fuel Nation St         Walde, TX 78801       (b) Description       Fuel Nation St       City, State, Zip Code         QDILY if direct       Candidate/Office-holder name       Office sought       Office held         PAYEE       (a) Amount Charged<					EXPENDITURES CHARGED TO A CRED	\$ 5,609.35			
PAYEE       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         7 PAYEE       (a) Category       Atlanta, GA 30324       Atlanta, GA 30324         8 PURPOSE OF       (b) Description       Phone for campaign or officeholder purposes       Phone for campaign or officeholder purposes         9 Political       (c) Concil # time lowable of Texas. Complete Schedule T       Citex # Austin, TX, afficibitate liking expense         9 Complete QNLY if direct       Candidate/Officeholder name       Office ocupation       Office hold         PAYEE       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Date of Charge       (b) Description         PAYEE       (a) Category       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Category       (b) Date of Charge       (b) Description         FXPENDITURE       (a) Category       (b) Description       Fuel for campaign or officeholder purposes         PAYEE       (a) Category       (b) Description       Fuel for campaign or officeholder purposes         Travel Out of District       (c) Candidate/Officeholder name       Office sought       Office hold         PAYEE       (a) Amount Charged       (b) Date of Charge       O2/08/2024	6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid			
Image: State in the second state in			\$55.00	02/07/2024					
Cricket Wireless LLC       Atlanta, GA 30324         8       PURPOSE OF EXPENDITURE       (a) Category         Non-Political       (b) Description         Non-Political       (c)	7	PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
Atlanta, GA 30324         8       PURPOSE OF EXPENDITURE         (a) Category (See Category (See Category) (See Category) (S			Orightet Münchene III	0	575 Morose Dr. NE				
8       PURPOSE OF EXPENDITURE       (a) Category (b) Description       (b) Description         9       Complete QNLY if direct expenditure to benefit C/OH       Candidate/OfficeHolder name       Office sought       Office held         9       Complete QNLY if direct expenditure to benefit C/OH       Candidate/OfficeHolder name       Office sought       Office held         9       Complete QNLY if direct expenditure to benefit C/OH       (a) Amount Charged \$30.56       (b) Date of Charge Q2/08/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name HEB #4       (b) Payee address; Q20 E Main St       City, State, Zip Code Q20 E Main St         PURPOSE OF EXPENDITURE       (c) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description         PAYEE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (c) Catedory (See Categories listed at the top of this schedule) Travel Out of District       (b) Description         PAYEE       (a) Amount Charged S52.38       (b) Date of Charge Q2/08/2024       (c) Cate(i Austin, TX, officeHolder Iwing expense         PAYMENT       (a) Amount Charged S52.38       (b) Date of Charge Q2/08/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Amount Charged S52.38       (b) Date of Charge Q2/08/2024       (c) Date(s) Credit Card Issuer Paid         PAYMENT       (a) Amou									
EXPENDITURE       Cesc caregones italed at the top of this schedule)       Phone for campaign or officeholder purposes         Political       (c)       Check if travel dusted er Texas. Complete Schedule T.       Check if Austin. TX, officeholder living expense         9       Complete QNLY if direct expenditure to benefit C/OH       Candidate/Officeholde rume       Office sought       Office heid         PAYMENT       (a) Amount Charged       (b) Date of Charge       (c) Cate(s) Credit Card Issuer Paid       City, State, Zip Code         PAYEE       (a) Payee name       (b) Payee address;       City, State, Zip Code       201 E Main St         PURPOSE OF       (a) Category       (b) Description       Fuel for campaign or officeholder purposes         Fave       (a) Category       (b) Description       Fuel for campaign or officeholder purposes         Travel Out of District       Candidate/Officeholder name       Office sought       Office heid         PAYEE       (a) Amount Charged       (b) Date of Charge       (c) Check if Austin. TX, officeholder living expense         Complete QNLY if direct       Candidate/Officeholder name       Office sought       Office heid         PAYEE       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card									
Image: Second State Sta	8		() 0 )	of this schodule)	., .				
Image: Non-Political       (c) □ Creck if #avel outside of Toxas. Complete Schedule T.       Check if #avel, TX. officeholder #wing expense         9 Complete QNLY if direct       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         PURPOSE OF       (a) Category       (b) Category       (b) Description       (c) Description       Fuel for campaign or officeholder purposes         PURPOSE OF       (a) Category       (b) Date of Charge       (c) Description       Fuel for campaign or officeholder purposes         Mon-Political       (c) □ Creeck if #avel outside of Texas. Complete Schedule T.       □ Creeck if #avel outside of Texas. Complete Schedule T.       □ Creeck if #avel outside of Texas. Complete Schedule T.       □ Creeck if #avel outside of Texas. Complete Schedule T.       □ Creeck if #avel outside of Texas. Complete Schedule T.       □ Creeck if #avel outside of Texas. Complete Schedule T.       □ Creeck if #avel outside of Texas. Complete Schedule T.       □ Creeck if #avel outside of Texas. Complete Schedule T.       □ Creeck if #avel outside of Texas. Complete Schedule T.       □ Creeck if #avel outside of Texas. Complete Schedule T.       □ Creeck if #avel outside of Texas. Complete Schedule T.       □ Creeck if #avel outside of Texas. Complete Schedule T.       □ Creeck if #avel					Phone for campaign or officeholder purposes				
9       Complete QNLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged \$30.56       (b) Date of Charge 02/08/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name HEB #4       (b) Payee address; 02/08/2024       City, State, Zip Code 201 E Main St         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Fuel for campaign or officeholder purposes         Mon-Political       (c)       Check if ravel outside of Texas. Complete Schedule T.       Check if Austin. TX, officeholder living expense         Complete QNLY if direct expenditure to benefit C/OH       (a) Amount Charged \$52.38       (b) Date of Charge 02/08/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Amount Charged \$52.38       (b) Date of Charge 02/08/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name \$52.38       (b) Date of Charge 02/08/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name \$52.38       (b) Date of Charge 02/08/2024       (b) Payee address; 02/08/2024       City, State, Zip Code 1800 I-37 N         George West, TX 78022       (b) Description Fuel for campaign or officeholder purposes       For campaign or officeholder purposes         PURPOSE OF EXPENDITURE       (a) Category (See		X Political		•					
expenditure to benefit C/OH       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYMENT       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         PAYEE       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         PURPOSE OF       (a) Category       (b) Categories listed at the top of this schedule)       (b) Description       Fuel for campaign or officeholder purposes         POIRTICAL       (c) Check if ravel outside of Texas. Complete Schedule T       Check if Austin. TX, afficeholder living expense         Complete QNLY if direct       Candidate/Officeholder name       Office sought       Office held         PAYEE       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYMENT       (a) Amount Charged       (b) Date of Charge       Office sought       Office held         PAYMENT       (a) Amount Charged       (b) Date of Charge       Office sought       Office held         PAYEE       (a) Amount Charged       (b) Date of Charge       Office sought       Office held         PAYEE       (a) Amount Charged       (b) Date of Charge       Office held       Stripes George West       George West, TX 78022         PURPOSE OF       (a) Payee name       (b) Dat						÷ ,			
PAYMENT       (a) Amount Charged \$30.56       (b) Date of Charge 02/08/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name HEB #4       (b) Payee address; 201 E Main St       City, State, Zip Code         PURPOSE OF EXPENDITURE       (a) Category (See Calegories listed at the top of this schedule) Travel Out of District       (b) Description Fuel for campaign or officeholder purposes         Mon-Political Non-Political       (c) Check if travel outside of Texas. Complete Schedule T. Travel Office holder name       Office sought       Office held         PAYEE       (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid       Office held       State, Zip Code         PAYMENT       (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid       Office held       State, Zip Code         PAYEE       (a) Payee name Stripes George West       (b) Payee address; (c) Date(s) Credit Card Issuer Paid       Zip Code         PAYEE       (a) Payee name Stripes George West       (b) Payee address; (c) Date(s) TX 78022       City, State, Zip Code         PURPOSE OF EXPENDITURE       (a) Category (See Cargeories listed at the top of this schedule) Travel Out of District       (b) Description Fuel for campaign or officeholder purposes         PURPOSE OF EXPENDITURE       (c)Check if travel outside of Texas. Complete Schedule) Travel Out of District       Check if Austin, TX, officeholder purposes         Mon-Political			Candidate/Officeholder	name C	ffice sought	Office held			
PAYEE       (a) Payee name       (b) Payee address; City, State, Zip Code 201 E Main St         HEB #4       Uvalde, TX 78801         PURPOSE OF EXPENDITURE       (a) Category       (b) Description         Non-Political       (c) C neck if travel outside of Texas. Complete Schedule)       (b) Description         Non-Political       (c) C neck if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder Ining expense         Complete QNLY if direct       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid       Zip Code         PAYEE       (a) Payee name       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid       Zip Code         PAYMENT       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid       Zip Code         PAYEE       (a) Payee name       (b) Payee address; City, State, Zip Code       Stripes George West, TX 78022       State, Zip Code         PURPOSE OF EXPENDITURE       (a) Category       (b) Description       Fuel for campaign or officeholder purposes       Zip Code         PAYEE       (a) Category       (b) Description       Fuel for campaign or officeholder purposes       Zip Code         PAYEE       (a) Category       (b) Descrip	e								
PAYEE       (a) Payee name       (b) Payee address; City, State, Zip Code         HEB #4       Uvalde, TX 78801         PURPOSE OF       (a) Category       (b) Description         FVERDITURE       (a) Category       (b) Description         Non-Political       (c) C neck if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Complete QNLY if direct       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Payee name       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         Stripes George West       George West, TX 78022       City, State, Zip Code         IB00 I-37 N       Stripes George West       (b) Description         [sec categories isted at the top of this schedule)       Fuel for campaign or officeholder purposes         Travel Out of District       (b) Description         [sec Categories isted at the top of this schedule)       Fuel for campaign or officeholder purposes         Travel Out of District		PAYMENT		, , , , , , , , , , , , , , , , , , ,	(c) Date(s) Credit Card Issu	ier Paid			
HEB #4       201 E Main St         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Fuel for campaign or officeholder purposes         Mon-Political       (c)			\$30.56	02/08/2024					
HEB #4       Uvalde, TX 78801         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Fuel for campaign or officeholder purposes         Non-Political       (c) _ check if travel outside of Texas. Complete Schedule T.       _ Check if Austin, TX, officeholder living expense         Complete QNLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged \$52.38       (b) Date of Charge 02/08/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Stripes George West       (b) Payee address; Caegorge West, TX 78022       City, State, Zip Code 1800 I-37 N         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Fuel for campaign or officeholder purposes         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Fuel for campaign or officeholder purposes         Mon-Political       (c) _ check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Mon-Political       (c) _ check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Mon-Political       (c) _ check if travel outside of Texas. Complete Schedule T.       Check i		PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
PURPOSE OF EXPENDITURE       (a) Category (see Categories listed at the top of this schedule) Travel Out of District       (b) Description Fuel for campaign or officeholder purposes         Political       (c) _ check if travel outside of Texas. Complete Schedule T.       _ check if Austin, TX, officeholder living expense         Complete QNLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged \$52.38       (b) Date of Charge 02/08/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Stripes George West       (b) Payee address; City, State, Zip Code 1800 I-37 N       City, State, Zip Code 1800 I-37 N         PURPOSE OF EXPENDITURE       (a) Category (see Categories listed at the top of this schedule) Travel Out of District       (b) Description Fuel for campaign or officeholder purposes         Political       (c) _ check if travel outside of Texas. Complete Schedule T.       (b) Description Fuel for campaign or officeholder purposes         Political       (c) _ check if travel outside of Texas. Complete Schedule T.       (b) Description Fuel for campaign or officeholder purposes         Mon-Political       (c) _ check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Mon-Political       (c) _ check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Non-Political       <					201 E Main St				
PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Fuel for campaign or officeholder purposes         Non-Political       (c) check if travel outside of Texas. Complete Schedule T.       check if Austin, TX, officeholder living expense         Complete QNLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged \$52.38       (b) Date of Charge 02/08/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         BURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule)       (b) Description       Fuel for campaign or officeholder purposes         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule)       (b) Description       Fuel for campaign or officeholder purposes         X Political       (c) Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         X Political       (c) Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         X Political       (c) Check if travel outside of Texas. Complete Schedule T.			ПСD #4						
EXPENDITURE       (See Categories listed at the top of this schedule) Travel Out of District       Fuel for campaign or officeholder purposes         Non-Political       (c)									
Image: Second				of this schedule)					
Non-Political       (c) Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense         Complete QNLY if direct       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged \$52.38       (b) Date of Charge 02/08/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Stripes George West       (b) Payee address; City, State, Zip Code 1800 I-37 N         PURPOSE OF EXPENDITURE       (a) Category (see Categories listed at the top of this schedule) Travel Out of District       (b) Description Fuel for campaign or officeholder purposes         Mon-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 sought		_		· · · · · · · · · · · · · · · · · · ·	Fuel for campaign or on	icenoider purposes			
Complete QNLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged \$52.38       (b) Date of Charge 02/08/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Stripes George West       (b) Payee address; 02/08/2024       City, State, Zip Code 1800 I-37 N         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Fuel for campaign or officeholder purposes         Mon-Political       (c) Check it travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Complete QNLY if direct       Candidate/Officeholder name       Office sought       Office held									
expenditure to benefit C/OH       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYMENT       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Payee address;       City,         Stripes George West       (b) Payee address;       City,       State,       Zip Code         PURPOSE OF       (a) Category       (see Categories listed at the top of this schedule)       George West, TX 78022       (b) Description         Fuel for campaign or officeholder purposes       Travel Out of District       (b) Description       Fuel for campaign or officeholder purposes         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 sought       Office held						÷ ,			
PAYEE       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         Stripes George West       (b) Payee address;       City,       State,       Zip Code         Stripes George West       George West, TX 78022       George West, TX 78022         PURPOSE OF       (a) Category       (b) Description       Fuel for campaign or officeholder purposes         X 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 sought       Office held	e	·	Candidate/Officenoider	name C	ance sought	Onice held			
PAYEE       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         Stripes George West       B00 I-37 N       George West, TX 78022       George West, TX 78022         PURPOSE OF       (a) Category       (b) Description       Fuel for campaign or officeholder purposes         X Political       (c) Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Complete QNLY if direct       Candidate/Officeholder name       Office sought       Office held	Г	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid			
(b) F dy Go Mathe       (c) F dy Go Mathe       (c) F dy Go Mathe         Stripes George West       1800 I-37 N         George West, TX 78022         (b) Description         [X] Political       (c) Check if travel outside of Texas. Complete Schedule T.         [Complete QNLY if direct       Candidate/Officeholder name			\$52.38	02/08/2024					
Stripes George West     George West, TX 78022       PURPOSE OF EXPENDITURE     (a) Category (See Categories listed at the top of this schedule) Travel Out of District     (b) Description Fuel for campaign or officeholder purposes       Non-Political     (c) Check if travel outside of Texas. Complete Schedule T.     Check if Austin, TX, officeholder living expense       Complete QNLY if direct     Candidate/Officeholder name     Office sought     Office held		PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
PURPOSE OF EXPENDITURE     (a) Category (See Categories listed at the top of this schedule) Travel Out of District     (b) Description Fuel for campaign or officeholder purposes       Non-Political     (c) Check if travel outside of Texas. Complete Schedule T.     Check if Austin, TX, officeholder living expense       Complete QNLY if direct     Candidate/Officeholder name     Office sought     Office held				. 1	1800 I-37 N				
PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Fuel for campaign or officeholder purposes         X       Political       (c) Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Complete QNLY if direct       Candidate/Officeholder name       Office sought       Office held			Stripes George we	St					
EXPENDITURE       (See Categories listed at the top of this schedule) Travel Out of District       Fuel for campaign or officeholder purposes         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 sought       Office held	L				-	2			
X     Political     Indentified and particular partin particular particular particular particular particular			() 0 )	of this schedule)	., .				
Image: Non-Political       Image: Complete ONLY if direct       Candidate/Officeholder name       Office sought       Check if Austin, TX, officeholder living expense         Complete ONLY if direct       Candidate/Officeholder name       Office sought       Office held					Fuel for campaign or off	iceholder purposes			
Complete ONLY if direct     Candidate/Officeholder name     Office sought     Office held									
		Non-Political		· · · · · · · · · · · · · · · · · · ·		÷ ,			
	e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name C	ffice sought	Office held			

