#### FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 57 00056637 3 COMMITTEE NAME **OFFICE USE ONLY** Texans for Joe Straus Date Received **ELECTRONICALLY FILED** 07/15/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 90388 Date Hand-delivered or Date Postmarked Change of Address San Antonio, TX 78209 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Randy NAME NICKNAME LAST **SUFFIX** Cain STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1800 Frost Bank Tower STREET **ADDRESS** 100 West Houston Street (Residence or Business) San Antonio, TX 78205 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1800 Frost Bank Tower MAILING **ADDRESS** 100 West Houston Street San Antonio, TX 78205 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 242-7104 PHONE REPORT January 15 30th day before election Exceeded modified reporting limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election X July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Month Year Month Day Year Day COVERED 01/01/2024 **THROUGH** 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Other Primary Runoff General Special

# SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texans for Joe Straus			00056637	
14 COMMITTEE PURPOSE		CANDIDATE / OFFICEHOLDER NAME		
(Attach lists on plain paper to complete this	Candidate			
report if necessary.)	Officeholder	OFFICE SOUGHT (candidate) / OFFICE HEL	D (officeholder)	
SUPPORT (Candidate or Measure)		BALLOT IDENTIFICATION / #	ELECTI	ON DATE
OPPOSE			Month	Day Year
(Candidate or Measure)				
ASSIST	Measure	DESCRIPTION		
(Officeholder)		DESCRIPTION		
15 CONTRIBUTION TOTALS		TRIBUTIONS OF \$50 OR LESS (OTHER THANES OF LOANS, OR CONTRIBUTIONS MADE LESS ITEMIZED	N PLEDGES,	\$ \$0.00
	2. TOTAL POLITICAL CO	ONTRIBUTIONS		
	(OTHER THAN PLEDGE:	S, LOANS, OR GUARANTEES OF LOANS)		\$ \$0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED PO	LITICAL EXPENDITURES		\$ \$586.40
	4. TOTAL POLITICAL EX	XPENDITURES		
				\$ \$225,912.68
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTREPORTING PERIOD	TRIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE	\$ \$2,344,648.90
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMO DAY OF THE REPORTIN	UNT OF ALL OUTSTANDING LOANS AS OF IG PERIOD	THE LAST	\$ \$0.00
16 AFFIDAVIT		I swear, or affirm, under penalty of perj and correct and includes all information Title 15, Election Code.		
		Mr. Ra	ndy Cain	
AFFIX NOTARY	STAMP / SEAL ABOVE	Signature of Ca	mpaign Treasure	er
Sworn to and subscribed	before me, by the said	, ti	nis the	day
of	_, 20, to certify which	n, witness my hand and seal of office.		
Cignoture of effices and	ministoring soth	tad name of officer administering anth	Title of effice	or administering asth
Signature of officer ad	ministering oath Print	ted name of officer administering oath	Tille OF Office	er administering oath

### **SUBTOTALS - SPAC**

### FORM SPAC **COVER SHEET PG 3**

				3 01 57			
17 COMMITTEE NAME 18 Filer ID (Ethics Commission Filers)							
Те	Texans for Joe Straus 00056637						
		E SUBTOTALS 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 C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	PR	\$			
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$			
6.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR O	ORGANIZATION	\$			
7.		SCHEDULE E: LOANS		\$			
8.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	<b>\$</b> 214,858.29			
9.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		<b>\$</b> 1,202.34			
10.	. 🔲	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$			
11.	. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 9,852.05			
12.	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (	OF C/OH	\$			
13.	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$			
14.	. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$ 48,308.17			

### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 1/32 Rpt: 4/57	Texans for Joe Straus 00056637	
4	Date	5 Payee name	
	01/31/2024	Brewer, Meredith (Mrs.)	
6	Amount (\$) \$1,974.77	7 Payee address; City; State; Zip Code 2919 Trailend Dr. San Antonio, TX 78209	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wages for political services	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	02/29/2024	Brewer, Meredith (Mrs.)	
	Amount (\$) \$1,974.78	Payee address; City; State; Zip Code 2919 Trailend Dr.	
		San Antonio, TX 78209	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Wages for political services	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 03/29/2024	Payee name Brewer, Meredith (Mrs.)	
	Amount (\$) \$1,974.77	Payee address; City; State; Zip Code 2919 Trailend Dr.	
		San Antonio, TX 78209	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Wages for political services	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

### SCHEDULE F1

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

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

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

С	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
<b>1</b> To	otal pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
5	Sch: 2/32 Rpt: 5/57	Texans for Joe Straus 00056637
<b>4</b> Da	ate	5 Payee name
04	1/30/2024	Brewer, Meredith (Mrs.)
<b>6</b> An	mount (\$)	7 Payee address; City; State; Zip Code
	\$3,528.99	2919 Trailend Dr.
		San Antonio, TX 78209
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
E	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Wages for political services
		Wagoo to political convices
<b>9</b> Co	omplete ONLY if direct	Candidate/Officeholder name Office sought Office held
ex	penditure to benefit C/OI	1
Da	ate	Payee name
05	5/31/2024	Brewer, Meredith (Mrs.)
An	mount (\$)	Payee address; City; State; Zip Code
	\$2,307.08	2919 Trailend Dr.
		San Antonio, TX 78209
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
E	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Wages for political services
Cc	omplete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
	penditure to benefit C/OI	
Dr	210	Davies name
	ate 6/28/2024	Payee name  Prower Moredith (Mrs.)
		Brewer, Meredith (Mrs.)
An	nount (\$)	Payee address; City; State; Zip Code
	\$2,307.07	2919 Trailend Dr.
		San Antonio, TX 78209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
-	OF EXPENDITURE	Salaries/Wages/Contract Labor
_	.AI LINDITORL	Check if Austin, TX, officeholder living expense
		Wages for political services
	and the ONE WAY II	Overfields (Office health and over a complete section of the complete section
	omplete <u>ONLY</u> if direct spenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/32 Rpt: 6/57	Texans for Joe Straus 00056637
4	Date	5 Payee name
	01/16/2024	Bridgehead, I.T.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$31.83	2810 N. Flores St.
		San Antonio, TX 78212
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Monthly IT Support
		Monthly 11 Support
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$	Dato	Davies same
	Date	Payee name
	02/09/2024	Bridgehead, I.T.
	Amount (\$)	Payee address; City; State; Zip Code
	\$31.83	2810 N. Flores St.
		San Antonio, TX 78212
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Monthly IT Support
		Montally 11 Support
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Data	Davies same
	Date 04/01/2024	Payee name  Pridgehead LT
		Bridgehead, I.T.
	Amount (\$)	Payee address; City; State; Zip Code
	\$31.83	2810 N. Flores St.
		San Antonio, TX 78212
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Monthly IT Support
		Monthly 11 Support
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guid	Salaries/	Wages	/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILE	R NAME				3	Filer ID	(Ethics Commission File	ers)
	Sch: 4/32 Rpt: 7/57	Tex	ans for Joe Straus					00056637		
4	Date	5 Paye	ee name							
	05/02/2024	Brid	gehead, I.T.							
6	Amount (\$)	<b>7</b> Paye	ee address; City;	State; Zip C	ode					
	\$31.83	281	0 N. Flores St.							
		San	Antonio, TX 78212							
8	PURPOSE	(a) Cate	gory (See Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Offic	ce Overhead/Rental Expe	nse		므		ide of Texas. Com		
						Monthly IT Su		, officeholder living	rexpense	
9	Complete ONLY if direct	<u>I</u> Candi	date/Officeholder name	Office so	<u>l</u> ught			Office he	eld	
	expenditure to benefit C/OI	+								
	Date	Paye	ee name							
	06/01/2024	Brid	gehead, I.T.							
	Amount (\$)	Paye	ee address; City;	State; Zip C	ode					
	\$31.83	281	0 N. Flores St.							
		San	Antonio, TX 78212							
	PURPOSE OF	(a) Cate	egory (See Categories listed at the	top of this schedule)	(b)	Description				
	EXPENDITURE	Offic	ce Overhead/Rental Expe	nse		<b>=</b>		ide of Texas. Com , officeholder living		
						Monthly IT Su			Гехрепае	
						,	- 1- 1-			
	Complete ONLY if direct	<u> </u>	date/Officeholder name	Office so	ught			Office he	eld	
	expenditure to benefit C/OI	Н								
	Date	Paye	ee name							
	01/05/2024	Bus	h, Mary (Mrs.)							
	Amount (\$)	Paye	ee address; City;	State; Zip C	ode					
	\$875.00	244	Retama Place							
		San	Antonio, TX 78209							
	PURPOSE	(a) Cate	egory (See Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Con	sulting Expense					ide of Texas. Com		
								, officeholder living	tive consultant.	
						Committee of	iiic	c daministra	uve consultant.	
$\vdash$	Complete ONLY if direct	L Candi	date/Officeholder name	Office so	<u>l</u> ught			Office he	eld	
	expenditure to benefit C/OI				_					
H										