	EXPENDITOR	SCHEDULE F4					
	EXPENDITURE CATEGORIES FOR BOX 10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	erage Expense s/Memorials Expense rices	Office Overhead/Rental Expense Polling Expense Printing Expense	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 F4:		· · · · · · · · ·	· · · · ·	<b>3</b> Filer ID (Ethics Commission Filers)		
Ľ	Sch: 14/57 Rpt: 19/62	King, Tracy O. (The	Honorable)		00021143		
4	CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZED			
	ISSUER		revious	EXPENDITURES CHARGED TO A CREDI CARD	<b>\$</b> 5,609.35		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
		\$30.98	02/09/2024				
7	PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code		
		Evett's BBQ		301 East Main Street			
		Evens BBQ					
				Uvalde , TX 78801			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Meeting for campaign or	officeholder nurnoses		
X Political		Food/Beverage Expe	nse		oncentrate purposes		
	Non-Political				N. Marka Islandi ing sumana		
<u>م</u>	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	X, officeholder living expense Office held		
	xpenditure to benefit C/OH	Canalate, Childenoidei		nice cought			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
		\$85.52	02/10/2024				
	PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code		
		Walmart Super Center 782		3100 East Main Street			
		Waiman Super Cer					
				Uvalde , TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	Supplies for campaign or officeholder purposes		
	X Political	Office Overhead/Ren	tal Expense		romeenolder purposes		
	Non-Political		of Texas. Complete Schedule		X, officeholder living expense		
⊢	Complete <u>ONLY</u> if direct	(c) Check if travel outside		ffice sought	Office held		
e	xpenditure to benefit C/OH						
⊢	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
		\$32.30	02/11/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
				501 W. Main Street			
		Sunrise Restaurant	Ι				
L				Uvalde, TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	officebolder purpesse		
		Food/Beverage Expe		Meeting for campaign or	onicenoider purposes		
	X Political						
⊢	Non-Political		of Texas. Complete Schedule		X, officeholder living expense		
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held		

	EXPENDITOR	SCHEDULE F4						
	EXPENDITURE CATEGORIES FOR BOX 10(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	erage Expense is/Memorials Expense rices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.	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 F4:				3 Filer ID (Ethics Commission Filers)			
Ľ	Sch: 15/57 Rpt: 20/62	King, Tracy O. (The	e Honorable)		00021143			
4	CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZE				
	ISSUER		revious	EXPENDITURES CHARGED TO A CRED CARD	<b>\$</b> 5,609.35			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
		\$47.54	02/13/2024					
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
		Circle K -Castroville	2	1498 US hwy 90 E				
			5					
L				Castroville, TX 78009				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Fuel for campaign or of	ficeholder nurnoses			
	X Political	Travel Out of District		Fuer for campaight of or	incentitier purposes			
	Non-Political							
F		(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, T.	TX, officeholder living expense Office held			
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Onicenoidei	name O	nice sought	Onice held			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
		\$8.41	02/14/2024					
	PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code			
		Luff Inc		185 Berry Street				
		Lyft, Inc.		Suite 5000				
				San Francisco, CA 941	07			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Taxi for campaign or of	fiachaldar purpaga			
	_	Travel Out of District	,	Taxi for campaight of on	icenoider purposes			
	X Political							
	Non-Political	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, T ffice sought	TX, officeholder living expense Office held			
е	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Onicerioidei	name O	fille sought	Onice neid			
⊢	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
		\$32.72	02/17/2024					
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
				1000 Zaragosa				
		La Posada Hotel - I	Restaurant					
L				Laredo, TX 78040				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	r officebolder surgeoce			
		Food/Beverage Expe		Meeting for campaign o	n onicenoider purposes			
	X Political							
L	Non-Political		of Texas. Complete Schedule		TX, officeholder living expense			
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held			

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Bev - Gift/Award	erage Expense F Is/Memorials Expense F	ES FOR BOX 10( oan Repayment/Reimb Diffice Overhead/Rental Yolling Expense Printing Expense Balaries/Wages/Contract	ursement So Expense Tra Tra Tra	plicitation/Fundraising ansportation Equipm avel in District avel Out of District THER (enter a categ	ent & Related E	
		The Inst	truction Guide explains ho	w to complete this	form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	nics Commiss	sion Filers)
	Sch: 16/57 Rpt: 21/62	King, Tracy O. (The	e Honorable)			00021143		
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDIT	UNITEMIZED URES TO A CREDIT	\$	5,609.3	35
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cr	edit Card Issuer	r Paid		
		\$38.57	02/22/2024					
7	PAYEE	(a) Payee name	•	(b) Payee add	lress;	City,	State,	Zip Code
		5 Points Market		401 S Getty	St			
				Uvalde, TX	78801			
8	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top	o of this schedule)	Fuel for carr	npaign or office	eholder purpo	ses	
	X Political	Travel In District						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	kpense	
9 Complete ONLY if direct Candidate/Officeholder name Office sought					Office held			
	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cr	edit Card Issuer	r Paid		
		\$494.94	02/23/2024					
	PAYEE	(a) Payee name		(b) Payee add	lress;	City,	State,	Zip Code
				207 Highlan	d St			
		Hotel Paisano						
				Marfa, TX 7	9843			
	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top Travel Out of District	o of this schedule)	Lodging for	campaign or c	officeholder pu	urposes	
	X Political							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	kpense	
	Complete ONLY if direct	Candidate/Officeholde	r name Offi	ice sought		Office held		
е	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cr	edit Card Issuer	r Paid		
		\$245.26	02/23/2024					
	PAYEE	(a) Payee name		(b) Payee add	lress;	City,	State,	Zip Code
				37 NE Loop	410			
		Estancia del Norte	Hotel					
1				San Antonio	, TX 78216			
Γ	PURPOSE OF	(a) Category		(b) Description	า			
1	EXPENDITURE	(See Categories listed at the top Travel Out of District	o of this schedule)	Lodging for	campaign or c	officeholder pu	urposes	
1	X Political							
1	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	kpense	
F	Complete <u>ONLY</u> if direct	Candidate/Officeholde	r name Offi	ice sought		Office held		
e	expenditure to benefit C/OH							

	SCHEDULE F4					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve / - Gift/Award I Committee Legal Serv	rage Expense s/Memorials Expense ices	IES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ow to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schodule E4:	· · · · · · · · · · · · · · · · · · ·			3 Filer ID (Ethics Commission Filers)		
1 Total pages Schedule F4:				- · · · ,		
Sch: 17/57 Rpt: 22/62	King, Tracy O. (The			00021143		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CREE CARD	<b>\$</b> 5,609.35		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
	\$7.97	02/24/2024				
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code		
			185 Berry Street			
	Lyft, Inc.		Suite 5000			
			San Francisco, CA 941	07		
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Taxi for campaign or officeholder purposes			
X Political						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			T. Check if Austin,	TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Of	ffice sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$27.65	(b) Date of Charge 02/26/2024	(c) Date(s) Credit Card Iss	uer Paid		
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
			501 S Getty			
	Julios BBQ and gril	I	Uvalde, TX 78801			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top of this schedule) Food/Beverage Expense		Meeting for campaign or officeholder purposes			
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 Of	ffice sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
	\$44.01	02/26/2024				
PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code		
			111 Interstate 35			
	Exxon, : Pearsall					
			Pearsall, TX 78061			
PURPOSE OF	(a) Category		(b) Description			
	(See Categories listed at the top Travel In District	ui mis schedule)	Fuel for campaign or of	ficeholder purposes		
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 Of	ffice sought	Office held		
expenditure to benefit C/OH						

	EXPENDITOR	SCHEDULE F4					
	EXPENDITURE CATEGORIES FOR BOX 10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	erage Expense s/Memorials Expense	Office Overhead/Rental Expense Polling Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
		The Inst	ruction Guide explains h	ow to complete this form.			
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
	Sch: 18/57 Rpt: 23/62	King, Tracy O. (The	e Honorable)		00021143		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CRED CARD	\$ 5,609.35		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid		
		\$30.15	03/01/2024				
7	PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code		
		Uvalde Country Clu	ıh	407 E Garden St			
			U				
L				Uvalde, TX 78801			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Meeting for campaign of	r officeholder nurnoses		
		Food/Beverage Expe	nse		oncentitier purposes		
	Non-Political		of Tourse, Oormalate, Ooksaduda	T Dobach if Austin 7	N		
<u>م</u>	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	CX, officeholder living expense		
	xpenditure to benefit C/OH			inter eeugine			
⊢	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid		
		\$36.81	03/01/2024				
	PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code		
		Uvalde Country Club		407 E Garden St			
		Ovalue Country Cit	U				
				Uvalde, TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Meeting for campaign of	r officebolder nurnoses		
	X Political	Food/Beverage Expe	nse		i onicenolder purposes		
	Non-Political		of Tourse, Oormalate, Ooksaduda	T Dobashit Austin 7	N		
-	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	X, officeholder living expense Office held		
e	xpenditure to benefit C/OH			inter eeugine			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid		
		\$41.14	03/01/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
				407 E Garden St			
		Uvalde Country Clu	ID				
L				Uvalde, TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	r officebolder surgesse		
		Food/Beverage Expe		Meeting for campaign of	i omcenoluer purposes		
	X Political						
⊢	Non-Political		of Texas. Complete Schedule		TX, officeholder living expense		
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held		

	EXPENDITOR	SCHEDULE F4					
	EXPENDITURE CATEGORIES FOR BOX 10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	erage Expense s/Memorials Expense rices	Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
	Total pages Cabadula E4:		ruction Guide explains h	low to complete this form.	2 Filer ID (Ethics Commission Filers)		
1	Total pages Schedule F4:		Llonoroblo)		3 Filer ID (Ethics Commission Filers)		
	Sch: 19/57 Rpt: 24/62	King, Tracy O. (The	-		00021143		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CRED CARD	\$ 5,609.35		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid		
		\$56.29	03/01/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Uvalde Country Clu	ıb	407 E Garden St			
			u				
				Uvalde, TX 78801			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
		Food/Beverage Expense		Meeting for campaign or officeholder purposes			
	X Political						
	Non-Political		of Texas. Complete Schedule		X, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held		
Ē		(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid		
		\$77.50	03/01/2024				
⊢	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
				103 S.Getty			
		USPS - Uvalde					
				Uvalde, TX 78801			
	PURPOSE OF	(a) Category		(b) Description			
		(See Categories listed at the top Office Overhead/Ren		Postage for campaign o	r officeholder purposes		
	X Political		•				
	Non-Political		of Texas. Complete Schedule		X, officeholder living expense		
	Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held		
e	xpenditure to benefit C/OH PAYMENT	(a) Amount Charged	(b) Data of Charge	(a) Data(a) Cradit Card Ioau	uer Deid		
	PAYMENI	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid		
		\$80.11	03/01/2024				
	PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code		
			. h	407 E Garden St			
		Uvalde Country Clu	u				
L		( ) -		Uvalde, TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	r officebolder nurnesse		
		Food/Beverage Expe		Meeting for campaign or	omcenoider purposes		
	X Political						
L	Non-Political		of Texas. Complete Schedule		X, officeholder living expense		
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held		

	EXPENDITOR	SCHEDULE F4				
	EXPENDITURE CATEGORIES FOR BOX 10(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	erage Expense s/Memorials Expense rices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
	Total pages Schedule F4:	2 FILER NAME	•	•	3 Filer ID (Ethics Commission Filers)	
[	Sch: 20/57 Rpt: 25/62	King, Tracy O. (The	e Honorable)		00021143	
4	CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZE		
	ISSUER		revious	EXPENDITURES CHARGED TO A CREE CARD	<b>\$</b> 5,609.35	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid	
		\$136.97	03/01/2024			
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	
		Uvalde Country Clu	ıb	407 E Garden St		
			u			
				Uvalde, TX 78801		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description		
	_	Food/Beverage Expe		Meeting for campaign or officeholder purposes		
	X Political					
	Non-Political		of Texas. Complete Schedule		TX, officeholder living expense	
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held	
	xpenditure to benefit C/OH PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uor Doid	
	PATMENT	(a) Amount Charged \$2.59	03/01/2024	(c) Date(s) Credit Card iss		
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	
		5 Points Market		401 S Getty St		
		5 POINTS Market				
				Uvalde, TX 78801		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Fuel for campaign or of	fiechelder nurnesse	
	_	Travel In District	· · · · · · · · · · · · ,	Fuer for campaign or of	licenoider purposes	
	X Political					
	Non-Political	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule		TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officenoider	name O	ffice sought	Office held	
Ľ	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid	
			, , , , , , , , , , , , , , , , , , ,			
		\$8.46	03/01/2024			
-	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	
				401 S Getty St		
l		5 Points Market				
L				Uvalde, TX 78801		
	PURPOSE OF	(a) Category	of this cohectule)	(b) Description		
		(See Categories listed at the top Travel In District	or this schedule)	Fuel for campaign or of	ticeholder purposes	
	X Political					
L	Non-Political		of Texas. Complete Schedule		TX, officeholder living expense	
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held	

	SCHEDULE F4					
	EXPENDITURE CATEGORIES FOR BOX 10(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award al Committee Legal Serv	erage Expense s/Memorials Expense rices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
<b>1</b> Total pages Schedule F4:	·			3 Filer ID (Ethics Commission Filers)		
Sch: 21/57 Rpt: 26/62	King, Tracy O. (The	Honorable)		00021143		
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZ			
ISSUER		revious	EXPENDITURES CHARGED TO A CRE CARD	<b>\$</b> 5,609.35		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid		
	\$102.79	03/01/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	Casal's Package Si	tore	2026 East Main Street			
	Casals Fackage S	lore				
			Uvalde, TX 78801			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	or officeholder purposes		
Event Expense			or oncentitier purposes			
X Political						
	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin	, TX, officeholder living expense Office held		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Oniceriolder	name O	since sought	Onice neid		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid		
	\$35.38	03/02/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	Exxon Mobile, Uvalde		East Main Street			
	Exxon Mobile, Uvai	lue				
			Uvalde, TX 78801			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	(b) Description Fuel for campaign or officeholder purposes		
	Travel In District	,		incenduel pulposes		
X Political						
Non-Political	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin	, TX, officeholder living expense Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Onicenoider	name O	ance sought	Onice held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid		
	\$39.08	03/04/2024				
	ψ39.00	03/04/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
			501 S Getty			
	Julios BBQ and gril	I				
			Uvalde, TX 78801			
	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
	Food/Beverage Expe		Meeting for campaign	or officeholder purposes		
X Political						
Non-Political		of Texas. Complete Schedule		, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	office sought	Office held		

	SCHEDULE F4						
		ENDITURE CATEGOR		.,			
Advertising Expense Accounting/Banking Consulting Expense	Event Expe Fees Food/Beve	ense vrage Expense	Loan Repayment/Re Office Overhead/Rer Polling Expense	ntal Expense Tra	vlicitation/Fundraising Expense ansportation Equipment & Related Expense avel in District		
Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Award	s/Memorials Expense	Printing Expense Salaries/Wages/Con	Tra	avel Out of District THER (enter a category not listed above)		
	The Inst	ruction Guide explains h	now to complete t	his form.			
<b>1</b> Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
Sch: 22/57 Rpt: 27/62	King, Tracy O. (The	e Honorable)			00021143		
4 CREDIT CARD ISSUER		ncial institution		OF UNITEMIZED	<b>\$</b> 5,609.35		
	see p	revious	CHARG CARD	CHARGED TO A CREDIT			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	-	Credit Card Issue	l r Paid		
	\$123.60	03/04/2024					
7 PAYEE	(a) Payee name		(b) Payee a		City, State, Zip Code		
	Affordable Storage	#4	260 W No	orth Lane			
			Uvalde, T	X 78801			
8 PURPOSE OF	(a) Category		(b) Descrip				
	(See Categories listed at the top Office Overhead/Rent		Storage fo	Storage for campaign or officeholder purposes			
X Political							
Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule		Check if Austin, TX,	officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Onicenoider	name O	office sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	r Paid		
	\$40.74	03/05/2024					
PAYEE	(a) Payee name		(b) Payee a		City, State, Zip Code		
	Circle K -Castroville	9	1498 US	nwy 90 E			
			Castroville	e, TX 78009			
PURPOSE OF	(a) Category		(b) Descrip				
	(See Categories listed at the top Travel Out of District	of this schedule)	Fuel for ca	Fuel for campaign or officeholder purposes			
X Political				_			
Non-Political Complete <u>ONLY</u> if direct	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	office sought	Check if Austin, TX,	officeholder living expense Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$55.00	03/07/2024					
PAYEE			(1-) Davida				
PATEE	(a) Payee name		(b) Payee a 575 Moro		City, State, Zip Code		
	Cricket Wireless LL	.C		SC DI. NE			
			Atlanta, G	A 30324			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip		fiachaldar nurnasaa		
	Office Overhead/Ren		Priorie for	campaign or on	ficeholder purposes		
Non-Political		of Texas. Complete Schedule		Check if Austin TV	officeholder living expense		
Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder		)ffice sought		Office held		
expenditure to benefit C/OH							

	EXPENDITOR	SCHEDULE F4					
	EXPENDITURE CATEGORIES FOR BOX 10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	erage Expense s/Memorials Expense rices	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Iravel in District Travel Out of District DTHER (enter a category not listed above)		
	Total pages Cabadula E4:		ruction Guide explains r	now to complete this form.	2 Filer ID (Ethios Commission Filers)		
1	Total pages Schedule F4:		Llonoroblo)		3 Filer ID (Ethics Commission Filers)		
L	Sch: 23/57 Rpt: 28/62	King, Tracy O. (The			00021143		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$ 5,609.35		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
		\$84.44	03/08/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Uvalde Country Clu	ıb	407 E Garden St			
			U				
L				Uvalde, TX 78801			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Meeting for campaign or	officebolder nurnoses		
	X Political	Food/Beverage Expe		Meeting for campaign of	unceriolaer purposes		
	Non-Political		(T		6 <b>6</b> 1 1 1 1		
-	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	C, officeholder living expense		
	expenditure to benefit C/OH	ounduite, onicentituel		nice sought			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
		\$46.66	03/12/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Oasis Outback		2900 E Main			
		Oasis Oulback					
				Uvalde, TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Meeting for campaign or	Meeting for campaign or officeholder purposes		
	X Political	Food/Beverage Expe	nse		unceriolaer purposes		
	Non-Political		of Taura Committee Cale adula		( . #		
-	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	C, officeholder living expense           Office held		
e	xpenditure to benefit C/OH			nice cought	0		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
		\$26.60	03/12/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
				3100 East Main Street			
		Walmart Super Cer	nter 782				
				Uvalde , TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	e office helder autores		
	_	Office Overhead/Ren		Supplies for campaign of	omcenoider purposes		
	X Political						
⊢	Non-Political		of Texas. Complete Schedule		C, officeholder living expense		
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held		

	EXPENDITOR	SCHEDULE F4					
	EXPENDITURE CATEGORIES FOR BOX 10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	erage Expense is/Memorials Expense rices	Office Overhead/Rental Expense T Polling Expense T Printing Expense T	Solicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District DTHER (enter a category not listed above)		
1	Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)		
Ľ	Sch: 24/57 Rpt: 29/62	King, Tracy O. (The	Honorable)		00021143		
4	CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZED			
	ISSUER		revious	EXPENDITURES CHARGED TO A CREDI CARD	\$ 5,609.35		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
		\$34.61	03/15/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Exxon Mobile, Uva	Ido	East Main Street			
			lue				
				Uvalde, TX 78801			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Fuel for campaign or offic	caboldar nurnosas		
	X Political	Travel In District			central purposes		
	Non-Political						
		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, T>	C, officeholder living expense Office held		
	Complete <u>ONLY</u> if direct openditure to benefit C/OH	Candidate/Onicenoidei	name O	nice sought	Onice neid		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
		\$59.03	03/17/2024				
	PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code		
		Sunrise Restaurant		501 W. Main Street			
		Sullise Restaurall	L				
				Uvalde, TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	Meeting for campaign or officeholder purposes		
	_	Food/Beverage Expe	nse		uncentitier purposes		
	X Political						
<u> </u>	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, TS ffice sought	c, officeholder living expense Office held		
e>	complete <u>ONE</u> if direct kpenditure to benefit C/OH	Canalatic, Chiecholder	liune 0	nice sought			
_	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
		\$76.17	03/18/2024				
-	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
				2026 East Main Street			
		Casal's Package S	tore				
L				Uvalde, TX 78801			
	PURPOSE OF	(a) Category		(b) Description			
		(See Categories listed at the top Event Expense	oi triis schedulė)	Supplies for campaign or	officeholder purposes		
	X Political						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	General contract of the second sec		
e>	Complete <u>ONLY</u> if direct kpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held		
—							

	SCHEDULE F4					
EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award al Committee Legal Serv	rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.	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 F4:	·	•	•	3 Filer ID (Ethics Commission Filers)		
Sch: 25/57 Rpt: 30/62	King, Tracy O. (The	Honorable)		00021143		
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZE			
ISSUER		revious	EXPENDITURES CHARGED TO A CREI CARD	<b>\$</b> 5,609.35		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid		
	\$47.51	03/19/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	Circle K -Castroville		1498 US hwy 90 E			
	Circle K -Castroville	;				
			Castroville, TX 78009			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
	Travel Out of District		Fuel for campaign or officeholder purposes			
X Political						
Non-Political		of Texas. Complete Schedule		, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name C	office sought	Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid		
	\$8.59	03/20/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
			185 Berry Street			
	Lyft, Inc.		Suite 5000			
			San Francisco, CA 941	107		
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Description			
	Travel Out of District	of this schedule)	Taxi for campaign or o	Taxi for campaign or officeholder purposes		
X Political						
Non-Political		of Texas. Complete Schedule		, TX, officeholder living expense		
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name C	Office sought	Office held		
expenditure to benefit C/OH	(a) Amount Chargod	(b) Data of Charge	(a) Data(a) Cradit Card la	auer Deid		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid		
	\$51.96	03/21/2024				
PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code		
			407 E Garden St			
	Uvalde Country Clu	D				
			Uvalde, TX 78801			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
	Food/Beverage Expe		Meeting for campaign	or officeholder purposes		
X Political						
Non-Political		of Texas. Complete Schedule		, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name C	office sought	Office held		

			D	SCHEDULE F4		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expe Fees Food/Beve /- Gift/Award I Committee Legal Serv	rage Expense s/Memorials Expense ices	Loan Repayment/Reinbursement Office Overhead/Rental Expense Tr Polling Expense Tr Printing Expense Tr	olicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District THER (enter a category not listed above)		
	· · · · · · · · · · · · · · · · · · ·	ruction Guide explains n	low to complete this form.			
<b>1</b> Total pages Schedule F4:				<b>3</b> Filer ID (Ethics Commission Filers)		
Sch: 26/57 Rpt: 31/62	King, Tracy O. (The	e Honorable)		00021143		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 5,609.35		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$6.90	03/22/2024				
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code		
			185 Berry Street			
	Lyft, Inc.		Suite 5000			
			San Francisco, CA 94107	7		
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Taxi for campaign or offic	Taxi for campaign or officeholder purposes		
X Political						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, TX,	, officeholder living expense		
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Of	ffice sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$15.12	(b) Date of Charge 03/19/2024	(c) Date(s) Credit Card Issue	r Paid		
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
			301 East Main Street	301 East Main Street		
	Evett's BBQ					
			Uvalde , TX 78801			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expen	,	(b) Description Meeting for campaign or o	(b) Description Meeting for campaign or officeholder purposes		
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 Of	ffice sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$35.46	03/23/2024				
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code		
	Europ Mahila Ukual		East Main Street			
	Exxon Mobile, Uval	de				
			Uvalde, TX 78801			
PURPOSE OF	(a) Category	of this color	(b) Description			
	(See Categories listed at the top Travel In District	u uns schedule)	Fuel for campaign or offic	eholder purposes		
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 Of	ffice sought	Office held		
expenditure to benefit C/OH						

	EXPENDITOR	SCHEDULE F4				
	EXPENDITURE CATEGORIES FOR BOX 10(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	erage Expense s/Memorials Expense rices	Office Overhead/Rental Expense Polling Expense Printing Expense	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 F4:				<b>3</b> Filer ID (Ethics Commission Filers)	
Ľ	Sch: 27/57 Rpt: 32/62	King, Tracy O. (The	Honorable)		00021143	
4	CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZE		
	ISSUER		revious	EXPENDITURES CHARGED TO A CRED CARD	\$ 5,609.35	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid	
		\$44.31	03/24/2024			
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	
		Ofelia's Restaurant		1296 West Main Street		
		Olella S Restaurant				
L				Uvalde, TX 78801		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Meeting for campaign or	officebolder nurnoses	
	X     Political   Food/Beverage Expense		Meeting for earnpaign of	oncentitier purposes		
	Non-Political		of Tourse Operations Ophendula			
a	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	X, officeholder living expense Office held	
	xpenditure to benefit C/OH	Canalactic, Childenolaci		nice cought		
⊢	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid	
		\$20.02	03/24/2024			
-	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	
				3100 East Main Street		
		Walmart Super Cer	nter 782			
				Uvalde , TX 78801		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description		
	_	Office Overhead/Ren		Supplies for campaign o	i oncenoider purposes	
	X Political					
	Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expense Office held	
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Onicenoider	name O	file sought	Once neu	
F	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid	
		\$42.63	03/26/2024			
		+ 12.00				
	PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code	
		Ever Llanda		Hwy 90		
		Exxon Hondo				
L				Hondo, TX 78861		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Fuel for campaign or off	iceholder nurnoses	
	_	Travel Out of District	·		icendiael halhoses	
	X Political					
⊢		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expense Office held	
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH		name O	nice sought		

	EXPENDITOR	SCHEDULE F4					
	EXPENDITURE CATEGORIES FOR BOX 10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Award	erage Expense s/Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
		The Inst	ruction Guide explains h	now to complete this form.			
1	Total pages Schedule F4:				<b>3</b> Filer ID (Ethics Commission Filers)		
	Sch: 28/57 Rpt: 33/62	King, Tracy O. (The	-	- I	00021143		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	<b>\$</b> 5,609.35		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
		\$22.31	03/27/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		HEB 424		609 19th Street			
Ļ		(a) Catagony		(b) Description			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	Fuel for campaign or offi	ceholder nurnoses		
	Travel Out of District						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		X, officeholder living expense		
9	Complete <u>ONLY</u> if direct	Candidate/Officeholder	•	ffice sought	Office held		
	xpenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
		\$46.23	03/31/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		5 Points Market		401 S Getty St			
		5 POINTS Market					
				Uvalde, TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	Fuel for campaign or officeholder purposes		
	X Political	Travel Out of District					
	Non-Political		of Tourse, Oormalate, Ooksaduda				
_	Complete <u>ONLY</u> if direct	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	X, officeholder living expense Office held		
e	xpenditure to benefit C/OH			nice cought			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
		\$58.57	04/02/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		E Deinte Merlet		401 S Getty St			
		5 Points Market					
L				Uvalde, TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Fuel for campaign or offi	icebolder nurneses		
	_	Travel In District	<i>`</i>		icenoluer hurhoses		
⊢	Non-Political	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, T ffice sought	X, officeholder living expense Office held		
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Onicenolder	name U	ance sought			

	SCHEDULE F4				
EXPENDITURE CATEGORIES FOR BOX 10(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic	By - Gift/Award al Committee Legal Serv	erage Expense Is/Memorials Expense vices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.	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 F4:				3 Filer ID (Ethics Commission Filers)	
Sch: 29/57 Rpt: 34/62	King, Tracy O. (The	e Honorable)		00021143	
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZE		
ISSUER		revious	EXPENDITURES CHARGED TO A CREE CARD	\$ 5,609.35	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid	
	\$29.22	04/03/2024			
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	
	Uvalde Country Clu	ıb	407 E Garden St		
		U			
			Uvalde, TX 78801		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	or officeholder purposes	
X Political	Food/Beverage Expense			oncentitier purposes	
Non-Political		(T			
9 Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	TX, officeholder living expense Office held	
expenditure to benefit C/OH			nice sought	Onice field	
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid	
	\$81.45	04/03/2024			
PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code	
	Austin Land & Catt		1205 N Lamar Blvd		
	Austin Lanu & Call	ie			
			Austin, TX 78703		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	or officeholder purposes	
	Food/Beverage Expe	nse		of oncentities purposes	
X Political					
Complete <u>ONLY</u> if direct	(c) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living expense Office held	
expenditure to benefit C/OH			nice sought		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid	
	\$41.14	04/04/2024			
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	
			407 E Garden St		
	Uvalde Country Clu	lp di			
			Uvalde, TX 78801		
	(a) Category (See Categories listed at the top	of this schedulo)	(b) Description		
	Food/Beverage Expe		Meeting for campaign o	or officeholder purposes	
X Political					
Non-Political		of Texas. Complete Schedule		TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name O	ffice sought	Office held	