### SCHEDULE F1

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

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/32 Rpt: 8/57	Texans for Joe Straus 00056637
4	Date	5 Payee name
	02/01/2024	Bush, Mary (Mrs.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$875.00	244 Retama Place
	I	
		San Antonio, TX 78209
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	l	Committee office administrative consultant.
	l	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del></del>
	Date	Payee name
	03/06/2024	Bush, Mary (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$875.00	244 Retama Place
	l	
		San Antonio, TX 78209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	I	Committee office administrative consultant.
	1	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H. Committee of the com
	Date	Payee name
	04/05/2024	Bush, Mary (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$875.00	244 Retama Place
	l	
	I	San Antonio, TX 78209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	I	Check if Austin, TX, officeholder living expense  Committee office administrative consultant.
	I	Sommittee onle daministrative orientaria
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

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

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

	Credit Card Payment	The Instruction Guide explains how to com	-	te this form.
1	Total pages Schedule F1:	2 FILER NAME	_	3 Filer ID (Ethics Commission Filers)
	Sch: 6/32 Rpt: 9/57	Texans for Joe Straus		00056637
4	Date	5 Payee name		•
	05/06/2024	Bush, Mary (Mrs.)		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	de	
	\$875.00	244 Retama Place		
		San Antonio, TX 78209		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Consulting Expense		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE			Check if Austin, TX, officeholder living expense
				Committee office administrative consultant.
_	Operation ONLY if allowed	Overall data (Office health are reserved.	.1. 4	Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	Int	Office held
	Date	Payee name		
	06/06/2024	Bush, Mary (Mrs.)		
	Amount (\$)	Payee address; City; State; Zip Cod	de	
	\$875.00	244 Retama Place		
		San Antonio, TX 78209		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Consulting Expense		Check if travel outside of Texas. Complete Schedule T.
				Committee office administrative consultant.
				Committee office administrative consultant.
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ıht	Office held
	expenditure to benefit C/OI		,	S. Host Hold
	Date	Payee name		
	01/10/2024	Chase Cardmember Service		
	Amount (\$)	Payee address; City; State; Zip Cod	10	
	\$227.04	PO Box 94014	ie.	
	ΨΖΖ1.04	10 000 34014		
		Palatine, IL 60094		
	PURPOSE OF	,	(b)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Credit Card Payment		Check if Austin, TX, officeholder living expense
				Payment of credit card bill for political expenses.
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI	1		

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/32 Rpt: 10/57	Texans for Joe Straus 00056637
4	Date	5 Payee name
	02/06/2024	Chase Cardmember Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$62.31	PO Box 94014
L		Palatine, IL 60094
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Payment of credit card bill for political expenses.
		aymont of distant said said said said said said said said
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	<del>-</del>
	Date	Payee name
	03/28/2024	Chase Cardmember Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,466.45	PO Box 94014
		Palatine, IL 60094
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Payment of credit card bill for political expenses.
		r dyment of credit card bill for political expenses.
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	03/06/2024	Chase Cardmember Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$902.09	PO Box 94014
	Ψ302.03	1 0 200 0 101 1
		Palatine, IL 60094
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Payment of credit card bill for political expenses.
L		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

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

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

Event Expense

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/32 Rpt: 11/57	Texans for Joe Straus 00056637
4	Date	5 Payee name
	03/01/2024	Chase Cardmember Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$31.83	PO Box 94014
		Palatine, IL 60094
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Payment of credit card bill for political expenses.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	02/26/2024	Chase Cardmember Service
	Amount (\$) \$2,697.35	Payee address; City; State; Zip Code PO Box 94014
	ΦΖ,υ31.33	PO BOX 94014
		Palatine, IL 60094
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Credit Card Payment  Credit Card Payment  Credit Card Payment  Credit Card Payment
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Payment of credit card bill for political expenses.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	¬
	Date	Payee name
	04/18/2024	Chase Cardmember Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$386.62	PO Box 94014
		Palatine, IL 60094
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payment of credit card bill for political expenses.
		Payment of credit card bill for political expenses.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	ere)
1	Sch: 9/32 Rpt: 12/57	Texans for Joe Straus  3 Filer ID (Eurits Commission File 00056637)	:15)
4	Date	5 Payee name	
	05/15/2024	Chase Cardmember Service	
6	Amount (\$) \$1,613.89	7 Payee address; City; State; Zip Code PO Box 94014 Palatine, IL 60094	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense Payment of credit card bill for political expenses.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	05/27/2024	Chase Cardmember Service	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,654.84	PO Box 94014	
	DUDDOG	Palatine, IL 60094	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Payment of credit card bill for political expenses.	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	01/05/2024	Davis Kaufman PLLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,500.00	508 West 14th Street	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Political consulting/Legal services	
		Folitical consulting/Legal services	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mer

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/32 Rpt: 13/57	Texans for Joe Straus 00056637
4	Date	5 Payee name
	02/15/2024	Davis Kaufman PLLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	508 West 14th Street
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Political consulting/Legal services
		1 Ontical consulting/Legal Scrivices
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	03/06/2024	Davis Kaufman PLLC
_	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	508 West 14th Street
	φ1,500.00	300 West 14th Sheet
		Austin TV 70701
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Political consulting/Legal services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	04/05/2024	Davis Kaufman PLLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	508 West 14th Street
	φ1,500.00	SOO WEST THUI SUEEL
		Auctin TV 79701
	DUDD 0.0-	Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Political consulting/Legal services
		3 - 3
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

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

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

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

Credit Card Payment  The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 11/32 Rpt: 14/57	Texans for Joe Straus 00056637				
4	Date	5 Payee name				
	05/06/2024	Davis Kaufman PLLC				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$1,500.00	508 West 14th Street				
		Austin, TX 78701				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
		Political consulting/Legal services				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	1				
	Date	Payee name				
	06/06/2024	Davis Kaufman PLLC				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,500.00	508 West 14th Street				
		Austin, TX 78701				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
		Political consulting/Legal services				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O	1				
	Date	Payee name				
	01/01/2024	Department of Treasury				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$8,708.81	Internal Revenue Service Center				
		Ogden, UT 84201				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
		Federal Payroll Taxes				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O	1				

### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form	•
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 12/32 Rpt: 15/57	Texans for Joe Straus	00056637
4	Date	5 Payee name	- '
	04/30/2024	Department of Treasury	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$84.00	Internal Revenue Service Center	
		Ogden, UT 84201	
8	PURPOSE		n
	OF		ravel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if	Austin, TX, officeholder living expense
		Federal F	Payroll Taxes
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experialitate to beliefit eroi	<u>'</u>	
	Date	Payee name	
	02/14/2024	Department of Treasury	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,670.30	Internal Revenue Service Center	
		Ogden, UT 84201	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descriptio	n
	OF EXPENDITURE	Salaries/Wages/Contract Labor	ravel outside of Texas. Complete Schedule T.
			Austin, TX, officeholder living expense Payroll Taxes
		reuerair	ayron raxes
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	•	Office field
	Data		
	Date 04/08/2024	Payee name Department of Treasury	
		,	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,670.30	Internal Revenue Service Center	
		Ogden, UT 84201	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descriptio	
	EXPENDITURE	Salaries/ Wages/ Contract Labor	ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense
			Payroll Taxes
			-
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

#### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/32 Rpt: 16/57	Texans for Joe Straus 00056637
4	Date	5 Payee name
	05/08/2024	Department of Treasury
6	Amount (\$) \$1,745.24	7 Payee address; City; State; Zip Code Internal Revenue Service Center
		Ogden, UT 84201
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Federal Payroll Taxes
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/10/2024	Department of Treasury
	Amount (\$) \$1,745.26	Payee address; City; State; Zip Code Internal Revenue Service Center
		Ogden, UT 84201
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Federal Payroll Taxes
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/08/2024	Department of Treasury
	Amount (\$) \$1,670.26	Payee address; City; State; Zip Code Internal Revenue Service Center
		Ogden, UT 84201
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Federal Payroll Taxes
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/32 Rpt: 17/57	Texans for Joe Straus 00056637
4	Date	5 Payee name
	04/15/2024	Department of Treasury
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$18,335.00	Internal Revenue Service Center
		Ogden, UT 84201
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Federal 1120 POL Taxes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	the state of the s
_	Date	Payee name
	01/31/2024	Embry Communications
		· · · · · · · · · · · · · · · · · · ·
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	1901 Nelson Ranch Loop
		Cedar Park, TX 78613
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Communications Consultant
		Communications Consultant
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
_	Data	Davies warms
	Date 03/06/2024	Payee name Embry Communications
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	1901 Nelson Ranch Loop
		Cedar Park, TX 78613
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Communications Consultant
	Complete ONLY if direct	Condidate/Office helder name Office accords
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H
	<u>'</u>	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	mmittee	Gift/Awards/Memorial Legal Services  The Instruction G	•		ages.	/Contract Labor		Travel Out of OTHER (ent		not listed above)
Ļ			EU EB:		Juine exhibilis	HOW TO COL	iibie	ic una ioini.	_	F1	/F:::	Occupation in The N
1	Total pages Schedule F1:	2							3		•	Commission Filers)
	Sch: 15/32 Rpt: 18/57		Texans for	Joe Straus						0005663	<i>(</i>	
4	Date	5	Payee name									
	04/18/2024		Embry Com	munications								
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de					
	\$5,000.00		1901 Nelso	n Ranch Loop								
				·								
			Cedar Park	, TX 78613								
8	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Consulting		•			Check if travel				
	-AI LINDITUIL							Check if Austin				
								Communicati	ons	s Consulta	ınt	
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offi	ceholder name	(	Office sou	ght			Office	held	
L	experiulture to beliefit C/Of	_					_					
	Date		Payee name									
	05/23/2024		Embry Com	munications								
	Amount (\$)	T	Payee addre	ss; City;	State	; Zip Co	de					
	\$5,000.00		1901 Nelso	n Ranch Loop								
	•			•								
			Cedar Park	, TX 78613								
	PURPOSE OF	(a)		ee Categories listed at	the top of this sch	nedule)	(b)	Description				
	EXPENDITURE		Consulting	Expense				Check if travel of Check if Austin,				edule T.
								Communicati				
								Johnnamouth	J110	. Joniound		
	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name	(	Office sou	aht			Office	held	
	expenditure to benefit C/O			23	`	50 500(	9.16			Sinot		
H	Date	Г	Payee name									
	06/17/2024		•	munications								
		L				. 7: 0	-1 -					
	Amount (\$)		Payee addre		State	; Zip Co	de					
	\$5,000.00		1901 Nelso	n Ranch Loop								
			Cedar Park	, TX 78613								
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Consulting	Expense				Check if travel				
	<b></b>							Communication				
								Communicati	UHS	s Consult	uIL	
	0 1. 0											
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Jandidate/Offi	ceholder name	(	Office sou	ght			Office	neld	
	OTIGITATION TO DOTTONE OF OT	•										

### SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/32 Rpt: 19/57	Texans for Joe Straus 00056637
4	Date	5 Payee name
	06/17/2024	Embry Communications
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5,000.00	1901 Nelson Ranch Loop
		Cedar Park, TX 78613
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Communications Consultant
		Communications Consultant
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
L	Dete	
	Date	Payee name
	01/04/2024	Intuit
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.73	2632 Marine Way
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Vendor payment processing fees
	Operation ONLY if allowed	One districts (Office healths are seen
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/11/2024	Intuit
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.87	2632 Marine Way
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Vendor payment processing fees
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

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

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

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

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

	orean oara rayment	The Instruction Guide explains how to co	mple	ete this form.			
1	Total pages Schedule F1:	2 FILER NAME		3	3	iler ID	(Ethics Commission Filers)
	Sch: 17/32 Rpt: 20/57	Texans for Joe Straus			(	00056637	
4	Date	5 Payee name					
	01/30/2024	Intuit					
6	Amount (\$)	7 Payee address; City; State; Zip Co	de				
	\$1.87	2632 Marine Way					
		Mountain View, CA 94043					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(h)	Description			
•	OF	Office Overhead/Rental Expense	(~)	Check if travel ou	ıtsid	e of Texas. Comp	plete Schedule T.
	EXPENDITURE			Check if Austin, T			
				Vendor payme	nt	processing	fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght			Office he	eld
	expenditure to benefit C/OI	7					
	Date	Payee name					
	01/31/2024	Intuit					
	Amount (\$)	Payee address; City; State; Zip Co	de				
	\$3.73	2632 Marine Way					
		Mountain View, CA 94043					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Office Overhead/Rental Expense		`	ıtsid	e of Texas. Comp	plete Schedule T.
	EXPENDITORE	·		Check if Austin, T			
				Vendor payme	nt	processing	tees
	0 1: 0.11.7.7.1.					0,55	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sould	gnt			Office he	ela
	Date	Payee name					
	02/14/2024	Intuit					
	Amount (\$)	Payee address; City; State; Zip Co	de				
	\$1.87	2632 Marine Way					
		Mountain View, CA 94043					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel ou			
				Check if Austin, T			
				vendoi payme	111	processing	1665
	Complete ONLY if direct	Candidate/Officeholder name Office sou	abt			Office he	ald
	Complete ONLY if direct expenditure to benefit C/OI		yııl			Office he	au

### SCHEDULE F1

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

Fees Office Overhead/Rental Expens
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense
Legal Services Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete	e this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 18/32 Rpt: 21/57	Texans for Joe Straus	00056637
4	Date	5 Payee name	'
	03/05/2024	Intuit	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$5.60	2632 Marine Way	
		·	
		Mountain View, CA 94043	
8	PURPOSE	•	Description
Ü	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Since Sverneda/Nental Expense	Check if Austin, TX, officeholder living expense
		, i	/endor payment processing fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol	1	
	Date	Payee name	
	04/04/2024	Intuit	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5.61	2632 Marine Way	
		Mountain View, CA 94043	
	PURPOSE		
	OF	· · · · · · · · · · · · · · · · · · ·	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living expense
		7	/endor payment processing fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	05/03/2024	Intuit	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3.74	2632 Marine Way	
	<b>45</b> 1	2002	
		Mountain View, CA 04042	
		Mountain View, CA 94043	
	PURPOSE OF	· · · · · · · · · · · · · · · · · · ·	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living expense
			/endor payment processing fees
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
_			

### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/32 Rpt: 22/57	Texans for Joe Straus 00056637
4	Date	5 Payee name
	05/16/2024	Intuit
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1.87	2632 Marine Way
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Vendor payment processing fees
		Vendor payment processing rees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/O	
$\vdash$	Date	Payee name
	05/22/2024	Intuit
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.87	2632 Marine Way
	Φ1.07	2032 Maine Way
		Mountain View, CA 94043
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Vendor payment processing fees
		Vendor payment processing rees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Davisa nama
	06/14/2024	Payee name Intuit
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.73	2632 Marine Way
		Mountain View, CA 94043
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Vendor payment processing fees
		vendor payment processing rees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 20/32 Rpt: 23/57	Texans for Joe Straus 00056637
4	Date	5 Payee name
	01/30/2024	Intuit
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$8.53	2632 Marine Way
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Payroll processing fees
		Payroli processing lees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	02/28/2024	Intuit
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.53	2632 Marine Way
		Mountain View, CA 94043
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Payroll processing fees
		and the state of t
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/28/2024	Intuit
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.53	2632 Marine Way
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Payroll processing fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	

### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/32 Rpt: 24/57	Texans for Joe Straus 00056637
4	Date	5 Payee name
	03/28/2024	Intuit
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$8.53	2632 Marine Way
		Mountain View, CA 94043
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Payroll processing fees
		Tayron processing roce
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/13/2024	Johnson, Gordon (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$42,000.00	1122 Colorado Street
		Suite 208
		Austin, TX 78701
_	PURPOSE	T
	OF	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Political Consultant
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/31/2024	Korstad, Tara (Mrs.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,105.25	412 Thistlewood Dr.
		Austin, TX 78745
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Wages for political/administrative services
		vvages for political/administrative services
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer	s)
	Sch: 22/32 Rpt: 25/57	Texans for Joe Straus 00056637	
4	Date	5 Payee name	
L	02/29/2024	Korstad, Tara (Mrs.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,105.26	412 Thistlewood Dr.	
		A., A., TV 70745	
Ļ		Austin, TX 78745	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Wages for political/administrative services	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
┡			
	Date 03/29/2024	Payee name Korstad, Tara (Mrs.)	
L		` '	
	Amount (\$) \$2,105.25	Payee address; City; State; Zip Code 412 Thistlewood Dr.	
	Ψ2,103.23	412 mistewood Dr.	
		Austin, TX 78745	
┝	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITORE	Check if Austin, TX, officeholder living expense	
		Wages for political/administrative services	
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
F	Date	Payee name	
	04/30/2024	Korstad, Tara (Mrs.)	
Г	Amount (\$)	Payee address; City; State; Zip Code	
	\$3,104.98	412 Thistlewood Dr.	
		Austin, TX 78745	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Wages for political/administrative services	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
L	expenditure to benefit C/OI	n	

### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Ground Gara F aymond	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 23/32 Rpt: 26/57	Texans for Joe Straus	00056637
4 Date 06/28/2024	5 Payee name Korstad, Tara (Mrs.)	
6 Amount (\$) \$2,355.19	7 Payee address; City; State; Zip C 412 Thistlewood Dr.	ode
	Austin, TX 78745	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Wages for political/administrative services
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	ught Office held
Date	Payee name	
06/28/2024	Korstad, Tara (Mrs.)	
Amount (\$) \$2,355.19	Payee address; City; State; Zip C 412 Thistlewood Dr.	ode
	Austin, TX 78745	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Wages for political/administrative services
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	ught Office held
Date	Payee name	
01/12/2024	LHP+Company Inc.	
Amount (\$) \$7,500.00	Payee address; City; State; Zip C PO Box 29382	ode
	Austin, TX 78755	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Political consultant and related expenses.
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	ught Office held

### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/32 Rpt: 27/57	Texans for Joe Straus 00056637
4	Date	5 Payee name
	04/05/2024	LHP+Company Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$22,500.00	PO Box 29382
		Austin, TX 78755
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Political consultant and related expenses.
		- Chilosa Consultant and Totalica Componicosi
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/17/2024	LHP+Company Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$7,500.00	PO Box 29382
		Austin, TX 78755
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Political consultant and related expenses.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>1</del>
	Date	Payee name
	06/17/2024	LHP+Company Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$7,500.00	PO Box 29382
		Austin, TX 78755
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Political consultant and related expenses.
		i ontical consultant and related expenses.
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)			
		The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 25/32 Rpt: 28/57	Texans for Joe Straus	00056637			
4	Date	5 Payee name				
	02/13/2024	Millan and Company P.C.				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$2,024.65	817 San Antonio St., Suite L17				
		Austin, TX 78701				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	7 tooodhang/Banking	outside of Texas. Complete Schedule T.			
		I — I —	in, TX, officeholder living expense Fee/Ethics Compliance			
		Accounting	ree/Etilics Compilance			
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office hold			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held			
$\vdash$	Date	Davida nama				
		Payee name				
	04/04/2024	Millan and Company P.C.				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$40.00	817 San Antonio St., Suite L17				
		Austin, TX 78701				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	/ Accounting/Banking	l outside of Texas. Complete Schedule T.			
		I	in, TX, officeholder living expense			
		Accounting	Fee/Ethics Compliance			
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OI		Office field			
_	Data					
	Date 05/02/2024	Payee name Millan and Company P.C				
		Millan and Company P.C.				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$60.00	817 San Antonio St., Suite L17				
		Austin, TX 78701				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE		l outside of Texas. Complete Schedule T.			
		1	in, TX, officeholder living expense			
		Accounting	Fee/Ethics Compliance			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OI		Office field			
_						
L						
F 0.	rme provided by Tayas E	thics Commission www.athics state ty us	Varsion V// 1 0 d278aha0			

### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this for	m.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
l	Sch: 26/32 Rpt: 29/57	Texans for Joe Straus	00056637
4	Date	5 Payee name	'
l	05/21/2024	Millan and Company P.C.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$1,110.68	817 San Antonio St., Suite L17	
l			
l		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	on.
	OF	· · · · · · · · · · · · · · · · · · ·	f travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check i	f Austin, TX, officeholder living expense
		Account	ing Fee/Ethics Compliance
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experientare to benefit Grot		
l	Date	Payee name	
	06/13/2024	Millan and Company P.C.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$40.00	817 San Antonio St., Suite L17	
l			
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	on
l	OF EXPENDITURE	/ Accounting/Banking	f travel outside of Texas. Complete Schedule T.
		l —	f Austin, TX, officeholder living expense ing Fee/Ethics Compliance
		Account	ing Fee/Ethics Compliance
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	•	Chiec held
H	Date	Payee name	
l	01/03/2024	Nueces Marketing Partners LTD	
┝			
l	Amount (\$) \$850.50	Payee address; City; State; Zip Code 1920 Nacogdoches Rd.	
l	Ψ030.30	1320 Nacoguoches Na.	
l		Can Antonia TV 70200	
L		San Antonio, TX 78209	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description (check in the control of the control of the category (See Categories listed at the top of this schedule)	ON f travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Onice Overneau/Nental Expense   L	f Austin, TX, officeholder living expense
l		·	committee use.
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Н	
ı			

#### SCHEDULE F1

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4. Total manage Calcadate 54	,
1 Total pages Schedule F1:	
Sch: 27/32 Rpt: 30/57	Texans for Joe Straus 00056637
4 Date	5 Payee name
02/01/2024	Nueces Marketing Partners LTD
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$850.50	1920 Nacogdoches Rd.
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Can Astonia TV 70200
	San Antonio, TX 78209
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Rent for committee use.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to belieff C/OI	•
Date	Payee name
03/04/2024	Nueces Marketing Partners LTD
Amount (\$)	Payee address; City; State; Zip Code
\$850.50	1920 Nacogdoches Rd.
	Can Antonia TV 70200
	San Antonio, TX 78209
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Rent for committee use.
	Nent for committee ase.
One make the ONE Wife diagram	Our stide to 100% as health as a sure
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/01/2024	Nueces Marketing Partners LTD
Amount (\$)	Payee address; City; State; Zip Code
\$850.50	1920 Nacogdoches Rd.
	San Antonio, TX 78209
PURPOSE	
OF	l
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Rent for committee use.
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<b>y</b>

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica			Legal Services	Expense	Salaries/W		e /Contract Labor		OTHER (enter a	a category not listed above)	
	Credit Card Payment			The Instruction G	uide explains h	ow to co	mple	te this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)	
	Sch: 28/32 Rpt: 31/57		Texans for J	loe Straus						00056637		
4	Date	5	Payee name									
	05/01/2024			keting Partners	LTD							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					$\neg$
	\$850.50		1920 Nacog	doches Rd.								
			San Antonio	, TX 78209								
8	PURPOSE	⊢		e Categories listed at t		-total	(b)	Description				_
	OF	(.,		nead/Rental Ex		eaule)	(~)		outsio	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE				po00			ш		officeholder living	g expense	
								Rent for comr	mitt	ee use.		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	ceholder name	O	ffice sou	ght			Office h	eld	
	experiulture to beliefit C/Oi											
	Date		Payee name									
	06/04/2024		Nueces Mar	keting Partners	LTD							
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$850.50		1920 Nacog	doches Rd.								
			San Antonio	, TX 78209								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sche	dule)	(b)	Description				
	OF EXPENDITURE			nead/Rental Ex				<b>=</b>			nplete Schedule T.	
	-							Rent for comr		officeholder livin	g expense	
								TRETTE TOT COTTI	111111	ice use.		
	Complete ONLY if direct	<u> </u>	:andidate/Offic	ceholder name	O:	ffice sou	aht			Office h	eld	_
	expenditure to benefit C/OI		7 a. Ta. Ta. Ta. Ta. Ta. Ta. Ta. Ta. Ta.	Jones Hame			9			J5	0.0	
-	Date	Π	Dayoo nama									_
	06/06/2024		Payee name Plum Interes	sts LLC								
	Amount (\$)		Payee addres		Stato:	Zip Co	do					
	\$68.20		115 Circle S	-	State,	Zip Co	ue					
	Ψ00.20		110 Circle 0	arcci								
			San Antonio	TV 70200								
	BUBBOOF	(-)				- 1	/I- \					
	PURPOSE OF	(a)		e Categories listed at t		dule)	(a)	Description  Check if travel of	outsio	de of Texas. Com	nplete Schedule T.	
	EXPENDITURE		Office Over	nead/Rental Ex	pense			브		officeholder livin	•	
								Computer So	ftw	are		
	Complete ONLY if direct		Candidate/Offic	ceholder name	O	ffice sou	ght			Office h	eld	
L	expenditure to benefit C/OI	H							_			

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	didate/Officenolder/Politica Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pa	ages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
-	9/32 Rpt: 32/57	Texans for Joe Straus 00056637	
4 Date		5 Payee name	
06/16/2	2024	Plum Interests, LLC	
6 Amount	t (\$)	7 Payee address; City; State; Zip Code	
	\$68.20	115 Circle Street	
		San Antonio, TX 78209	
	RPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF NDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Computer Software	
		Computer Continue	
9 Comple	ete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	_
	liture to benefit C/O		
		T	_
Date	10004	Payee name	
01/03/	2024	Spectrum Business	
Amoun		Payee address; City; State; Zip Code	
	\$131.09	PO Box 660815	
		Dallas, TX 75266	
	RPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF NDITURE	Office Overhead/Rental Expense	
		Committee Office Utilities	
		Committee Office Offitties	
Camania	oto ONII V if dinoct	Condidate/Office helder no rec	_
	ete <u>ONLY</u> if direct liture to benefit C/O	Candidate/Officeholder name Office sought Office held H	
•		T	_
Date		Payee name	
02/01/2	2024	Spectrum Business	
Amoun	t (\$)	Payee address; City; State; Zip Code	
	\$131.09	PO Box 660815	
		Dallas, TX 75266	
	RPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF NDITURE	Office Overhead/Rental Expense	
LXI L	NOTIONE	Check if Austin, TX, officeholder living expense	
		Committee Office Utilities	
	ete <u>ONLY</u> if direct liture to benefit C/O	Candidate/Officeholder name Office sought Office held	
СХРСПА	nare to benefit ere		