				-		_
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Exp Fees Food/Beve y - Gift/Award	erage Expense P Is/Memorials Expense P	ES FOR BOX 10(a) oan Repayment/Reimbursement Office Overhead/Rental Expense Vinting Expense Salaries/Wages/Contract Labor	Solicitation/Fundraisin Transportation Equipn Travel in District Travel Out of District OTHER (enter a categ	nent & Related E	
	The Inst	ruction Guide explains ho	w to complete this form.			
<b>1</b> Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Et	hics Commiss	ion Filers)
Sch: 30/57 Rpt: 35/62	King, Tracy O. (The	e Honorable)		00021143		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEM EXPENDITURES CHARGED TO A CL CARD	\$	5,609.3	5
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	l Issuer Paid		
	\$6.87	04/04/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Lyft, Inc.		185 Berry Street Suite 5000 San Francisco, CA 9	94107		
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Taxi for campaign o	r officeholder purpo	oses	
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Au	ustin, TX, officeholder living e	xpense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offi	ce sought	Office held	-	
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	l Issuer Paid		
	\$123.60	04/04/2024				
PAYEE	(a) Payee name Affordable Storage	#4	(b) Payee address; 260 W North Lane Uvalde, TX 78801	City,	State,	Zip Code
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Office Overhead/Ren	,	Storage for campaig	gn or officeholder pi	urposes	
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Au	ustin, TX, officeholder living e	xpense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name Offi	ce sought	Office held		
PAYMENT	(a) Amount Charged \$105.93	(b) Date of Charge 04/05/2024	(c) Date(s) Credit Card	l Issuer Paid		
PAYEE	(a) Payee name		(b) Payee address; 2815 Galveston Stre	City, eet	State,	Zip Code
	Carmin's Flower &	Gift	Laredo, TX 78043			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Gift/Awards/Memoria		Gift for campaign or	officeholder purpo	ses	
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Au	ustin, TX, officeholder living e	xpense	
Complete <u>ONLY</u> if direct	Candidate/Officeholder	· · · · · · · · · · · · · · · · · · ·	ce sought	Office held		
expenditure to benefit C/OH			-			

### SCHEDULE F4

	EXPENDITOR	SCHEDULE F4					
	EXPENDITURE CATEGORIES FOR BOX 10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.	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 F4:				3 Filer ID (Ethics Commission Filers)		
	Sch: 31/57 Rpt: 36/62	King, Tracy O. (The	Honorable)		00021143		
4	CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZE			
	ISSUER		revious	EXPENDITURES CHARGED TO A CRED CARD	<b>\$</b> 5,609.35		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid		
		\$21.64	04/05/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Cricket Wireless LL	C	575 Morose Dr. NE			
L				Atlanta, GA 30324			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Phone for campaign or	officebolder nurnoses		
	X         Political   Office Overhead/Rental Expense		i none for campaign of	uncentitier purposes			
	Non-Political		(7. 0. 1. 0.1.1.				
-	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	TX, officeholder living expense Office held		
	xpenditure to benefit C/OH	Candidate/Oniceriolder		ince sought			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
		\$36.35	04/05/2024				
	PAYEE	(a) Payee name	l	(b) Payee address;	City, State, Zip Code		
		Exxon Mobile, Uvalde		East Main Street			
			ue				
				Uvalde, TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	Fuel for campaign or officeholder purposes		
	X Political	Travel In District		r der för eampaign ör ön			
	Non-Political	(a) Chaok if travel outside	of Texas. Complete Schedule		TX, officeholder living expense		
⊢	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	•	ffice sought	Office held		
e	xpenditure to benefit C/OH		-				
⊢	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
		\$70.37	04/06/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
				407 E Garden St			
		Uvalde Country Clu	ID				
				Uvalde, TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	r officebolder aurages		
		Food/Beverage Expe		Meeting for campaign o	n oncenoider purposes		
	X Political						
⊢	Non-Political		of Texas. Complete Schedule		TX, officeholder living expense		
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder		ffice sought	Office held		

		EX	PENDITURE CATEGORI	ES FOR BOX 10	(a)			
Accounting/Banking Fee Consulting Expense Foo Contributions/ Donations Made By - Gift		/ - Gift/Awa	verage Expense F Irds/Memorials Expense F	Loan Repayment/Reiml Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contra	Expense Tr Tr Tr	olicitation/Fundraisin ansportation Equipm avel in District avel Out of District THER (enter a categ	ent & Related I	
	The Instruction Guide explains how to complete this form.							
<b>1</b> To	otal pages Schedule F4:	2 FILER NAME				3 Filer ID (Etl	nics Commiss	sion Filers)
So	ch: 32/57 Rpt: 37/62	King, Tracy O. (T	ne Honorable)			00021143		
	REDIT CARD SUER		ancial institution previous	EXPENDI	UNITEMIZED IURES D TO A CREDIT	\$	5,609.3	35
6 P/	AYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cr	redit Card Issue	r Paid		
		\$7.36	04/06/2024					
7 P/	AYEE	(a) Payee name		(b) Payee add	dress;	City,	State,	Zip Code
		Lyft, Inc.		185 Berry S	street			
		Suite 5000						
					sco, CA 94107	•		
	URPOSE OF XPENDITURE	(a) Category (See Categories listed at the t	op of this schedule)	(b) Descriptio		oboldor purpo		
Ι_	X Political	Travel Out of Distric		Taxi lor can	npaign or offic	enoluer purpu	565	
	Non-Political	(C) Check if travel outside	le of Texas. Complete Schedule T		Check if Austin, TX,	officeholder living e	kpense	
	omplete <u>ONLY</u> if direct enditure to benefit C/OH	Candidate/Officehold	er name Off	ice sought		Office held		
P/	AYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cr	redit Card Issue	r Paid		
		\$47.95	04/06/2024					
P/	AYEE	(a) Payee name		(b) Payee add	dress;	City,	State,	Zip Code
		Walmart 4102		1151 US W	hy 90			
				Castroville,	TX 78009			
	URPOSE OF	(a) Category		(b) Descriptio	n			
	XPENDITURE	(See Categories listed at the t Office Overhead/Re		Supplies for	r campaign or	officeholder p	urposes	
Ī	Non-Political	(C) Check if travel outsid	le of Texas. Complete Schedule T	· ·	Check if Austin, TX,	officeholder living e	kpense	
Co	omplete <u>ONLY</u> if direct	Candidate/Officehold	er name Off	ice sought		Office held		
expe	enditure to benefit C/OH							
P/	AYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cr	redit Card Issue	r Paid		
		\$23.15	04/06/2024					
P/	AYEE	(a) Payee name		(b) Payee add	dress;	City,	State,	Zip Code
				501 S Getty	,			
		Julios BBQ and g	rill					
				Uvalde, TX				
		(a) Category (See Categories listed at the t	on of this schedulo)	(b) Descriptio				
_		Food/Beverage Exp		Meeting for	campaign or o	officeholder pi	urposes	
	X Political							
	Non-Political	(C) Check if travel outside	le of Texas. Complete Schedule T		Check if Austin, TX,	officeholder living e	kpense	
	omplete <u>ONLY</u> if direct enditure to benefit C/OH	Candidate/Officehold	er name Off	ice sought		Office held		

# SCHEDULE F4

	SCHEDULE F4						
	EXPENDITURE CATEGORIES FOR BOX 10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	erage Expense s/Memorials Expense rices	Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
	Total pages Schedule F4:		••••	· · · · ·	3 Filer ID (Ethics Commission Filers)		
Ľ	Sch: 33/57 Rpt: 38/62	King, Tracy O. (The	Honorable)		00021143		
4	CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZE			
	ISSUER		revious	EXPENDITURES CHARGED TO A CRED CARD	\$ 5,609.35		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid		
		\$55.00	04/06/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Cricket Wireless LL	C	575 Morose Dr. NE			
			Atlanta, GA 30324				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	officebolder purpeses		
Office Overhead/Rental Expense			Phone for campaign or officeholder purposes				
	X Political						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. 9 Complete ONLY if direct Candidate/Officeholder name Office			T. Check if Austin, T ffice sought	X, officeholder living expense Office held			
	Complete <u>ONLY</u> if direct spenditure to benefit C/OH	Candidate/Officenoider	name O	nice sought	Onice neid		
-	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid		
		\$47.21	04/06/2024				
		<b><i>Q</i></b> 11122	0 1100/2021				
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		5 Points Market		401 S Getty St			
		5 POINTS MAIKEL					
				Uvalde, TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Fuel for campaign or off	icoboldor purposos		
	—	Travel In District			icentities pulposes		
	X Political						
		(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	X, officeholder living expense Office held		
e	Complete <u>ONLY</u> if direct spenditure to benefit C/OH	Candidate/Onicenoider	name O	nice sought	Onice neu		
H	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid		
		\$32.25	04/07/2024				
		<b>4</b> 52.25	04/01/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
				501 W. Main Street			
		Sunrise Restaurant	I				
				Uvalde, TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
		Food/Beverage Expe		Meeting for campaign of	omcenoiaer purposes		
	X Political						
	Non-Political		of Texas. Complete Schedule		X, officeholder living expense		
	Complete <u>ONLY</u> if direct spenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held		

SCHEDUL							
	EXPENDITURE CATEGORIES FOR BOX 10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	erage Expense s/Memorials Expense rices	Office Overhead/Rental Expense Polling Expense Printing Expense	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 F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Ľ	Sch: 34/57 Rpt: 39/62	King, Tracy O. (The	e Honorable)		00021143		
4	CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZE			
	ISSUER	see p	revious	EXPENDITURES CHARGED TO A CRED CARD	<b>\$</b> 5,609.35		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ler Paid		
		\$639.00	04/10/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
				11920 Alterra Parkway			
VRBO							
				Austin, TX 78758			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
Travel Out of District			Lodging for campaign or officeholder purposes				
	X Political						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				X, officeholder living expense			
	Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	Office sought	Office held		
e	xpenditure to benefit C/OH				Deld		
	PAYMENT	(a) Amount Charged \$2.57	(b) Date of Charge 04/10/2024	(c) Date(s) Credit Card Issu	ier Paid		
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
				185 Berry Street			
		Lyft, Inc.		Suite 5000			
				San Francisco, CA 9410	)7		
	PURPOSE OF	(a) Category		(b) Description			
		(See Categories listed at the top Travel Out of District	of this schedule)	Taxi for campaign or officeholder purposes			
	X Political						
	Non-Political		of Texas. Complete Schedule		X, officeholder living expense		
	Complete ONLY if direct	Candidate/Officeholder	name O	Office sought	Office held		
e	xpenditure to benefit C/OH				Deid		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid		
		\$7.21	04/10/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Lyft, Inc.		185 Berry Street			
I		Lyn, 110.		Suite 5000	_		
⊢				San Francisco, CA 9410	)/		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Taxi for campaign or off	iceholder nurnoses		
1	X Political	Travel Out of District					
┡	Non-Political	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expense Office held		
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Canundale/Oniceriolder	name U	ance sought			

	SCHEDULE SCHEDULE						
			ENDITURE CATEGOR	• •			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	erage Expense s/Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
		The Inst	now to complete this form.				
1	Total pages Schedule F4:	2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)		
	Sch: 35/57 Rpt: 40/62	King, Tracy O. (The	e Honorable)		00021143		
4		Name of fina	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES	<b>\$</b> 5,609.35		
	ISSUER	see previous		CHARGED TO A CREDI CARD	+ /		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
		\$39.93	04/10/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Austin Land & Catt		1205 N Lamar Blvd			
		Austin Lanu & Call					
			Austin, TX 78703				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Meeting for campaign or	officeholder nurnoses		
X Political Food/Beverage Expense							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule		X, officeholder living expense		
			ffice sought	Office held			
	expenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
		\$44.26	04/11/2024				
	PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code		
		HEB 441		201 E. Main Street			
_	PURPOSE OF	(a) Category		(b) Description			
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Supplies for campaign o	r officeholder purposes		
	X Political	Office Overhead/Ren	tal Expense				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T.	X, officeholder living expense		
	Complete ONLY if direct	Candidate/Officeholder		ffice sought	Office held		
е	xpenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
		\$86.03	04/11/2024				
	PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code		
		Livaldo Country Clu	ıh	407 E Garden St			
		Uvalde Country Clu	U.				
⊢		(a) Category		Uvalde, TX 78801 (b) Description			
	PURPOSE OF EXPENDITURE	(See Categories listed at the top		Meeting for campaign or	officeholder purposes		
	X Political	Food/Beverage Expe	nse				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin T	X, officeholder living expense		
⊢	Complete ONLY if direct	Candidate/Officeholder		ffice sought	Office held		
e	xpenditure to benefit C/OH						

			D	SCHEDULE F4			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve / - Gift/Award I Committee Legal Serv	rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement S Office Overhead/Rental Expense T Polling Expense T Printing Expense T	Solicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District DTHER (enter a category not listed above)			
<b>1</b> Total pages Schedule F4:		•	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)			
Sch: 36/57 Rpt: 41/62	King, Tracy O. (The	Honorable)		00021143			
•		ncial institution	5 TOTAL OF UNITEMIZED				
4 CREDIT CARD ISSUER		revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,609.35			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$6.82	04/12/2024					
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
			185 Berry Street				
	Lyft, Inc.		Suite 5000				
			San Francisco, CA 9410 <sup>-</sup>	7			
8 PURPOSE OF (a) Category			(b) Description				
EXPENDITURE (See Categories listed at the top of this schedule)		Taxi for campaign or offic	ceholder purposes				
X Political Travel Out of District							
				, officeholder living expense			
			fice sought	Office held			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	oundiduite/onicentiduel	iname of	nee sought				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	Pr Paid			
	\$14.21	04/12/2024	(0) Date(0) 0.0011 0010 10001				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
			501 W. Main Street				
	Sunrise Restaurant						
			Uvalde, TX 78801				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Meeting for campaign or officeholder purposes				
X Political	FUUU/Deverage Expe	1156					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule 1	Г. Check if Austin, TX	, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Of	fice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$37.60	04/13/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
			2900 E Main				
	Oasis Outback						
			Uvalde, TX 78801				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Meeting for campaign or	officeholder purposes			
X Political	Food/Beverage Expe	nse					
Non-Political		of Taxas Complete Schedule		( officeholder living expanse			
	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	fice sought	C, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeriolder	name OI	nee sought				

	EXPENDITURE CATEGORIES FOR BOX 10(a)           Advertising Expense         Event Expense         Loan Repayment/Reimbursement           Accounting/Banking         Fees         Office Overhead/Rental Expense           Consulting Expense         Food/Beverage Expense         Polling Expense           Contributions/ Donations Made By -         Gift/Awards/Memorials Expense         Printing Expense           Candidate/Officeholder/Political Committee         Legal Services         Salaries/Wages/Contract Labor			nse Tra Tra Tra	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
		The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	ion Filers)
	Sch: 37/57 Rpt: 42/62	King, Tracy O. (The	e Honorable)			00021143		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNI EXPENDITURE CHARGED TO CARD	S	\$	5,609.3	5
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit	Card Issuer	Paid		
		\$58.69	04/13/2024					
7	PAYEE	(a) Payee name		(b) Payee address	;	City,	State,	Zip Code
		5 Points Market		401 S Getty St				
				Uvalde, TX 7880	01			
8	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top Travel In District	o of this schedule)	Fuel for campai	gn or office	eholder purpo	ses	
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX,			k if Austin, TX, (	officeholder living ex	pense		
9 Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH				Office held				
F	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit	Card Issuer	Paid		
		\$56.30	04/14/2024	(0) Date(0) Crouit				
	PAYEE	(a) Payee name Uvalde Country Clu	ŋ	(b) Payee address 407 E Garden S		City,	State,	Zip Code
				Uvalde, TX 7880	01			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expe	,	(b) Description Meeting for cam	ipaign or o	fficeholder pu	irposes	
	Non-Political		of Taylog, Complete Cabadula T		k if Austin TV	officeholder living ov		
⊢	Complete <u>ONLY</u> if direct	(C) Check if travel outside Candidate/Officeholde	of Texas. Complete Schedule T.	ce sought	K II AUSUII, TX, G	officeholder living ex Office held	pense	
е	expenditure to benefit C/OH			-				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit	Card Issuer	Paid		
		\$1.19	04/18/2024					
	PAYEE	(a) Payee name		(b) Payee address	;	City,	State,	Zip Code
		Exxon Jourdanton		3220 Zandersor	n Ave			
1				Jourdanton, TX	78026			
Γ	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Beverage for ca	mpaign or	officeholder p	ourposes	
1	Non-Political	(c) Chack if travel outside	of Texas. Complete Schedule T.		k if Auctin TV	officeholder living ex	nense	
⊢	Complete ONLY if direct	(C) Check if travel outside Candidate/Officeholde		ce sought	к п Ausun, TA, (	Office held	pense	
e	expenditure to benefit C/OH	Surfaction Onlice Holde	Ulli Olli	ee oougin		Child Hold		

Forms provided by Texas Ethics Commission

### SCHEDULE F4

	EXPENDITOR	SCHEDULE F4					
	EXPENDITURE CATEGORIES FOR BOX 10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	erage Expense s/Memorials Expense rices	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)		
	Total pages Cabadula E4:		ruction Guide explains h	iow to complete this form.	2 Files ID (Ethios Commission Filese)		
1	Total pages Schedule F4:		Llonoroblo)		3 Filer ID (Ethics Commission Filers)		
	Sch: 38/57 Rpt: 43/62	King, Tracy O. (The	-	5 TOTAL OF UNITEMIZE	00021143		
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDITURES CHARGED TO A CREE CARD	<b>\$</b> 5,609.35		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
		\$30.51	04/18/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Murphy Oil Compa	0.4	P.O. Box 7000			
			ny				
			El Dorado, AR 71738-7	000			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Fuel for campaign or of	ficebolder nurnoses		
	X Political				incentituer purposes		
Non-Political         (c)         Check if travel outside of Texas. Complete Schedule T.           9         Complete ONLY if direct         Candidate/Officeholder name         Offic			T. Check if Austin, ffice sought	TX, officeholder living expense Office held			
9 Complete ONLY if direct         Candidate/Officeholder name         Office sought         Office held           expenditure to benefit C/OH				Onice neid			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
		\$32.46	04/19/2024				
	PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code		
		Casal's Package S	tore	2026 East Main Street			
		Casals Fackage S	lore				
				Uvalde, TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	or officeholder purposes		
	X Political	Event Expense		Supplies for campaign			
	Non-Political		/= 0 1 0 0 1				
	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	TX, officeholder living expense Office held		
е	expenditure to benefit C/OH	Canalate, Chiecholder	liane 0	nice sought			
-	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
		\$22.28	04/19/2024				
_	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		(a) Fayee hame		301 East Main Street			
		Evett's BBQ		Sor East Main Street			
				Uvalde , TX 78801			
	PURPOSE OF	(a) Category		(b) Description			
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Meeting for campaign o	or officeholder purposes		
	X Political	i oourbeveraye Expe					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living expense		
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held		
e	xpenditure to benefit C/OH						

SCHED							
		EXPE	ENDITURE CATEGOR	RIES FOR BOX 10(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve / - Gift/Award I Committee Legal Serv	ense rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
	Sch: 39/57 Rpt: 44/62	King, Tracy O. (The	e Honorable)		00021143		
4	CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZE			
	ISSUER		revious	EXPENDITURES CHARGED TO A CRED CARD	<b>\$</b> 5,609.35		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid		
		\$38.28	04/21/2024				
7	PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code		
				1296 West Main Street			
		Ofelia's Restaurant					
				Uvalde, TX 78801			
8	PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE         (See Categories listed at the top of this schedule)            Food/Beverage Expense			Meeting for campaign or officeholder purposes				
	X Political						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			T. Check if Austin, T	X, officeholder living expense			
	9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
e	xpenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid		
		\$37.66	04/21/2024				
	PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code		
		Circle K -Castroville		1498 US hwy 90 E			
		Circle K -Castroville	;				
				Castroville, TX 78009			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
	_	Travel Out of District		Fuel for campaign or off	icenoider purposes		
	X Political						
	Non-Political		of Texas. Complete Schedule		X, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name C	ffice sought	Office held		
Ľ		(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ler Daid		
	PATMENT			(c) Date(s) Credit Card Isst			
		\$6.00	04/23/2024				
	PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code		
				185 Berry Street			
1		Lyft, Inc.		Suite 5000			
				San Francisco, CA 9410	)7		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
		Travel Out of District	· · · · · · · · · · · · · · · · · · ·	Taxi for campaign or off	icenoluer purposes		
	X Political						
	Non-Political		of Texas. Complete Schedule		X, officeholder living expense		
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name C	ffice sought	Office held		

	EXP	ENDITURE CATEGOR	IES FOR BOX 10(a)			
	Accounting/Banking Fees		Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising Transportation Equipme Travel in District Travel Out of District DTHER (enter a catego	ent & Related I	
The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 40/57 Rpt: 45/62	King, Tracy O. (The	e Honorable)		00021143		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$	5,609.3	35
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
	\$14.99	04/23/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			185 Berry Street			
Lyft, Inc.		Suite 5000				
			San Francisco, CA 9410	7		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	-		
X Political	Travel Out of District		Taxi for campaign or offic	cenolder purpos	ses	
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	K, officeholder living exp	oense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name Of	ffice sought	Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
	\$337.35	04/23/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Stockyards Hotel		109 E Exchange Ave			
			Fort Worth, TX 76164			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Travel Out of District	or this schedule)	Lodging for campaign or	officeholder pu	rposes	
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	K, officeholder living exp	oense	
Complete ONLY if direct	Candidate/Officeholder	r name Of	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		
	\$6.57	04/24/2024				
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code
	Luft Inc		185 Berry Street			
	Lyft, Inc.		Suite 5000			
			San Francisco, CA 9410	7		
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Description			
	Travel Out of District	or this schedule)	Taxi for campaign or offic	ceholder purpos	ses	
X Political						
Non-Political		of Texas. Complete Schedule	T. Check if Austin, T	K, officeholder living exp	oense	
Complete ONLY if direct	Candidate/Officeholder	r name Of	ffice sought	Office held		
expenditure to benefit C/OH						

# SCHEDULE F4

	EXPENDITORES MADE BT CREDIT CARD SCHEDULE F4						
		EXP	ENDITURE CATEGOR	RIES FOR BOX 10(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	erage Expense s/Memorials Expense rices	Office Overhead/Rental Expense Polling Expense Printing Expense	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 F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
[	Sch: 41/57 Rpt: 46/62	King, Tracy O. (The	Honorable)		00021143		
4	CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZED			
	ISSUER		revious	EXPENDITURES CHARGED TO A CREDI CARD	<b>\$</b> 5,609.35		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
		\$70.36	04/24/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Correinto Flower 6	0:4	2815 Galveston Street			
		Carmin's Flower &	Gilt				
				Laredo, TX 78043			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
Gift/Awards/Memorials Expense			Gift for campaign or officeholder purposes				
	X Political						
	Non-Political		of Texas. Complete Schedule		X, officeholder living expense		
	9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
e	xpenditure to benefit C/OH				- Deid		
	PAYMENT	(a) Amount Charged \$44.63	(b) Date of Charge 04/26/2024	(c) Date(s) Credit Card Issu	er Paid		
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		<b>F 1 1 1 1</b>		3220 Zanderson Ave			
		Exxon Jourdanton					
				Jourdanton, TX 78026			
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Description			
		Travel In District	of this schedule)	Fuel for campaign or offi	ceholder purposes		
	X Political						
	Non-Political		of Texas. Complete Schedule		X, officeholder living expense		
	Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held		
e	xpenditure to benefit C/OH	(a) Amount Charged	(h) Data of Charge	(a) Data(a) Credit Card Jacu	an Daid		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Pald		
		\$41.41	04/27/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Evett's BBQ		301 East Main Street			
⊢		(a) Catagony		Uvalde , TX 78801 (b) Description			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	Meeting for campaign or	officeholder purposes		
	X Political	Food/Beverage Expe	nse				
	Non-Political		-(T		No. Mereka laka laka s		
⊢		(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, T.	X, officeholder living expense Office held		
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH		name O	nice sought			