### SCHEDULE F1

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

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

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

	Credit Card Payment		The Instruction Guide explains how to co	mple	ete this form.		
1	Total pages Schedule F1:	2	ILER NAME		3 F	iler ID	(Ethics Commission Filers)
	Sch: 30/32 Rpt: 33/57	-	Texans for Joe Straus		0	0056637	
4	Date	5 F	Payee name		•		
	03/04/2024	(	Spectrum Business				
6	Amount (\$)	7	Payee address; City; State; Zip Co	ode			
	\$131.12	F	PO Box 660815				
		[	Dallas, TX 75266				
8	PURPOSE		Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	(	Office Overhead/Rental Expense		Check if travel outside Check if Austin, TX, of		
					Committee Office		схрепас
9	Complete ONLY if direct		andidate/Officeholder name Office sou	ıght		Office he	ld
	expenditure to benefit C/O	Н					
	Date	F	Payee name				
	04/01/2024	(	Spectrum Business				
	Amount (\$)	F	Payee address; City; State; Zip Co	ode			
	\$133.55	F	PO Box 660815				
		[	Dallas, TX 75266				
	PURPOSE OF	(a) (	Category (See Categories listed at the top of this schedule)	(b)	Description		
	EXPENDITURE	(	Office Overhead/Rental Expense		Check if travel outside Check if Austin, TX, of		
					Committee Office		САРСПЭС
	Complete ONLY if direct		andidate/Officeholder name Office sou	ıght		Office he	ld
	expenditure to benefit C/O	Н					
	Date	F	Payee name				
	05/01/2024		Spectrum Business				
	Amount (\$)	F	Payee address; City; State; Zip Co	ode			
	\$134.05	F	PO Box 660815				
		[	Dallas, TX 75266				
	PURPOSE		Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	(	Office Overhead/Rental Expense		Check if travel outside Check if Austin, TX, of		
					Committee Office		ехрепос
	Complete ONLY if direct		andidate/Officeholder name Office sou	ıght		Office he	ld
	expenditure to benefit C/OI	Н					

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
_	Sch: 31/32 Rpt: 34/57	Texans for Joe Straus  00056637
4	Date	5 Payee name
	06/04/2024	Spectrum Business
6	Amount (\$) \$134.05	7 Payee address; City; State; Zip Code PO Box 660815  Dallas, TX 75266
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense  Committee Office Utilities
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/03/2024	Travelers Insurance
	Amount (\$)	Payee address; City; State; Zip Code
	\$71.85	PO Box 660317
		Dallas, TX 75266-0317
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Property and Casualty Coverage for committee Office.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/04/2024	Travelers Insurance
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.95	PO Box 660317
		Dallas, TX 75266-0317
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Property and Casualty Coverage for committee Office.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Serv			Sala		ges/	Contract Labor		Travel Out of Di OTHER (enter a	strict a category not listed	above)
1	Total pages Schedule F1:	ı									l	Filer ID	(Ethics Commi	ssion Filers)
	Sch: 32/32 Rpt: 35/57		Texans for J	oe Stra	ius							00056637		
4	Date	5	Payee name											
	01/03/2024		U.S. Post O	ffice										
6	Amount (\$)	7	Payee addres	s; C	City;	S	tate; Zip	Cod	е					
	\$13.20		5500 Broad	way										
			San Antonio	, TX 78	209									
8	PURPOSE	(a)	Category (Se	e Categorie	es listed at t	he top of thi	is schedule)	(1	b)	Description				
	OF EXPENDITURE		Office Overh	nead/Re	ental Exp	pense			ļ	<b>-</b>			nplete Schedule T.	
									ı	Postage	, IX,	officeholder livin	g expense	
										. ootago				
9	Complete ONLY if direct		Candidate/Offic	eholder	name		Office	soual	ht			Office h	eld	
	expenditure to benefit C/O	Η						Ū						
	Date		Payee name											
	04/01/2024	ı	U.S. Post O	ffice										
	Amount (\$)	$\vdash$	Payee addres	s; C	City;	S	tate; Zip	Cod	e					
	\$13.60		5500 Broad	way										
			San Antonio	, TX 78	209									
	PURPOSE OF	(a)	Category (Se				is schedule)	(1	b) '	Description		df-T O		
	EXPENDITURE		Office Overh	nead/Re	ental Exp	pense			ŀ	<b>—</b>		officeholder livin	nplete Schedule T.	
										ഥ Postage				
	Complete ONLY if direct		Candidate/Offic	eholder	name		Office	sougl	ht			Office h	eld	
	expenditure to benefit C/O	Η												

#### UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 36/57 Texans for Joe Straus 00056637 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 06/28/2024 Department of Treasury Amount (\$) Payee address; State; Zip Code \$1,202.34 Internal Revenue Service Center Ogden, UT 84201 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Payroll Tax Liability 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# SCHEDULE F4

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

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 1/17 Rpt: 37/57	Texans for Joe Stra	aus		00056637			
4 CREDIT CARD ISSUER		ncial institution an Chase	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 550.32			
6 PAYMENT	(a) Amount Charged \$21.60	(b) Date of Charge 06/16/2024	(c) Date(s) Credit Card Issue 06/28/2024	r Paid			
7 PAYEE	(a) Payee name Intuit		(b) Payee address; 2632 Marine Way Mountain View, CA 94043	City, State, Zip Code			
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Accounting Software				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name Office sought				Office held			
PAYMENT	(a) Amount Charged \$982.50	(b) Date of Charge 01/01/2024	(c) Date(s) Credit Card Issue 02/26/2024	r Paid			
PAYEE	(a) Payee name  Aristotle		(b) Payee address; 205 Pennsylvania Ave., S Washington, DC 20003	City, State, Zip Code SE			
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Political compliance software and database.				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged \$982.50	(b) Date of Charge 04/01/2024	(c) Date(s) Credit Card Issue 05/15/2024	r Paid			
PAYEE	(a) Payee name Aristotle		(b) Payee address; 205 Pennsylvania Ave., S Washington, DC 20003	City, State, Zip Code SE			
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Description Political compliance softw				
Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.	<u> </u>				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			

# SCHEDULE F4

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

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commiss	sion Filers)			
Sch: 2/17 Rpt: 38/57	Texans for Joe Stra	aus		00056637				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 550.3	32			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$138.76	03/10/2024	04/18/2024					
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State,	Zip Code			
	AT&T Mobility		PO Box 650574					
a puppose of	(a) Catagony		Dallas, TX 75265-0574					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description  Cellular Telephone for po	litical use				
X Political	Office Overhead/Ren	tal Expense	Central Perephone for po					
Non-Political	`	of Texas. Complete Schedule T.	<b>_</b>	officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH	( ) 4	[ (1) D ( ) (0)	1() 5 ( ( ) 6 ( ) 6 ( )	D : 1				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 05/15/2024	r Paid				
	\$138.16	04/10/2024	00/10/2024					
PAYEE	(a) Payee name (b) Payee address;			City, State,	Zip Code			
	AT&T Mobility		PO Box 650574					
			Dallas, TX 75265-0574					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
l <u> </u>	Office Overhead/Ren		Cellular Telephone for political use					
X Political								
Non-Political	· · · —	of Texas. Complete Schedule T.		officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$159.63	06/10/2024	06/27/2024					
PAYEE	(a) Payee name	•	(b) Payee address;	City, State,	Zip Code			
	AT&T Mobility		PO Box 650574					
			Dallas, TX 75265-0574					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Office Overhead/Ren		Cellular Telephone for po	litical use				
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 expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
	I							

## SCHEDULE F4

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

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

Event Expense Fees Food/Beverage Expense Gift/Award/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

Candidate/Officeriolide//Folitica		ruction Guide explains how	· ·	TILK (eliter a category	not listeu ai	Jove)		
1 Total pages Schedule F4:		·	<u> </u>	3 Filer ID (Ethics	s Commiss	sion Filers)		
Sch: 3/17 Rpt: 39/57	Texans for Joe Stra	เนร		00056637		,		
4 CREDIT CARD ISSUER	Name of finar	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	550.3	32		
6 PAYMENT	(a) Amount Charged \$120.00	(b) Date of Charge 03/23/2024	(c) Date(s) Credit Card Issuer 04/18/2024	Paid				
7 PAYEE	(a) Payee name  Nation Builder		(b) Payee address; PO Box 811428	City,	State,	Zip Code		
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		Los Angeles, CA 90081 (b) Description Political campaign softwar	re				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse			
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought				Office held				
PAYMENT	(a) Amount Charged \$29.79	(b) Date of Charge 02/23/2024	(c) Date(s) Credit Card Issuer 03/28/2024	Paid				
PAYEE	New York Times 620 Eighth		(b) Payee address; 620 Eighth Ave. New York, NY 10018	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Digital Subscription					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$138.76	(b) Date of Charge 01/01/2024	(c) Date(s) Credit Card Issuer 02/26/2024	· Paid				
PAYEE	PAYEE (a) Payee name  AT&T Mobility		(b) Payee address; PO Box 650574 Dallas, TX 75265-0574	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE  X Political	EXPENDITURE (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense		(b) Description Cellular Telephone for political use					
Non-Political	(c) Silbatin datas success si rollas success si				nse			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	e sought	Office held					

# SCHEDULE F4

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

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete this	form.					
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commis	sion Filers)		
	Sch: 4/17 Rpt: 40/57	Texans for Joe Stra	nus			00056637				
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF EXPENDITI CHARGED CARD		\$	550.3	32		
6	PAYMENT	(a) Amount Charged \$138.16	(b) Date of Charge 05/10/2024	(c) Date(s) Cre 06/27/2024	dit Card Issuer	Paid				
7	PAYEE	(a) Payee name  AT&T Mobility		(b) Payee addi PO Box 6505	574	City,	State,	Zip Code		
L				Dallas, TX 7						
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Cellular Tele	phone for poli	itical use				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
€	expenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$902.09	(b) Date of Charge 03/06/2024	03/06/2024		Paid				
PAYEE (a) Payee name				(b) Payee addı	ess;	City,	State,	Zip Code		
		Bridgehead, I.T.		2810 N. Flore	es St.					
L				San Antonio,						
	PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Rent	,	(b) Description  Monthly IT Support and Quarterly Service						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	Theck if Austin TX (	officeholder living expe	ense			
H	Complete ONLY if direct	Candidate/Officeholder		e sought	SHEEK II Addilli, TA,	Office held				
e	expenditure to benefit C/OH			g						
	PAYMENT	(a) Amount Charged \$451.04	(b) Date of Charge 06/18/2024	(c) Date(s) Cre 06/27/2024	dit Card Issuer	Paid				
Г	PAYEE	(a) Payee name		(b) Payee addı	ess;	City,	State,	Zip Code		
		Bridgehead, I.T.		2810 N. Flore	es St.					
L				San Antonio,						
	PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Rent	,	(b) Description  Monthly IT Support and Quarterly Service						
	Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				lle T. Check if Austin, TX, officeholder living expense				
e	Complete ONLY if direct expenditure to benefit C/OH  Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name  Office sought					Office held				

# SCHEDULE F4

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

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete t	his form.				
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commis	sion Filers)	
	Sch: 5/17 Rpt: 41/57	Texans for Joe Stra	aus			00056637			
4	CREDIT CARD	Name of final	ncial institution		OF UNITEMIZED DITURES	<b> </b>	550.3	32	
	ISSUER	see pi	revious		ED TO A CREDIT	1 '	550.	J.C.	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid			
		\$371.69	02/14/2024	03/28/20	24				
7	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code	
		Door Dash		303 2nd	St. Suite 800				
L				1	cisco, CA 94107				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this echodula)	(b) Descrip					
	X Political	Gift/Awards/Memorial		Meals for	office staff.				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense		
9	Complete ONLY if direct					Office held			
е	expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	. , , , ,	Credit Card Issue	r Paid			
		\$737.07	02/29/2024	03/28/20	24				
	PAYEE (a) Payee name			(b) Payee	address;	City,	State,	Zip Code	
		Ca Daddurana		14455 N.	Hayden Rd.				
		Go Daddy.com		Suite 219	)				
L				Scottsdal	e, AZ 85260				
	PURPOSE OF	(a) Category	of this cobodule)	(b) Descrip					
	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Domain Registration					
	X Political								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
е	expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	. , , , ,	Credit Card Issue	r Paid			
		\$31.97	03/16/2024	04/18/20	24				
T	PAYEE	(a) Payee name	<u> </u>	(b) Payee	address;	City,	State,	Zip Code	
				14455 N.	Hayden Rd.				
		Go Daddy.com		Suite 219	)				
				Scottsdal	e, AZ 85260				
	PURPOSE OF	(a) Category		(b) Descrip					
1	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	•	Website	and email hosting	9			
1	X Political		1						
L	Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas.				officeholder living expe	ense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	sought		Office held			
e	expenditure to benefit C/OH								

# SCHEDULE F4

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

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)		
Sch: 6/17 Rpt: 42/57	Texans for Joe Stra	aus		00056637				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	550.3	32		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
	\$31.97	04/02/2024	05/15/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Go Daddy.com		14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260					
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE  X Political	(See Categories listed at the top Office Overhead/Rent	•	Website and email hostin	g				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living exp	ense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$31.97	(b) Date of Charge 05/02/2024	(c) Date(s) Credit Card Issue 06/27/2024	r Paid				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Go Daddy.com		14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE  X Political	(See Categories listed at the top Office Overhead/Rent		Website and email hostin	g				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living exp	ense			
Complete ONLY if direct	Candidate/Officeholder		e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$29.99	(b) Date of Charge 01/05/2024	(c) Date(s) Credit Card Issue 02/26/2024	r Paid				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Houston Chronicle		4747 Southwest Freeway	,				
	Tiousion Cilionicle							
	1,00		Houston, TX 77027					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	Dolitical Llas				
	Office Overhead/Rent	•	Monthly Subscription for I	Political USe.				
X Political								
Non-Political	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	of Texas. Complete Schedule T.	<u></u>					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held				

# SCHEDULE F4

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

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete this form.				
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)	
	Sch: 7/17 Rpt: 43/57	Texans for Joe Stra	aus		00056637			
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CREE CARD	\$	550.3	32	
6	PAYMENT	(a) Amount Charged \$29.99	(b) Date of Charge 02/29/2024	(c) Date(s) Credit Card Iss 03/28/2024	uer Paid			
7	PAYEE	(a) Payee name  Houston Chronicle		(b) Payee address; 4747 Southwest Freew	City, ay	State,	Zip Code	
Ļ		(-) O-t		Houston, TX 77027				
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Monthly Subscription fo	r Political Use.			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living exp	ense		
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
E	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid			
		\$29.99	03/29/2024					
PAYEE (a) Payee name			<u> </u>	(b) Payee address;	City,	State,	Zip Code	
		Houston Chronicle		4747 Southwest Freew	ay			
L				Houston, TX 77027				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description  Monthly Subscription for Political Use.				
	X Political							
L	Non-Political	· · · —	of Texas. Complete Schedule T.	<u> </u>	TX, officeholder living exp	ense		
€	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	PAYMENT	(a) Amount Charged \$29.99	(b) Date of Charge 04/05/2024	(c) Date(s) Credit Card Iss 05/15/2024	uer Paid			
	PAYEE	Houston Chronicle 4747 Sou		(b) Payee address; 4747 Southwest Freew Houston, TX 77027	City, ay	State,	Zip Code	
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	,	(b) Description Monthly Subscription fo	r Political Use.			
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	ale T. Check if Austin, TX, officeholder living expense				
e	Complete ONLY if direct						_	

## SCHEDULE F4

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

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete	this form.	(* ** *********************************	,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
Sch: 8/17 Rpt: 44/57	Texans for Joe Stra	aus			00056637		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	550.3	32
6 PAYMENT	(a) Amount Charged \$285.18	(b) Date of Charge 06/19/2024	(c) Date(s) 06/27/20	Credit Card Issuer 24	Paid		
7 PAYEE	(a) Payee name  Maverick's			. Mary's Street	City,	State,	Zip Code
0. PURPOSE OF	(a) Catagony		(b) Descrip	nio, TX 78205			
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		Meeting to discuss political business.				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct Candidate/Officeholder name Office sought				Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$29.79	(b) Date of Charge 01/26/2024	(c) Date(s) Credit Card Issuer 02/26/2024		Paid		
PAYEE	PAYEE (a) Payee name (b) Payee address;			City,	State,	Zip Code	
	New York Times		620 Eigh	th Ave.			
				k, NY 10018			
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Digital Su	otion ubscription			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	l	Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$379.25	(b) Date of Charge 05/14/2024	(c) Date(s) 06/27/20	Credit Card Issuer 24	<sup>*</sup> Paid		
PAYEE	(a) Payee name Aristotle		(b) Payee address; 205 Pennsylvania Ave., S Washington, DC 20003		City, E	State,	Zip Code
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Political o	otion compliance softw	are and databa	ase.	
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

## SCHEDULE F4

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

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

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

Printing Expense Salaries/Wages/Contract Labor

Candidate/Onicendiden/Folitica	3	ruction Guide explains how	ŭ	TILK (enter a category	/ Hot listed a	Jove)	
1 Total pages Schedule F4:		·	<u> </u>	3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 9/17 Rpt: 45/57	Texans for Joe Stra	aus		00056637		,	
4 CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	550.3	32	
6 PAYMENT	(a) Amount Charged \$138.76	(b) Date of Charge 02/10/2024	(c) Date(s) Credit Card Issuer 03/28/2024	Paid			
7 PAYEE	(a) Payee name  AT&T Mobility		(b) Payee address; PO Box 650574 Dallas, TX 75265-0574	City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Cellular Telephone for pol	itical use			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense		
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought				Office held			
PAYMENT	(a) Amount Charged \$1,175.94	(b) Date of Charge 01/08/2024	(c) Date(s) Credit Card Issuer 02/26/2024	Paid			
PAYEE	PAYEE (a) Payee name  Go Daddy.com		(b) Payee address; 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Domain Registration				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$31.97	(b) Date of Charge 06/02/2024	(c) Date(s) Credit Card Issuer 06/27/2024	· Paid			
PAYEE	PAYEE (a) Payee name  Go Daddy.com		(b) Payee address; 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE    X   Political	1 1 2 2		(b) Description Website and email hosting				
Non-Political	(c) Check if travel outside	<u> </u>	officeholder living expe	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	e sought	Office held				
l							

## SCHEDULE F4

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

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

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

Polling Expense Travel in E Printing Expense Travel Out Salaries/Wages/Contract Labor OTHER (6