Average prime Constrainty Gaussie Constrainty Gaussie C		SCHEDULE F4						
Mediation Clarate According/United by Provide Control Mathematical Mediation Control Mediation Control Mediation Control Mediation Mediation Control Mediation Mediation Control Mediation Mediation Control Mediation Mediation Control Mediation Me								
1       Total pages Schedule F4: Sch: 42/57 Rpt: 47/62       2       FILER NAME       3       Filer ID (Efficis Commission Files) 00021143         4       GREDT CARD ISSUER       Name of financial institution see previous       5       TOTAL OF UNTENEED EXPENDITURES CARD       5       5,609.35         6       PAYMENT       (a) Amount Charged (b) Payee name ST2.88       (b) Date of Charge 04/28/2024       (c) Date(s) Credit Card Issuer Paid       5       5,609.35         7       PAYEE       (a) Amount Charged (b) Payee name Sunrise Restaurant       (b) Payee address; Sol W. Main Street       City, State, Zip Code         8       PURPOSE OF EXPENDITURE (c) Category (c) Category diffe schedule) Food/Beverage Expense       (b) Description Meeting for campaign or officeholder purposes         7       On-Political (c) Category diffe schedule) Food/Beverage Expense       (c) Date of Charge OS/01/2024       (c) Cate(s) Credit Card Issuer Paid OS/01/2024         9       Candidate/Officeholder name       Office bolder schedule) Taxi for campaign or officeholder purposes         9       Candidate/Officeholder name       (c) Date of Charge OS/01/2024       (c) Date(s) Credit Card Issuer Paid OS/01/2024         PAYEE       (a) Payee name Lyft, Inc.       (b) Bayee address; Site 5000 San Francisco, CA 94107       City, State, Zip Code 185 Berry Street Suite 5000 San Francisco, CA 94107         PAYEE       (a) Amount Charged S9.69       (b) Date o	Accounting/Banking Consulting Expense Contributions/ Donations Made By	Event Exp Fees Food/Beve y - Gift/Award al Committee Legal Serv	ense erage Expense s/Memorials Expense rices	Loan Repayment/Reimbursement S Office Overhead/Rental Expense T Polling Expense T Printing Expense T Salaries/Wages/Contract Labor C	ransportation Equipment & Related Expense ravel in District ravel Out of District			
Sch: 42/57 Rp: 47/62         King. Tracy O. (The Honorable)         00021143           4 CREDIT CARD ISVER         Name of finamoli institution See previous         5 TOTAL OF UNITENIZED CARDED TO A CREDIT CARDED TO A CREDIT SUBJECT         5,609.35           7 PAYEE         (a) Amount Charged ST 2.88         (b) Date of Charge 04/28/2024         (c) Date(s) Credit Card Issuer Paid         5,609.35           7 PAYEE         (a) Payee name EXPENDITURE         (b) Payee address: Sunrise Restaurant EXPENDITURE         City, State, Zip Code SUBJECT         State, Zip Code SUBJECT           8 PURPOSE OF EXPENDITURE         (a) Category (b) Category Expense         (b) Description Meeting for Campaign or officeholder purposes         (b) Description Meeting for Card Issuer Paid         (c) Category (c) Category Expense           9 Complete QMLY if direct Lyft, Inc.         (c) Date(S) Credit Card Issuer Paid         (c) Date(S) Credit Card Issuer Paid         (c) Date(S) Credit Card Issuer Paid           9 PAYEE         (a) Amount Charged Lyft, Inc.         (b) Date of Charge O5/01/2024         (c) Date(S) Credit Card Issuer Paid         (c) Date(S) Credit Card Issuer Paid           9 PAYEE         (a) Category (bec Categories Issuer IssuerIssi Subsoci Lyft, Inc.         (b) Payee address: Subsoci Su	1 Total pages Schedule E4:	i			2 Filer ID (Ethics Commission Filers)			
4       CREDIT CARD ISBUER       Name of financial institution see previous       5       TOTAL OF UNITEMIZED CHARGED TO A CREDIT CHARGED TO A CREDIT       \$       5,609.35         6       PAYMENT       (a) Amount Charged S72.88       (b) Date of Charge O4/28/2024       (c) Date(s) Credit Card Issuer Paid         7       PAYEE       (a) Payee name Sunrise Restaurant       (b) Payee address; OU.W. Main Street Uvalde, TX 78801       City, State, Zip Code         8       PURPOSE OF EXPENDITURE       (a) Category (so catogors limed at me to of the schedule) Food/Beverage Expense       (b) Description Meeting for campaign or officeholder purposes         9       Complete DNLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office Sought       Office Rough         9       Complete DNLY if direct expenditure to benefit C/OH       (a) Amount Charged S7.68       (b) Date of Charge OS/OL2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Lyft, Inc.       (b) Date of Charge OS/OL2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Lyft, Inc.       (b) Payee address; S1 for campaign or officeholder purposes       City, State, Zip Code         18       Berry Street Suite 5000 San Francisco, CA 94107       City, State, Zip Code       S5 69         10       Obserption Taxi for campaign or officeholder purposes       10 Francisco, CA 94107 <tr< th=""><th></th><th></th><th>Honorable)</th><th></th><th> ,</th></tr<>			Honorable)		,			
ISSUER       See previous       EXPENDITURES CARGE TO A CREDIT CARR       S       5,609.35         6       PAYMENT       (a) Amount Charged S72.88       (b) Date of Charge 04/28/2024       (c) Date(s) Credit Card Issuer Paid         7       PAYEE       (a) Payee name Sunrise Restaurant       (b) Payee address: Sunrise Restaurant       City.       State.       Zip Code         8       Puppose of EXPENDITURE (c) C check 4 mark totake of text.       (b) Payee address: Sunrise Restaurant       City.       State.       Zip Code         9       Complete ONLY if direct expenditure to benefit COH       (a) Amount Charged 37.68       (b) Date of Charge 05/01/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Lyft, Inc.       (b) Payee address: City.       City.       State.       Zip Code         PAYEE       (a) Payee name Lyft, Inc.       (b) Payee address: City.       City.       State.       Zip Code         PAYEE       (a) Category (c) Cated of travel coales of texa.       (b) Payee address: City.       City.       State.       Zip Code         PAYEE       (a) Category (c) Cated of travel coales of texa.       (b) Payee address: City.       City.       State.       Zip Code         PAYEE       (a) Category (c) Cated of travel coales of texa.       (b) Payee address: City.       City.       State. <td< th=""><th>·</th><th></th><th></th><th></th><th></th></td<>	·							
\$72.88       04/28/2024         7 PAYEE       (a) Payee name         Sunrise Restaurant       (b) Payee address;       City,       State,       Zip Code         8 PURPOSE OF EXPENDITURE       (a) Category (be Categories lased at the top of this schedule)       (b) Description       (c) Description         9 Complete QNLY if direct expenditure to benefit C/OH       (a) Amount Charged       (b) Date of Charge       (c) Date(s / Event outside of Texas. Complete Schedule T.       Check # Austin, TX, offschoder lving eventse         9 Complete QNLY if direct expenditure to benefit C/OH       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         9 AYMENT       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Date of Charge       (b) Date of Charge         (b) Payee address;       City,       State,       Zip Code         18 S Berry Street Suite 5000       San Francisco, CA 94107       (b) Description         Taxiel Out of District       Travel Out of District       (b) Description       Taxie for campaign or officeholder purposes         Complete QNLY if direct       Candidate/Officeholder name       Office sough       Office sough       Office held         PAYEE       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Cred				EXPENDITURES CHARGED TO A CREDIT	\$ 5,609.35			
PAYEE       (a) Payee name       (b) Payee address:       City,       State,       Zip Code         SUNTISE Restaurant       Uvalde, TX 78801       Uvalde, TX 78801       Uvalde, TX 78801       Uvalde, TX 78801         8       PURPOSE OF       (a) Category       (b) Description       Meeting for campaign or officeholder purposes         Political       (c) Charled at the top of the schedule)       (b) Description       Meeting for Campaign or officeholder purposes         9       Complete QNLY if direct       Candidate/Officeholder name       Office neld       Office held         PAYEE       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid       Texas. Zip Code         PAYEE       (a) Payee name       (b) Date of Charge       (b) Payee address;       City,       State,       Zip Code         PAYEE       (a) Payee name       (b) Date of Charge       (b) Datescription       Taxi for campaign or officeholder purposes       Zip Code         PAYEE       (a) Category       (b) Date of the schedule)       Taxi for campaign or officeholder purposes       Zip Code         PAYEE       (a) Category       (b) Date of the schedule)       Taxi for campaign or officeholder purposes       Zip Code         PAYEE       (a) Amount Charged       (b) Date of Charge       (c) Dateki # Austin. TX, diffeeno	6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
8       PURPOSE OF EXPENDITURE       (a) Category (be Caegories listed at the top of this schedule) Food/Beverage Expense       (b) Description Meeting for campaign or officeholder purposes         9       Complete QNLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office hold er purposes         PAYEE       (a) Amount Charged S7.68       (b) Date of Charge 05/01/2024       (c) Date (c) Taket if Austin, TX, ditceholder purposes         PAYEE       (a) Amount Charged Lyft, Inc.       (b) Date of Charge 05/01/2024       (c) Date (c) Date (c) Date (c) Card Itsuer Paid         PURPOSE OF EXPENDITURE       (a) Category (c) Caesure interval outside of Texas. Complete Schedule T.       (b) Payee address; City, State, Zip Code 185 Berry Street Suite 5000 San Francisco, CA 94107       State, Zip Code 185 Berry Street Suite 5000 San Francisco, CA 94107         PURPOSE OF EXPENDITURE       (a) Category (c) Caesure interval outside of Texas. Complete Schedule T.       (b) Description Taxi for campaign or officeholder purposes         Ymailer       (a) Amount Charged S9.69       (b) Date of Charge 05/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Lyft, Inc.       (b) Date of Charge 05/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYMENT       (a) Amount Charged S9.69       (b) Date of Charge 05/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYMENT       (a) Category S0.69       (b) Date of Charg		\$72.88	04/28/2024					
Sunrise Restaurant     Uvalde, TX 78801.       8     PURPOSE OF EXPENDITURE	7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
8       PURPOSE OF EXPENDITURE       (a) Categopy (see Categories issted at the top of this schedule) Podd/Edverage Expense       (b) Description Meeting for campaign or officeholder purposes         9       Complete QNLY if direct expenditure to benefit COH       Candidate/Officeholder name       Office sought       Office hold         9       Complete QNLY if direct expenditure to benefit COH       Candidate/Officeholder name       Office sought       Office hold         PAYMENT       (a) Amount Charged Lyft, Inc.       (b) Date of Charge 05/01/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Lyft, Inc.       (b) Payee address; City, State, Zip Code 185 Berry Street Suite 5000 San Francisco, CA 94107         PURPOSE OF EXPENDITURE       (a) Category (see Categories issted at the top of this schedule) Travel Out of District       Travel Out of District         PURPOSE OF EXPENDITURE       (a) Category (see Categories issted at the top of this schedule) Travel Out of District       (b) Date of Charge OS/02/2024       (c) Description Travel Cut of District         PAYEE       (a) Amount Charged S9.69       (b) Date of Charge OS/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Amount Charged S9.69       (b) Date of Charge OS/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Amount Charged S9.69       (b) Date of Charge OS/02/2024       (b) Payee address; City, State, Zip Code 185 Berry Street Suite 5000 San		Cuprise Destaurant		501 W. Main Street				
8       PURPOSE OF EXPENDITURE       (a) Category (See categories listed at the top of this schedule) Food/Beverage Expense       (b) Description Meeting for campaign or officeholder purposes         9       Complete QNLV if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held         9       Complete QNLV if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged \$7.68       (b) Date of Charge 05/01/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Lyft, Inc.       (b) Payee address; Suite 5000 San Francisco, CA 94107       City, State, Zip Code 185 Berry Street Suite 5000 San Francisco, CA 94107         PURPOSE OF EXPENDITURE       (c) Check if travel outside of Texas. Complete Schedule T. Travel Out of District       Check if Austin, TX, officeholder purposes         Travel Out of District       Candidate/Officeholder name       Office sought       Office held         PAYEE       (a) Amount Charged S9.69       (b) Date of Charge 05/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Amount Charged S9.69       (b) Date of Charge 05/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Amount Charged S9.69       (b) Date of Charge 05/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Amount Charged S9.69	Sunrise Restaurant							
EXPENDITURE       Cise Categories isted at the top of this schedule)       Meeting for campaign or officeholder purposes         Mon-Political       (c)       Check if avere outside of Toxas. Complete Schedule T.       Check if Austin. TX. officeholder living expense         9       Complete QNLY if direct       Candidate/Officeholder       Office sought       Office held         PAYMENT       (a) Amount Charged       (b) Date of Charge       (c) Cated, if Austin. TX. officeholder living expense         PAYEE       (a) Payee name       (b) Date of Charge       (c) Date(S) Credit Card Issuer Paid         PURPOSE OF       (a) Category       (b) Date of this schedule)       (b) Payee address;       City,       State,       Zip Code         PURPOSE OF       (a) Category       (b) Category       (b) Description       Taxi for campaign or officeholder purposes         Travel Out of District       Travel Out of District       Conditate/Officeholder of Toxas. Complete Schedule T.       Check if Austin. TX, officeholder living expense         PAYEE       (a) Amount Charged       (b) Date of Charge       (c) Check if anal outside of Toxas. Complete Schedule T.       Check if Austin. TX, officeholder living expense         Complete OLLY if direct       Candidate/Officeholder of this schedule)       Taxi for campaign or officeholder living expense         PAYEE       (a) Amount Charged       (b) Date of Charge								
Food/Beverage Expense       Meeting for Campaign of Officeholder purposes         Political       (c) _ check if travel outside of Texas. Complete Schedule T.       _ Check if Austin, TX, officeholder iwing expense         9 Complete QNLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged \$7.68       (b) Date of Charge 05/01/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         Lyft, Inc.       185 Berry Street       Suite 5000       State,       Zip Code       State,       Zip Code         Expenditure to benefit C/OH       (a) Category       (b) Description       Travel Out of District       Travel Out of District       (b) Description         Complete QNLY if direct expenditure to benefit C/OH       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid       Office held         PAYMENT       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid       Discorption         Travel Out of District       Candidate/Officeholder name       Office sought       Office held       Office held         PAYMENT       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid       Sip Coby<			()					
Image:	Food/Beverage Expense			Meeting for campaign or	officenoider purposes			
9       Complete QNLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged \$7.68       (b) Date of Charge 05/01/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Lyft, Inc.       (b) Payee address; Lyft, Inc.       City, State, Zip Code 185 Berry Street Suite 5000 San Francisco, CA 94107         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       Taxi for campaign or officeholder purposes         Political       (c) Check if rurvel outside of Texas. Complete Schedule T. Complete QNLY if direct       Candidate/Officeholder name       Office sought         PAYEE       (a) Amount Charged \$9.69       (b) Date of Charge 05/02/2024       (c) Check if Austin, TX, officeholder hiving expense         PAYMENT       (a) Amount Charged \$9.69       (b) Date of Charge 05/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYMENT       (a) Amount Charged \$9.69       (b) Date of Charge 05/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Lyft, Inc.       (b) Payee address; City, State, Zip Code 185 Berry Street Suite 5000 San Francisco, CA 94107         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Taxi for campaign or officeholder purposes         PURPOSE OF EX								
expenditure to benefit C/OH       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         Lyft, Inc.       (a) Category       (b) Payee address;       City,       State,       Zip Code         PURPOSE OF       (a) Category       (b) Category       (c) Description       Taxi for campaign or officeholder purposes         Mon-Political       (c)								
PAYMENT       (a) Amount Charged \$7.68       (b) Date of Charge 05/01/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Lyft, Inc.       (b) Payee address; Suite 5000 San Francisco, CA 94107       City, State, Zip Code 185 Berry Street Suite 5000 San Francisco, CA 94107         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Taxi for campaign or officeholder purposes         Om -Political Non-Political       (c) _ Check if travel outside of Texas. Complete Schedule T. See Categories listed at the top of this schedule) Travel Out of District       (b) Date of Charge 05/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Amount Charged \$9.69       (b) Date of Charge 05/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Lyft, Inc.       (b) Date of Charge 05/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Lyft, Inc.       (b) Payee address; Site 5000 San Francisco, CA 94107       State, Zip Code 185 Berry Street Suite 5000 San Francisco, CA 94107         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Taxi for campaign or officeholder purposes         Mon-Political Non-Political       (c) _ check if travel outside of Texas. Complete Schedule) T. Travel Out of District       (b) Description Taxi for campaign or officeholder purposes         M		Candidate/Onicentitide	name O	nice sought	Onice field			
PAYEE       (a) Payee name       (b) Payee address; City, State, Zip Code         Lyft, Inc.       185 Berry Street       Suite 5000         San Francisco, CA 94107       (b) Description         Taxi for campaign or officeholder purposes       (c) Check if uravel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Complete ONLY if direct       (c) Check if uravel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         PAYEE       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Payee address; City, State, Zip Code         Lyft, Inc.       Suite 5000       San Francisco, CA 94107         PAYEE       (a) Payee name       (b) Payee address; City, State, Zip Code         Lyft, Inc.       Suite 5000       San Francisco, CA 94107         See Categories listed at the top of this schedule)       San Francisco, CA 94107         Suite 5000       San Francisco, CA 94107       See Categories listed at the top of this schedule)         Travel Out of District       Sine Categories listed at the to	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
Image: Section of the system of the syst		\$7.68	05/01/2024					
Lyft, Inc.       Suite 5000 San Francisco, CA 94107         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Taxi for campaign or officeholder purposes         Image: Double of District       (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       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYMENT       (a) Payee name       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Payee address; City, State, Zip Code         Lyft, Inc.       Uff, Inc.       Uff, See Categories listed at the top of this schedule) Travel Out of District         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Taxi for campaign or officeholder purposes         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Taxi for campaign or officeholder purposes         Mon-Political       (c) _ check if travel outside of Texas. Complete Schedule T.       (b) Description Taxi for campaign or officeholder purposes         Mon-Political       (c) _ check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense <th>PAYEE</th> <th>(a) Payee name</th> <th></th> <th>(b) Payee address;</th> <th>City, State, Zip Code</th>	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Taxi for campaign or officeholder purposes         Non-Political       (c) _ check if travel outside of Texas. Complete Schedule T.       _ Check if Austin, TX, officeholder living expense         Complete QNLLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged \$9.69       (b) Date of Charge 05/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         Lyft, Inc.       Usite 5000 San Francisco, CA 94107       (b) Date of Charge       (b) Payee address;       City,       State,       Zip Code         PURPOSE OF EXPENDITURE       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description       Taxi for campaign or officeholder purposes         Y Political       (c) _ check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Mon-Political       (c) _ check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Mon-Political </th <th></th> <th>Luft Inc</th> <th></th> <th>185 Berry Street</th> <th></th>		Luft Inc		185 Berry Street				
PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Taxi for campaign or officeholder purposes         Image: Description       Taxel Out of District       (c) Image: Categories listed at the top of this schedule) Travel Out of District       (b) Description         Image: Description       Candidate/Officeholder Taxes. Complete Schedule T.       Image: Categories Categories Categories Categories       Image: Categories Categories         PAYMENT       (a) Amount Charged \$9.69       (b) Date of Charge 05/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Lyft, Inc.       (b) Payee address; City, State, Zip Code 185 Berry Street Suite 5000 San Francisco, CA 94107         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Taxi for campaign or officeholder purposes         Image: Political Image: Non-Political       (c) Image: Check if taxel outside of Texas. Complete Schedule T.       Image: Check if Austin, TX, officeholder Iwing expense         Complete QNLY if direct       Candidate/Officeholder name       Office sought       Office held		Lyit, inc.		Suite 5000				
EXPENDITURE       (See Categories listed at the top of this schedule)       Taxi for campaign or officeholder purposes         Image: Complete QNLY if direct       Image: Complete Schedule T       Image: Check if Austin, TX, officeholder living expense         Complete QNLY if direct       Candidate/Officeholde Texas. Complete Schedule T.       Image: Check if Austin, TX, officeholder living expense         PAYMENT       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Date of Charge       (b) Payee address;       City,       State,       Zip Code         PAYEE       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         Lyft, Inc.       185 Berry Street       Suite 5000       San Francisco, CA 94107       Image: Complete Schedule T       Sig For Campaign or officeholder purposes       Image: Complete Out of District       Sig For Campaign or officeholder purposes       Image: Complete Out of District       Sig For Campaign or officeholder purposes       Image: Complete Out of District       Sig For Campaign or officeholder purposes       Image: Complete Out of Campaign or officeholder purposes       Image: Complete Out of District       Sig For Campaign or officeholder purposes       Image: Complete Out of Campaign or officeholder purposes       Image: Complete Out of Campaign or officeholder purposes       Image: Complete Out of Campaign or officeholder Ising expense       Imag					7			
Image: Second			of this schedule)					
Non-Political       (c)		· · · ·		Taxi for campaign or offic	cenoider purposes			
Complete QNLY if direct expenditure to benefit C/OH       Candidate/Officeholder nume       Office sought       Office held         PAYMENT       (a) Amount Charged \$9.69       (b) Date of Charge 05/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         Lyft, Inc.       Lyft, Inc.       Suite 5000       San Francisco, CA 94107       San Francisco, CA 94107         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description       Taxi for campaign or officeholder purposes         [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 sought       Office held								
expenditure to benefit C/OH       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYMENT       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Payee address;       City, State, Zip Code         Lyft, Inc.       185 Berry Street       Suite 5000       San Francisco, CA 94107         PURPOSE OF       (a) Category       (b) Description       Taxi for campaign or officeholder purposes         Mon-Political       (c) Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder Iwing expense         Complete ONLY if direct       Candidate/Officeholder name       Office sought       Office held			•					
PAYMENT       (a) Amount Charged \$9.69       (b) Date of Charge 05/02/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Lyft, Inc.       (b) Payee address;       City,       State,       Zip Code         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Payee address;       City,       State,       Zip Code         Mon-Political       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Taxi for campaign or officeholder purposes       Taxi for campaign or officeholder purposes         Complete QNLY if direct       Candidate/Officeholder name       Office sought       Office held		Candidate/Onicerioider	name O	nice sought	Onice neid			
PAYEE       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         Lyft, Inc.       Lyft, Inc.       185 Berry Street       Suite 5000       San Francisco, CA 94107         PURPOSE OF       (a) Category       San Francisco, CA 94107       Image: Complete Out of District       Image: Complete Out of District       Image: Complete Out of District       Image: Complete Out of Complete Complete Complete Complete Complete Out of Complete Comple	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
(a) Category       (b) Description         [X] Political       (c) Check if travel outside of Texas. Complete Schedule T.       (b) Description         [X] Political       (c) Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         [Complete QNLY if direct       Candidate/Officeholder name       Office sought       Office held			05/02/2024					
Lyft, Inc.     Suite 5000 San Francisco, CA 94107       PURPOSE OF EXPENDITURE     (a) Category (See Categories listed at the top of this schedule) Travel Out of District     (b) Description Taxi for campaign or officeholder purposes       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 sought     Office held	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
PURPOSE OF EXPENDITURE     (a) Category (See Categories listed at the top of this schedule) Travel Out of District     (b) Description Taxi for campaign or officeholder purposes       Non-Political     (c) Check if travel outside of Texas. Complete Schedule T.     Check if Austin, TX, officeholder living expense       Complete QNLY if direct     Candidate/Officeholder name     Office sought     Office held				185 Berry Street				
PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description Taxi for campaign or officeholder purposes         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 sought       Office held		Lyft, Inc.		Suite 5000				
EXPENDITURE       (See Categories listed at the top of this schedule) Travel Out of District       Taxi for campaign or officeholder purposes         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 sought       Office held					7			
Image: Second and the second and t			of this schedule)	()				
Image: Non-Political       Image: Complete ONLY if direct       Image: Complete ONLY if direct       Image: Complete ONLY if direct         Complete ONLY if direct       Candidate/Officeholder name       Office sought       Office held		· · · ·		Taxi for campaign or offic	ceholder purposes			
Complete ONLY if direct         Candidate/Officeholder name         Office sought         Office held								
	Non-Political		•		÷ ,			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Of	ffice sought	Office held			