		The Inst	ruction Guide explains how	to complete	this form.	(	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 10/17 Rpt: 46/57	Texans for Joe Stra	aus			00056637		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	550.3	32
6	PAYMENT	(a) Amount Charged \$29.99	(b) Date of Charge 05/06/2024	(c) Date(s) 06/27/20	) Credit Card Issuer 124	Paid		
7	PAYEE	(a) Payee name  Houston Chronicle			uthwest Freeway	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	, TX 77027 ption Subscription for F	Political Use.		
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct candidate/Officeholder name office sought expenditure to benefit C/OH				Office held				
	PAYMENT	(a) Amount Charged \$29.99	(b) Date of Charge 06/05/2024	(c) Date(s) 06/28/20	) Credit Card Issuer 124	Paid		
	PAYEE	(a) Payee name  Houston Chronicle			address; uthwest Freeway , TX 77027	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri		Political Use.		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$234.18	(b) Date of Charge 05/03/2024	(c) Date(s) 06/27/20	) Credit Card Issuer 124	Paid		
	PAYEE	(a) Payee name Intuit			address; rine Way n View, CA 94043	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Description Accounting Software				
	Non-Political					officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
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## SCHEDULE F4

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

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)
	Sch: 11/17 Rpt: 47/57	Texans for Joe Stra	aus			00056637		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	550.3	32
6	PAYMENT	(a) Amount Charged \$17.28	(b) Date of Charge 05/16/2024	(c) Date(s 06/27/20	) Credit Card Issue 124	r Paid		
7	PAYEE	(a) Payee name Intuit			address; trine Way n View, CA 94043	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri		)		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought				Office held				
	PAYMENT	(a) Amount Charged \$120.00	(b) Date of Charge 01/23/2024	(c) Date(s 02/26/20	) Credit Card Issue )24	r Paid		
	PAYEE	(a) Payee name  Nation Builder		(b) Payee PO Box	811428	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	eles, CA 90081 ption campaign softwa	re		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$29.79	(b) Date of Charge 04/20/2024	(c) Date(s 05/15/20	) Credit Card Issue )24	r Paid		
	PAYEE	(a) Payee name  New York Times		(b) Payee 620 Eigh New Yor		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Digital Subscription				
$ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ld}}}}}}$	Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officehold					ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
l								

# SCHEDULE F4

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

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete th	is form.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)	
Sch: 12/17 Rpt: 48/57	Texans for Joe Stra	aus			00056637			
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$	550.3	32	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid			
	\$198.00	04/16/2024	05/15/202	4				
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code	
	Intuit		2632 Mari	ne Way				
	Intuit		Mountain '	View, CA 94043	}			
8 PURPOSE OF	(a) Category		(b) Descript	ion				
EXPENDITURE  X Political	(See Categories listed at the top Office Overhead/Ren		Accounting	g Software				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	, , , , , , , , , , , , , , , , , , , ,			Paid			
	\$120.00 02/23/2024 06/28/2024		4					
PAYEE	(a) Payee name (b) Payee address;			ddress;	City,	State,	Zip Code	
	Nation Builder		PO Box 81	L1428				
	Nation Builder		l					
	(a) Cataman			es, CA 90081				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Political campaign software					
X Political	Office Overhead/Ren	tal Expense	Ontical ca	impaigir soitwai	C			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Chock if Austin TV	officeholder living exp	20000		
Complete ONLY if direct	Candidate/Officeholder	·	e sought	Check if Austin, TA,	Office held	letise		
expenditure to benefit C/OH			o coug		000			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (	Credit Card Issuer	· Paid			
	\$120.00	04/23/2024	05/15/202					
	Ψ120.00	04/25/2024						
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code	
			PO Box 81	L1428				
	Nation Builder							
			Los Angel	es, CA 90081				
PURPOSE OF	(a) Category							
EXPENDITURE 		(See Categories listed at the top of this schedule) Office Overhead/Rental Expense			e			
X Political	Sings & 18 medal mental Expenses							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	TX, officeholder living expense			
Complete ONLY if direct					Office held			
expenditure to benefit C/OH								

# SCHEDULE F4

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

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4: 2 FILER NAME					3 Filer ID (Ethics Commission Filers)			
Sch: 13/17 Rpt: 49/57	Texans for Joe Stra	aus		00056637				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$</b> 550.32		32		
6 PAYMENT	(a) Amount Charged \$120.00	(b) Date of Charge 05/23/2024	(c) Date(s) Credit Card Issuer 06/27/2024	Paid				
7 PAYEE	(a) Payee name (b) Payee address; PO Box 811428  Los Angeles CA 20081				State,	Zip Code		
	Los Angeles, CA 90081							
8 PURPOSE OF EXPENDITURE  X Political	EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			re				
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX			officeholder living expe	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought	Office held				
PAYMENT	(a) Amount Charged \$120.00	(b) Date of Charge 06/23/2024	(c) Date(s) Credit Card Issuer 06/28/2024	· Paid				
PAYEE	(a) Payee name  Nation Builder		(b) Payee address; PO Box 811428 Los Angeles, CA 90081	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Political campaign softwar	re				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$29.79	(b) Date of Charge 03/23/2024	(c) Date(s) Credit Card Issuer 04/18/2024	Paid				
PAYEE	(a) Payee name  New York Times		(b) Payee address; 620 Eighth Ave. New York, NY 10018	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Description Digital Subscription					
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name Office sought Office held								

# SCHEDULE F4

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

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

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

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.											
1	Total pages Schedule F4:	s Schedule F4: 2 FILER NAME					3 Filer ID (Ethics Commission Filers)				
	Sch: 14/17 Rpt: 50/57	Texans for Joe Stra	nus				00056637				
4	CREDIT CARD ISSUER	Name of financial institution  see previous  See previous		\$	550.3	32					
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	-	(c) Date(s) C	redit Card Issuer	Paid				
		\$29.79	05/17/2024		06/27/2024	4					
7	PAYEE	(a) Payee name		-	(b) Payee ac	ldress;	City,	State,	Zip Code		
		New York Times			620 Eighth	Ave.					
				_	New York,						
8	PURPOSE OF	(a) Category			(b) Description						
	EXPENDITURE  X Political	(See Categories listed at the top Office Overhead/Rent			Digital Sub	scription					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense			
9	Complete ONLY if direct	Candidate/Officeholder	name Office	ce s	sought		Office held				
е	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge			redit Card Issuer	Paid				
		\$29.79	06/14/2024		06/28/2024	1					
	PAYEE	(a) Payee name	•	-	(b) Payee ac	ldress;	City,	State,	Zip Code		
		New York Times			620 Eighth	Ave.					
					New York,	NY 10018					
	PURPOSE OF	(a) Category	<b>6</b> 11: 1 1 1 1		(b) Description						
	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent			Digital Sub	scription					
	X Political		iai Experies								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	X, officeholder living expense				
	Complete ONLY if direct	Candidate/Officeholder	name Office	ce s	sought		Office held				
е	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge			redit Card Issuer	Paid				
		\$183.30	06/12/2024		06/27/2024	4					
$\vdash$	PAYEE	(a) Payee name	<u> </u>	+	(b) Payee ac	ldress;	City,	State,	Zip Code		
					177 Joe Ro		•	•	·		
		Texas A&M Confer	ence Center								
					College Sta	ation, TX 77840	)				
Г	PURPOSE OF	(a) Category		_	(b) Description						
	EXPENDITURE	(See Categories listed at the top	,		Lodging for	r Joe Straus wh	ile on political b	ousiness			
	X Political	Food/Beverage Expense									
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Γ	Check if Austin, TX,	officeholder living expe	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	ce s	sought	_	Office held				
е	xpenditure to benefit C/OH										

## SCHEDULE F4

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

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

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

Printing Expense

Candidate/Onicendide//Foliaca		ruction Guide explains how	-	THER (eliter a category in	ot iisted at	Jove)	
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	Commiss	sion Filers)	
Sch: 15/17 Rpt: 51/57	Texans for Joe Stra	aus		00056637			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	<b>\$</b> 550.32		
6 PAYMENT	(a) Amount Charged \$181.22	(b) Date of Charge 01/09/2024	(c) Date(s) Credit Card Issue 02/26/2024	r Paid			
7 PAYEE	(a) Payee name  The Business Journ	nal	(b) Payee address; 200 E. Grayson	State,	Zip Code		
	( ) 0 :		San Antono, TX 78205				
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Annual Subscription				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	se		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged \$23.35	(b) Date of Charge 03/10/2024	(c) Date(s) Credit Card Issue 04/18/2024	r Paid			
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
	Dallas Morning Nev	WS	508 Young St.				
			Dallas, TX 75202				
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description  Monthly Subscription for F	Political Use.			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	se		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged \$23.35	(b) Date of Charge 01/10/2024	(c) Date(s) Credit Card Issue 02/26/2024	r Paid			
PAYEE	(a) Payee name  Dallas Morning Nev	NS	(b) Payee address; 508 Young St. Dallas, TX 75202	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Monthly Subscription for F	Political Use.			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	se		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			

# SCHEDULE F4

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

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.						
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics	Commiss	sion Filers)					
Sch: 16/17 Rpt: 52/57	Texans for Joe Straus			00056637					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	550.3	32			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
	\$23.35	02/10/2024	03/28/2024						
7 PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code			
	Dallas Morning Nev	ws	508 Young St.						
	Dallas, TX 75202								
8 PURPOSE OF EXPENDITURE	· Link and Table and the same a			- 111					
X Political	1 '	egories listed at the top of this schedule)  Overhead/Rental Expense  Monthly Subscription for F			Political Use.				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expen	ise				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged \$23.35	(b) Date of Charge 04/10/2024	(c) Date(s) Credit Card Issue 05/15/2024	er Paid					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Dallas Morning Nev	WS	508 Young St.						
			Dallas, TX 75202						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description  Monthly Subscription for	Political Use.					
X Political	Office Overflead/Neri	іаі шхрепзе							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expen	ıse				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged \$23.35	(b) Date of Charge 05/10/2024	(c) Date(s) Credit Card Issue 06/27/2024	r Paid					
PAYEE	(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code			
	(4) * 3) * 3		508 Young St.	-1.5,					
	Dallas Morning Nev	WS	l doo roung ou						
			Dallas, TX 75202						
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top	,	Monthly Subscription for	Political Use.					
X Political	Office Overhead/Ren	tai Expense							
Non-Political	(1)	of Texas. Complete Schedule T.		, officeholder living expen	ise				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held					

# SCHEDULE F4

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

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards	rage Expense     s/Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipr Travel in District Travel Out of District OTHER (enter a cate	nent & Related Expense gory not listed above)	
	The Insti	ruction Guide explains ho	ow to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Et	hics Commission Filers	3)
Sch: 17/17 Rpt: 53/57	Texans for Joe Stra	us		00056637		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRE CARD	<b> </b> \$	550.32	
6 PAYMENT	(a) Amount Charged \$23.35	(b) Date of Charge 06/10/2024	(c) Date(s) Credit Card Is 06/28/2024	ssuer Paid		
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State, Zip Co	ode
	Dallas Morning Nev	vs	508 Young St.			
	( ) 0 :		Dallas, TX 75202			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description  Monthly Subscription	for Political Use		
X Political	Office Overhead/Rent	al Expense	menany casconpact	ioi i dilliodi Goo.		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	. Check if Austi	n, TX, officeholder living e	expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Off	fice sought	Office held		

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

# SCHEDULE K

	The Instru	cti	on Guide explains how to complete this form.	1			ages Schedule K: ./4 Rpt: 54/57	
2	FILER NAME			3	3	Filer ID	(Ethics Commission Fi	lers)
	Texans for J	loe	Straus			00056	6637	
4	Date	5	Name of person from whom amount is received	I			8 Amount (\$)	
	01/31/2024		Frost Bank				\$2	245.09
		6	Address of person from whom amount is received; City; State; Zip Code					
			San Antonio, TX 78296					
		7	Purpose for which amount is received	Check if pol	itic	al cont	ribution returned to filer	
			Interest Income	·				
	Date	╁	Name of person from whom amount is received				Amount (\$)	
	02/29/2024		Frost Bank					197.57
	02/23/2024	ļ						101.01
			Address of person from whom amount is received; City; State; Zip Code					
			San Antonio, TX 78296					
		H		Check if not	itic	al cont	I ribution returned to filer	
			Interest Income	Oncok ii poi	itio	ai com	indution returned to mer	
	5 .	<u> </u>					T	
	Date		Name of person from whom amount is received				Amount (\$)	152.02
	03/29/2024	ļ	Frost Bank				-	L53.83
			Address of person from whom amount is received; City; State; Zip Code					
			San Antonio, TX 78296					
		H		Check if not	itic	al cont	I ribution returned to filer	
			Interest Income	Check ii poi	ILIC	ai com	indution returned to life.	
	5 .	<u> </u>					T	
	Date		Name of person from whom amount is received				Amount (\$)	bEC 40
	04/30/2024	ļ	Frost Bank					\$56.42
			Address of person from whom amount is received; City; State; Zip Code					
			San Antonio, TX 78296					
		⊢		Chook if not	itio	ol cont	ribution returned to filer	
			Interest Income	спеск ії рог	ILIC	ai coni	ribution returned to filer	
		<u> </u>						
	Date		Name of person from whom amount is received				Amount (\$)	
	05/31/2024	ļ	Frost Bank					\$96.80
			Address of person from whom amount is received; City; State; Zip Code					
			San Antonia TV 70206					
		$\vdash$	San Antonio, TX 78296	<u> </u>				
			<del></del> -	Check if pol	itic	al cont	ribution returned to filer	
			Interest Income					

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

## SCHEDULE K

	The Instru		pages Schedule K: 2/4 Rpt: 55/57		
2	FILER NAME		3	Filer I	C (Ethics Commission Filers)
	Texans for J	oe Straus		00056	6637
4	Date	5 Name of person from whom amount is received	<u> </u>		8 Amount (\$)
	06/28/2024	Frost Bank			\$77.78
	00/20/2021	6 Address of person from whom amount is received: City; State; Zip Code			
		Address of person from whom amount is received, City, State, 2ip Code			
		San Antonio, TX 78296			
			- I:4: -	مر ما	wile, stice water was all to file.
		_ :	OIIIIC	aı con	ribution returned to filer
		Interest Income			
	Date	Name of person from whom amount is received			Amount (\$)
	01/31/2024	Frost Bank Brokerage			\$7,356.05
		Address of person from whom amount is received; City; State; Zip Code	•••••		1
		San Antonio, TX 78296			
		Purpose for which amount is received Check if po	olitic	al cont	ribution returned to filer
		Dividend Income			
	Date	Name of person from whom amount is received			Amount (\$)
	02/29/2024	Frost Bank Brokerage			\$6,898.31
	OLI LOI LOL				Ψ0,000.01
		Address of person from whom amount is received; City; State; Zip Code			
		San Antonio, TX 78296			
			alitic	al cont	I ribution returned to filer
		Dividend Income	Jillic	ai com	indution returned to lile
	Date	Name of person from whom amount is received			Amount (\$)
	03/31/2024	Frost Bank Brokerage			\$7,399.23
		Address of person from whom amount is received; City; State; Zip Code			
		San Antonio, TX 78296			
		<u> </u>	olitic	al cont	ribution returned to filer
		Dividend Income			
	Date	Name of person from whom amount is received			Amount (\$)
	04/30/2024	Frost Bank Brokerage			\$7,180.28
		Address of person from whom amount is received; City; State; Zip Code			1
		San Antonio, TX 78296			
			olitic	al cont	ribution returned to filer
		Dividend Income		50110	

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

## SCHEDULE K

	The Instru	cti	on Guide explains how to complete this form.	1		ages Schedule K: 8/4 Rpt: 56/57
2	FILER NAME			3		
	Texans for J	oe	Straus		00056	,
4	Date	_	Name of person from whom amount is received			8 Amount (\$)
	05/31/2024	ľ	Frost Bank Brokerage			\$7,229.49
			Address of person from whom amount is received; City; State; Zip Code			
		ľ	Address of person from whom amount is received, City, State, 21p Code			
			San Antonio, TX 78296			
		7	Purpose for which amount is received Check	if politi	cal cont	ribution returned to filer
			Dividend Income			
_	Date	H	Name of person from whom amount is received			Amount (\$)
	06/28/2024		Frost Bank Brokerage			\$6,848.49
	00/20/2024	ļ				Ψ0,040.49
			Address of person from whom amount is received; City; State; Zip Code			
			San Antonio, TX 78296			
				if politi	cal cont	Iribution returned to filer
			Dividend Income	po		
	Date	_	Name of person from whom amount is received			Amount (\$)
	01/31/2024		Jefferson Bank			\$775.40
	01/01/2024	ļ	Address of person from whom amount is received; City; State; Zip Code			Ψ110.40
			Address of person from whom amount is received, City, State, 21p code			
			San Antonio, TX 78201			
			Purpose for which amount is received	if politi	cal cont	ribution returned to filer
			Interest Income			
	Date		Name of person from whom amount is received			Amount (\$)
	02/29/2024		Jefferson Bank			\$726.44
		ļ	Address of person from whom amount is received; City; State; Zip Code			
			San Antonio, TX 78201			
			Purpose for which amount is received	if politi	cal cont	ribution returned to filer
			Interest Income			
	Date		Name of person from whom amount is received			Amount (\$)
	03/31/2024		Jefferson Bank			\$777.61
		ļ	Address of person from whom amount is received; City; State; Zip Code			
			San Antonio, TX 78201			
			Purpose for which amount is received	if politi	cal cont	ribution returned to filer
			Interest Income			

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 4/4 Rpt: 57/57 2 FILER NAME Filer ID (Ethics Commission Filers) Texans for Joe Straus 00056637 8 Amount (\$) Date 5 Name of person from whom amount is received 04/30/2024 Jefferson Bank \$753.65 6 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78201 Purpose for which amount is received Check if political contribution returned to filer Interest Income Name of person from whom amount is received Amount (\$) Date 05/31/2024 Jefferson Bank \$830.21 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78201 Purpose for which amount is received Check if political contribution returned to filer Interest Income Date Name of person from whom amount is received Amount (\$) 06/30/2024 \$705.52 Jefferson Bank Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78201 Purpose for which amount is received Check if political contribution returned to filer Interest Income