	SCHEDULE F4						
Advertising Expense	EXPENDITURE CATEGORIES FOR BOX 10(a)           Advertising Expense         Loan Repayment/Reinbursement         Solicitation/Fundraising Expense						
Accounting/Banking Consulting Expense	Fees Food/Beve	erage Expense	Office Overhead/Rental Expense Tr Polling Expense Tr	ansportation Equipment & Related Expense avel in District			
Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Serv	rices	Salaries/Wages/Contract Labor O	avel Out of District THER (enter a category not listed above)			
		ruction Guide explains h	ow to complete this form.				
1 Total pages Schedule F4:		Llonorable		3 Filer ID (Ethics Commission Filers) 00021143			
Sch: 43/57 Rpt: 48/62 4 CREDIT CARD	King, Tracy O. (The	ncial institution	5 TOTAL OF UNITEMIZED	00021143			
ISSUER		revious	EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 5,609.35			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$10.79	05/02/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
			185 Berry Street				
	Lyft, Inc.		Suite 5000				
			San Francisco, CA 94107	,			
8       PURPOSE OF       (a) Category         EXPENDITURE       (See Categories listed at the top of this schedule)		(b) Description					
X Political         Travel Out of District			Taxi for campaign or offic	enolder purposes			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, TX.	officeholder living expense			
			fice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$22.58	05/02/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Left lass		185 Berry Street				
	Lyft, Inc.		Suite 5000				
			San Francisco, CA 94107	7			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Taxi for campaign or offic	abaldar purpasas			
X Political	Travel Out of District	·		enolder purposes			
Non-Political		/=					
Complete <u>ONLY</u> if direct	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	fice sought	officeholder living expense Office held			
expenditure to benefit C/OH			loo oodgin				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$25.33	05/02/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
			201 E Main St				
	HEB #4						
			Uvalde, TX 78801				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	abaldar purpagas			
	Travel In District		Fuel for campaign or offic	enouder harhozez			
X Political							
Non-Political	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, TX,	officeholder living expense Office held			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeriolder	name UI	nee sought				

EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award	erage Expense F Is/Memorials Expense F	Loan Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra	I Expense Tr Tr Tr	blicitation/Fundraising ansportation Equipme avel in District avel Out of District THER (enter a catego	ent & Related I	
	The Inst	ruction Guide explains ho	w to complete this	s form.			
<b>1</b> Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	sion Filers)
Sch: 44/57 Rpt: 49/62	King, Tracy O. (The	e Honorable)			00021143		
4 CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$	5,609.3	35
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issue	r Paid		
	\$583.78	05/02/2024					
7 PAYEE	(a) Payee name		(b) Payee ad	dress;	City,	State,	Zip Code
	Black Jockeys Lou	nge	630 S Four	th Street			
			Louisville, k	KY 40202			
8 PURPOSE OF	(a) Category		(b) Description	on			
EXPENDITURE	(See Categories listed at the top of this schedule) Food/Beverage Expense		Meeting for campaign or officeholder purposes				
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX,			officeholder living ex	pense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name Off	ice sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issue	r Paid		
	\$25.56	05/23/2024					
PAYEE	(a) Payee name Uvalde Country Clu	ıb	(b) Payee ad 407 E Gard		City,	State,	Zip Code
			Uvalde, TX				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expe	,	(b) Descriptic Meeting for	on campaign or c	officeholder pu	rposes	
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T		Check if Austin, TX.	officeholder living ex	pense	
Complete ONLY if direct	Candidate/Officeholder	•	ice sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issue	r Paid		
	\$7.47	05/23/2024					
PAYEE	(a) Payee name		(b) Payee ad	dress;	City,	State,	Zip Code
	Lyft, Inc.		185 Berry S Suite 5000	Street			
				sco, CA 94107	,		
PURPOSE OF	(a) Category		(b) Descriptio				
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	taxi for carr	npaign or office	holder purpos	es	
Non-Political		of Toyon, Complete Cabadula T		Chook if Austin TV	officebolder living	20200	
Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T	ice sought	Check II Austin, TX,	officeholder living ex Office held	henze	
expenditure to benefit C/OH	Survivace/Oniceriolder	name On	ice sought				

# SCHEDULE F4

				SCHEDULE F4			
Adverticing Expense	EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense	Event Exp Fees Food/Beve	rage Expense	Office Overhead/Rental Expense T	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District			
Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	s/Memorials Expense	Printing Expense T	Travel Out of District DTHER (enter a category not listed above)			
	-		now to complete this form.	· · · · · · · · · · · · · · · · · · ·			
<b>1</b> Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 45/57 Rpt: 50/62	King, Tracy O. (The	e Honorable)		00021143			
4 CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES	\$ 5.609.35			
ISSUER	see p	revious	CHARGED TO A CREDI	+ -,			
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$8.05	05/23/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
			185 Berry Street				
	Lyft, Inc.		Suite 5000				
			San Francisco, CA 9410 <sup>-</sup>	7			
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE         (See Categories listed at the top of this schedule)		Taxi for campaign or officeholder purposes					
X Political							
Non-Political		of Texas. Complete Schedule		K, officeholder living expense			
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held			
expenditure to benefit C/OH PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	or Doid			
		., .					
	\$6.43	05/24/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
			185 Berry Street				
	Lyft, Inc.		Suite 5000				
			San Francisco, CA 9410	7			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Taxi for campaign or offic	seholder nurnoses			
X Political	Travel Out of District						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		, officeholder living expense			
Complete <u>ONLY</u> if direct	Candidate/Officeholder	•	ffice sought	Office held			
expenditure to benefit C/OH			J.				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$62.91	05/24/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Evett's BBQ		301 East Main Street				
			Uvalde , TX 78801				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Meeting for campaign or	officeholder purposes			
X Political	Food/Beverage Expe	130					
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 O	ffice 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 B Candidate/Officeholder/Politica	y - Gift/Award al Committee Legal Serv	erage Expense s/Memorials Expense rices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
<b>1</b> Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)			
Sch: 46/57 Rpt: 51/62	King, Tracy O. (The	Honorable)		00021143			
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZE				
ISSUER		revious	EXPENDITURES CHARGED TO A CREE CARD	<b>\$</b> 5,609.35			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
	\$50.18	05/31/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Circle K -Castroville	<b>_</b>	1498 US hwy 90 E				
		5					
			Castroville, TX 78009				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	ficeholder nurnoses			
X Political	Travel Out of District		Fuel for campaign or officeholder purposes				
Non-Political							
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, Office sought	TX, officeholder living expense Office held			
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Onicenoider	sought	Onice neid				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
	\$172.55	06/04/2024					
PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code			
			1000 Zaragosa				
	La Posada Hotel						
			Laredo, TX 78040				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	Lodging for campaign or officeholder purposes			
	Travel In District	,	Louging for campaign c	of officeriolder purposes			
X Political							
Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, Office sought	TX, officeholder living expense Office held			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Onicenoider		line sought	Office field			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
	\$25.42	06/05/2024	(-,				
	ΨΖΟ.4Ζ	00/03/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
			609 19th Street				
	HEB 424						
			Hondo, TX 78861				
	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description	~			
	Travel Out of District		Fuel for campaign or of	ticenolder purposes			
X Political							
Non-Political		of Texas. Complete Schedule		TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name C	office sought	Office held			

	EXPENDITOR	SCHEDULE F4					
	EXPENDITURE CATEGORIES FOR BOX 10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	rage Expense s/Memorials Expense ices	Office Overhead/Rental Expense Polling Expense Printing Expense	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 F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
<b> </b> -	Sch: 47/57 Rpt: 52/62	King, Tracy O. (The	Honorable)		00021143		
4	CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZED			
	ISSUER		revious	EXPENDITURES CHARGED TO A CREDI CARD	<b>\$</b> 5,609.35		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
		\$82.09	06/09/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Suprico Doctouropt		501 W. Main Street			
		Sunrise Restaurant					
				Uvalde, TX 78801			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
	Food/Beverage Expense		Meeting for campaign or	Meeting for campaign or officeholder purposes			
		X Political					
	Non-Political		of Texas. Complete Schedule		X, officeholder living expense		
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held		
e	Appenditure to benefit C/OH	(a) Amount Charged	(h) Data of Charge	(a) Data(a) Cradit Card Iaau	or Doid		
	PAYMENT	(a) Amount Charged \$10.14	(b) Date of Charge 06/12/2024	(c) Date(s) Credit Card Issu	er Palu		
	PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code		
				185 Berry Street			
		Lyft, Inc.		Suite 5000			
				San Francisco, CA 9410	07		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
	_	Travel Out of District		Taxi for campaign or offi	Taxi for campaign or officeholder purposes		
	X Political						
	Non-Political		of Texas. Complete Schedule		X, officeholder living expense		
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held		
e	xpenditure to benefit C/OH PAYMENT	(a) Amount Charged	(b) Data of Chargo	(c) Date(s) Credit Card Issu	or Paid		
	PATMENT	.,	(b) Date of Charge	(C) Date(S) Credit Card ISSU			
		\$8.01	06/12/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
				185 Berry Street			
		Lyft, Inc.		Suite 5000			
				San Francisco, CA 9410	7		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
		Travel Out of District		Taxi for campaign or offi	cenolder purposes		
	X Political						
	Non-Political		of Texas. Complete Schedule		X, officeholder living expense		
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held		
	• • • • • • • • • • • • • • • • • • • •						

	EXPENDITOR	SCHEDULE F4					
	EXPENDITURE CATEGORIES FOR BOX 10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Award	erage Expense s/Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
		The Inst	ruction Guide explains h	now to complete this form.			
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
	Sch: 48/57 Rpt: 53/62	King, Tracy O. (The	e Honorable)		00021143		
4	CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZED			
	ISSUER	see p	revious	EXPENDITURES CHARGED TO A CREDI CARD	т 5,609.35		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
		\$56.22	06/14/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Uvalde Country Clu	ıb	407 E Garden St			
			U				
				Uvalde, TX 78801			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)		(b) Description Meeting for campaign or officeholder purposes		
X Political Food/Beverage Expense				oncentrate purposes			
	Non-Political				V. officeholder living evenence		
9	Complete <u>ONLY</u> if direct	(C) Check if travel outside Candidate/Officeholder		ffice sought	X, officeholder living expense Office held		
	xpenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
		\$43.13	05/23/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Shell Oil San Antor	vie	24905 US Hwy 281			
		Sheli Oli Sali Antor	liu				
				San Antonio, TX 78264			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	Fuel for campaign or officeholder purposes		
	X Political	Travel Out of District					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		X, officeholder living expense		
-	Complete <u>ONLY</u> if direct	Candidate/Officeholder		ffice sought	Office held		
e	expenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid		
		\$61.41	05/30/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
				609 19th Street			
		HEB 424					
L				Hondo, TX 78861			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Fuel for campaign or offi	ceholder nurnoses		
	X Political	Travel Out of District	-		ocholuer purpuses		
	Non-Political		ditaria o de servici		V - W h - h h		
⊢	Complete <u>ONLY</u> if direct	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, T.	X, officeholder living expense Office held		
е	xpenditure to benefit C/OH	Sandate, Sincerolder					

	EXPENDITOR	SCHEDULE F4					
	EXPENDITURE CATEGORIES FOR BOX 10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	erage Expense s/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
		The Inst	ruction Guide explains h	now to complete this form.			
1	Total pages Schedule F4:	2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)		
	Sch: 49/57 Rpt: 54/62	King, Tracy O. (The	e Honorable)		00021143		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRED CARD	<b>\$</b> 5,609.35		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
		\$46.32	05/31/2024				
7	PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code		
		Uvalde Country Clu	ıh	407 E Garden St			
			U				
L				Uvalde, TX 78801			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Meeting for campaign o	r officeholder nurnoses		
	X     Political   Food/Beverage Expense				i onicenoluer purposes		
	Non-Political		of Toylog, Complete Cabadula				
9	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	TX, officeholder living expense Office held		
	xpenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
		\$123.60	06/04/2024				
	PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code		
		Affordable Storage	#1	260 W North Lane			
		Affordable Storage	#4				
				Uvalde, TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	Storage for campaign or officeholder purposes		
	X Political	Office Overhead/Ren	tal Expense		i onicenoider purposes		
	Non-Political		of Tourse, Oormalate, Ooksaduda		TV - 45 - b - b - b - b - b - b - b - b - b -		
-	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought	TX, officeholder living expense Office held		
e	xpenditure to benefit C/OH						
⊢	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid		
		\$17.28	06/05/2024				
	PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code		
		Oppin Outback		2900 E Main			
		Oasis Outback					
L				Uvalde, TX 78801			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Meeting for campaign o	r officeholder nurnoses		
	X Political	Food/Beverage Expe			n onicerioider purposes		
	Non-Political		·				
⊢		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Austin, T ffice sought	TX, officeholder living expense Office held		
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Sandidate/Sinceholder	itanie O	nice oougin			

			D		SCHEDULE F4	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve / - Gift/Award al Committee Legal Serv	rage Expense s/Memorials Expense ices	IES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ow to complete this form.	Trans Trave Trave	itation/Fundraising Expense sportation Equipment & Related Expense el in District el Out of District ER (enter a category not listed above)	
<b>1</b> Total pages Schedule F4:	i				<b>B</b> Filer ID (Ethics Commission Filers)	
Sch: 50/57 Rpt: 55/62	King, Tracy O. (The	Honorable)			00021143	
•					0021143	
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEM EXPENDITURES CHARGED TO A CF CARD	\$	<b>5</b> ,609.35	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer F	Paid	
	\$7.32	06/12/2024				
7 PAYEE	(a) Payee name	•	(b) Payee address;		City, State, Zip Code	
			185 Berry Street			
	Lyft, Inc.		Suite 5000			
			San Francisco, CA 9	94107		
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Taxi for campaign or	Taxi for campaign or officeholder purposes		
X Political						
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			stin, TX, off	ficeholder living expense	
9 Complete ONLY if direct	Candidate/Officeholder	name Of	ffice sought		Office held	
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$10.18	(b) Date of Charge 06/13/2024	(c) Date(s) Credit Card	Issuer F	Paid	
PAYEE (a) Payee name Lyft, Inc.		(b) Payee address; 185 Berry Street Suite 5000 San Francisco, CA 9	94107	City, State, Zip Code		
PURPOSE OF	(a) Category	of this schoolule)	(b) Description			
	(See Categories listed at the top Travel Out of District	of this schedule)	Taxi for campaign or officeholder purposes			
X Political						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Au	stin, TX, off	ficeholder living expense	
Complete ONLY if direct	Candidate/Officeholder	name Of	ffice sought		Office held	
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer F	Paid	
	\$44.37	06/20/2024				
PAYEE	(a) Payee name		(b) Payee address;		City, State, Zip Code	
	Exxon Hondo		Hwy 90			
			Hondo, TX 78861			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Fuel for campaign of	r officeh	nolder purposes	
X Political						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Au	stin, TX, off	ficeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Of	ffice sought		Office held	
	1					

	SCHEDULE F4						
	EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made	By - Gift/Award	erage Expense Js/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/Polit	ical Committee Legal Ser		Salaries/Wages/Contract Labor how to complete this form.	OTHER (enter a category not listed above)			
<b>1</b> Total pages Schedule F4				3 Filer ID (Ethics Commission Filers)			
Sch: 51/57 Rpt: 56/62		e Honorable)		00021143			
4 CREDIT CARD		incial institution	5 TOTAL OF UNITEMIZ				
ISSUER	see p	previous	EXPENDITURES CHARGED TO A CRE CARD	<b>\$</b> 5,609.35			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid			
	\$28.45	06/21/2024					
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
	Uvalde Country Cl	ub	407 E Garden St				
	Ovalue Country Ch	ub					
			Uvalde, TX 78801 (b) Description				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	o of this schedule)	· / ·	or officeholder purposes			
X     Political   Food/Beverage Expense			meeting for earnpaight				
				n, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct		•	Diffice sought	Office held			
expenditure to benefit C/OI			J.				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid			
	\$46.79	06/21/2024					
PAYEE	(a) Payee name	I	(b) Payee address;	City, State, Zip Code			
	Lyft, Inc.		185 Berry Street				
	Lyn, me.		Suite 5000				
	(a) Category		San Francisco, CA 94 (b) Description	107			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	o of this schedule)	., .	Taxi for campaign or officeholder purposes			
X Political	Travel Out of District						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austir	n, TX, officeholder living expense			
Complete ONLY if direct			Diffice sought	Office held			
expenditure to benefit C/OI							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid			
	\$40.04	06/01/2024					
PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code			
	Dottlo N Dog Cobir		315 E Fisher Ave				
	Bottle N Bag Sabir	Idi					
			Sabinal, TX 78881				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	o of this schedule)	(b) Description	n or officeholder purposes			
X Political	Event Expense						
Non-Political		of Texas. Complete Schedule		n, TX, officeholder living expense			
Complete <u>ONLY</u> if direct			Diffice sought	Office held			
expenditure to benefit C/OI				-			

	SCHEDULE F4						
Advertising Expense	EXPENDITURE CATEGORIES FOR BOX 10(a)						
Accounting/Banking Consulting Expense	Event Exp Fees Food/Beve	ense erage Expense	Office Overhead/Rental Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District			
Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award	s/Memorials Expense	Printing Expense	Travel Out of District OTHER (enter a category not listed above)			
	The Inst	ruction Guide explains h	ow to complete this form.				
1 Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)			
Sch: 52/57 Rpt: 57/62	King, Tracy O. (The		5 TOTAL OF UNITEMIZED	00021143			
4 CREDIT CARD ISSUER		Name of financial institution		<b>\$</b> 5,609.35			
	see p	revious	CHARGED TO A CREDI CARD	T			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid			
	\$3.83	06/12/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Lyft, Inc.		185 Berry Street				
			Suite 5000 San Francisco, CA 9410	7			
8 PURPOSE OF	(a) Category		(b) Description	1			
EXPENDITURE (See Categories listed at the top of this schedule)		Taxi for campaign or offi	ceholder purposes				
X Political	X Political Travel Out of District						
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			X, officeholder living expense			
9 Complete ONLY if direct Candidate/Officeholder name Office			ffice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid			
	\$25.90	06/21/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
			185 Berry Street				
	Lyft, Inc.		Suite 5000				
			San Francisco, CA 9410	17			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Taxi for campaign or offi	ceholder nurnoses			
X Political	Travel Out of District						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin. T	X, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder		ffice sought	Office held			
expenditure to benefit C/OH		-					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid			
	\$20.74	06/22/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Oasis Outback		2900 E Main				
	Casis Outback						
PURPOSE OF	(a) Category		Uvalde, TX 78801 (b) Description				
EXPENDITURE	(See Categories listed at the top	•	Meeting for campaign or	officeholder purposes			
X Political	Food/Beverage Expe	nse					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T.	X, officeholder living expense			
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Of	ffice sought	Office held			
expenditure to benefit C/OH							

	SCHEDULE F4						
Advertising Expense	EXPENDITURE CATEGORIES FOR BOX 10(a)           Advertising Expense         Loan Repayment/Reimbursement         Solicitation/Fundraising Expense						
Accounting/Banking Consulting Expense	Fees Food/Beve		Office Overhead/Rental Expense Tr	ansportation Equipment & Related Expense avel in District			
Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award al Committee Legal Serv	s/Memorials Expense rices		avel Out of District THER (enter a category not listed above)			
		ruction Guide explains h	ow to complete this form.	i			
1 Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)			
Sch: 53/57 Rpt: 58/62		King, Tracy O. (The Honorable) Name of financial institution		00021143			
4 CREDIT CARD ISSUER		revious	5 TOTAL OF UNITEMIZED EXPENDITURES	<b>\$</b> 5,609.35			
			CHARGED TO A CREDIT CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$41.70	06/24/2024					
7 PAYEE							
/ PATEE	(a) Payee name		(b) Payee address; 185 Berry Street	City, State, Zip Code			
	Lyft, Inc.		Suite 5000				
			San Francisco, CA 94107				
8 PURPOSE OF	(a) Category	of this schoolule)	(b) Description				
EXPENDITURE (See Categories listed at the top of this schedule) Travel Out of District		Taxi for campaign or office	Taxi for campaign or officeholder purposes				
X Political							
Non-Political         (c)         Check if travel outside of Texas. Complete Schedule T.           9         Complete ONLY if direct         Candidate/Officeholder name         Offic			T. Check if Austin, TX, fice sought	officeholder living expense Office held			
expenditure to benefit C/OH		liee eeugni					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$7.53	05/23/2024					
PAYEE							
PATEE	(a) Payee name		(b) Payee address; 185 Berry Street	City, State, Zip Code			
	Lyft, Inc.		Suite 5000				
			San Francisco, CA 94107				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
X Political	Travel Out of District		Taxi for campaign or office	enoider purposes			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule 1		officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder		fice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$13.56	05/23/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Lyft, Inc.		185 Berry Street				
	Lyn, me.		Suite 5000				
PURPOSE OF	(a) Category		San Francisco, CA 94107 (b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Taxi for campaign or office	eholder purposes			
X Political	Travel Out of District						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule 1	T. Check if Austin, TX,	officeholder living expense			
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Of	fice sought	Office held			
expenditure to benefit C/OH							

	SCHEDULE F4						
Adventision Frances	EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense	Event Expe Fees Ecod/Beve	ense vrage Expense	Loan Repayment/Rein Office Overhead/Renta Polling Expense	al Expense Tra	licitation/Fundraising Expense ansportation Equipment & Related Expense avel in District		
Contributions/ Donations Made B Candidate/Officeholder/Politica	y - Gift/Award	s/Memorials Expense	Printing Expense Salaries/Wages/Contra	Tra	avel Out of District "HER (enter a category not listed above)		
	C C	ruction Guide explains h	-		(		
<b>1</b> Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
Sch: 54/57 Rpt: 59/62	King, Tracy O. (The	e Honorable)			00021143		
4 CREDIT CARD	Name of final	ncial institution	5 TOTAL O EXPENDI		<b>\$</b> 5,609.35		
ISSUER	see p	revious	CHARGE	D TO A CREDIT	<b>\$</b> 3,003.00		
	(a) Amount Chargod	(b) Data of Charge	CARD	radit Card Issuer	Doid		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	credit Card Issuer	Palu		
	\$56.57	05/30/2024					
7 PAYEE	(a) Payee name		(b) Payee ad	ldress;	City, State, Zip Code		
			407 E Gard	den St			
	Uvalde Country Clu	D					
			Uvalde, TX				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top			(b) Description Meeting for campaign or officeholder purposes			
X Political	Food/Beverage Expense			oumpuight of o			
Non-Political	(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX,			officeholder living expense			
9 Complete <u>ONLY</u> if direct					Office held		
expenditure to benefit C/OH	expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	Paid		
	\$60.00	06/06/2024					
PAYEE	(a) Payee name		(b) Payee ac	Idross.	City, State, Zip Code		
	(u) r uyee name		575 Moros				
	Cricket Wireless LL	.C					
			Atlanta, GA				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
X Political	Office Overhead/Ren		Phone for 0	campaign of on	iceholder purposes		
Non-Political		of Touron Complete Cabadula		Charle if Austin TV	officeholder living expense		
Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	ffice sought		Office held		
expenditure to benefit C/OH			Ū				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	Paid		
	\$1.87	06/10/2024					
DAVEE							
PAYEE	(a) Payee name		(b) Payee ac 3507 N Lar		City, State, Zip Code		
	USPS - Austin		3507 N Lai	IIdi divu			
			Austin, TX	78705			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Postage fo	r campaign or c	officeholder purposes		
X Political		•					
Non-Political		of Texas. Complete Schedule		Check if Austin, TX,	officeholder living expense		
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought		Office held		
expenditure to benefit C/OH							

	EAPENDITURE	SCHEDULE F4					
	EXPENDITURE CATEGORIES FOR BOX 10(a)           Advertising Expense         Loan Repayment/Reimbursement         Solicitation/Fundraising Expense						
	Advertising Expense Accounting/Banking Consulting Expense	Fees Food/Beve	erage Expense	Office Overhead/Rental Expense T Polling Expense T	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District		
	Contributions/ Donations Made By Candidate/Officeholder/Politica	r - Gift/Award Il Committee Legal Serv	s/Memorials Expense ⁄ices		ravel Out of District DTHER (enter a category not listed above)		
			ruction Guide explains h	ow to complete this form.			
1	Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)		
	Sch: 55/57 Rpt: 60/62	King, Tracy O. (The			00021143		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES	\$ 5,609.35		
		зсе р	revious	CHARGED TO A CREDI CARD	Г		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
		\$51.08	06/10/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Exxon Hondo		Hwy 90			
				Hondo, TX 78861			
8	PURPOSE OF	(a) Category		(b) Description			
	EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Fuel for campaign or offic	Fuel for campaign or officeholder purposes		
	X Political						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				K, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name Of	fice sought	Office held		
		(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
		\$40.51	06/14/2024				
		+ ·····-					
	PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code		
		Circle K - Pleasanton		2370 W Oaklawn Rd			
				Pleasanton, TX 78064			
	PURPOSE OF	(a) Category		(b) Description			
		(See Categories listed at the top Travel In District	of this schedule)	Fuel for campaign or offic	ceholder purposes		
	X Political						
	Non-Political		of Texas. Complete Schedule		c, officeholder living expense		
е	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Oi	fice sought	Office held		
⊢	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
		\$127.49	06/20/2024				
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
		Uvalde Country Clu	ıb	407 E Garden St			
				Uvalde, TX 78801			
F	PURPOSE OF	(a) Category		(b) Description			
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Meeting for campaign or	officeholder purposes		
	X Political						
L	Non-Political		of Texas. Complete Schedule		C, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Of	fice sought	Office held		
Ľ							

			D	SCHEDULE F4				
EXPENDITURE CATEGORIES FOR BOX 10(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Awards	rage Expense s/Memorials Expense ices	Office Overhead/Rental Expense Tr Polling Expense Tr Printing Expense Tr Salaries/Wages/Contract Labor O	olicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District THER (enter a category not listed above)				
	· · · · · · · · · · · · · · · · · · ·	ruction Guide explains n	low to complete this form.					
<b>1</b> Total pages Schedule F4:	2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)				
Sch: 56/57 Rpt: 61/62	King, Tracy O. (The	e Honorable)		00021143				
4 CREDIT CARD	Name of financial institution		5 TOTAL OF UNITEMIZED					
ISSUER	see previous		EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 5,609.35				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$7.53	06/21/2024						
7 PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code				
			185 Berry Street					
	Lyft, Inc.		Suite 5000					
			San Francisco, CA 94107	7				
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top of this schedule)		()	Taxi for campaign or officeholder purposes				
X Political	Travel Out of District							
Non-Political	(C) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$176.80	06/17/2024						
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
			103 S.Getty					
	USPS - Uvalde		-					
			Uvalde, TX 78801					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top of this schedule)		Postage for campaign or	Postage for campaign or officeholder purposes				
X Political	Office Overhead/Rent	tal Expense						
Non-Political		of Toyon, Complete Schodule		, officeholder living expense				
	(c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Offic		ffice sought	Office held				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Onicenoider	name O	nice sought	Once held				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Daid				
		.,	(c) Date(s) Credit Card Issue	i raiu				
	\$19.86	06/18/2024						
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
		1296 West Main Street						
	Ofelia's Restaurant							
			Uvalde, TX 78801					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top of this schedule)		Meeting for campaign or o	officeholder purposes				
X Political	Food/Beverage Expe	nse						
Non-Political	(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held				

EAPENDITORE				SCHEDULE F4	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve - Gift/Award I Committee Legal Serv	rage Expense s/Memorials Expense ices	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)	
		ruction Guide explains r	now to complete this form.		
1 Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)	
Sch: 57/57 Rpt: 62/62	King, Tracy O. (The	-		00021143	
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$ 5,609.35	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid	
	\$44.04	06/28/2024			
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code	
			407 E Garden St		
	Uvalde Country Club				
			Uvalde, TX 78801		
8 PURPOSE OF	(a) Category		(b) Description	(b) Description	
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Meeting for campaign or	Meeting for campaign or officeholder purposes	
X Political					
Non-Political	(C) Check if travel outside of Texas. Complete Schedule T.		T. Check if Austin, T	Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct	Candidate/Officeholder name Offic		Office sought	e sought Office held	