CORRECTION/AMENDMENT AFFIDAVIT FORM COR-PAC FOR POLITICAL COMMITTEE Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00087844 41 Date Received COMMITTEE CTX Votes **ELECTRONICALLY FILED** NAME 07/11/2024 TREASURER Hernandez, Laura (Ms.) NAME Date Hand-delivered or Date Postmarked **ORIGINAL** January 15 Runoff REPORT TYPE Receipt # Amount July 15 10th day after campaign treasurer resignation 30th day before election Dissolution report Date Processed 8th day before election Other (specify) ORIGINAL PERIOD Month Day Year Year Month Day Date Imaged **COVERED THROUGH** 01/01/2024 06/30/2024 **EXPLANATION OF CORRECTION** The error in the original report was the omission of three in-kind expenses made to CTX Votes. 8 AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check the box next to any and all applicable statements: Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. Ms. Laura Hernandez Signature of Campaign Treasurer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said ____, this the ____ _____, 20_____, to certify which, witness my hand and seal of office. Title of officer administering oath Signature of officer administering oath Printed name of officer administering oath Remember To Attach Any Part Of The Campaign Finance Report Form

Remember To Attach Any Part Of The Campaign Finance Report Form

Needed To Report And Explain Corrections

FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00087844 3 COMMITTEE NAME **OFFICE USE ONLY** CTX Votes Date Received **ELECTRONICALLY FILED** 07/11/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 6000 Lonesome Valley Trail Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78731 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Laura NAME NICKNAME LAST **SUFFIX** Hernandez STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 6000 Lonesome Valley Trail STREET **ADDRESS** (Residence or Business) Austin, TX 78731 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 6000 Lonesome Valley Trail MAILING **ADDRESS** Austin, TX 78731 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (915) 256-0221 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff Year 10 PERIOD Month Day Year Day Month **COVERED THROUGH** 01/01/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Runoff Other Primary 11/05/2024 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12	COMMITTEE NAME			13 Filer	· ID	(Ethics Commission Filers)
	CTX Votes			0008	37844	
14	COMMITTEE	1. Candidates	A. Supported			
	ACTIVITY	(Identify by name or, if applicable, classify by party.)				
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		3. Officeholders Assisted				
		(Identify by name or, if applicable, classify by party.)				
	CONTRIBUTION	1. TOTAL UNITEMIZED	POLITICAL CONTRIBUTIONS (OTHER THAN			
	TOTALS	CONTRIBUTIONS M	OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold		\$	0.00
		2. TOTAL POLITICA			_	
		(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)		\$	52,577.09
	EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$	0.00
		4. TOTAL POLITICA	L EXPENDITURES		\$	169,522.92
	CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAS G PERIOD	ST DAY	\$	5,000.00
	OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS O REPORTING PERIOD	F THE	\$	0.00
16	AFFIDAVIT					
			I swear, or affirm, under penalty of true and correct and includes all inf under Title 15, Election Code.			
			Ms. Lau	ra Hernaı	ndez	
			Signature of C	Campaign	Treasure	er
	AFFIX NOTARY	STAMP / SEAL ABOVE				
	Sworn to and subscribed	before me, by the said		, this the		day
			which, witness my hand and seal of office.	_		
	Signature of officer adr	ninistering oath	Printed name of officer administering oath	Title	of office	er administering oath

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

				OVER SHEET	4 of 41
	MMITTE X Vote:	EE NAME S	18 Filer ID 00087844	(Ethics Commission	n Filers)
	HEDULI ME OF :	SUBTOTAL A	MOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	50,858.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	1,719.09
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	169,522.92
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	70.96

	MONET	ARY POLITICAL CONTR	SCHEDULE A1				
	The Instruc	ction Guide explains how to comp	plete this forr	n.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 5/41	
2	FILER NAME CTX Votes				3	Filer ID (Ethics Commission Filers) 00087844	
4	Date 01/18/2024			7	Amount of Contribution (\$) \$254.	00	
		Austin, TX 78731					
8	Attorney	oation / Job title (See Instructions)	9	Employer (See Instructions Self	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 01/24/2024 Schumann, Gary Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$250.	00		
	Austin, TX 78703 Principal occupation / Job title (See Instructions) Employer (See Instruction						
	Attorney Self			,			
	Date Full name of contributor out-of-state PAC (ID#:) 1/29/2024 Texas Blue Action Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$50.	00		
		Austin, TX 78704					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/28/2024 Texas Majority PAC Contributor address; City; State; Zip Code Houston, TX 77266			Amount of Contribution (\$) \$50,000.	00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 01/29/2024	Van Mannan, Cynthia	state PAC (ID#:			Amount of Contribution (\$) \$50.	00
	Principal occu Executive Di	pation / Job title (See Instructions)		Employer (See Instructions Travis County Democra		Partv	
				200, 200014		y	

te this form. 1 Total pages Schedule A1: Sch: 2/2 Rpt: 6/41 3 Filer ID (Ethics Commission Filers) 00087844 PAC (ID#:
3 Filer ID (Ethics Commission Filers) 00087844 PAC (ID#:
\$254.00 9 Employer (See Instructions)
Clarite Holdings

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/2 Rpt: 7/41 3 Filer ID (Ethics Commission Filers) FILER NAME CTX Votes 00087844 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 01/12/2024 Hernandez, Laura \$102.60 I food for meeting 7 Contributor address; City; State; Zip Code Austin, TX 78731 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) CTX Votes Director 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor Amount of In-kind contribution

out-of-state PAC (ID#:

out-of-state PAC (ID#:

Forms provided by Texas Ethics Commission

02/14/2024

CTX Votes

Date

03/15/2024

CTX Votes

Hernandez, Laura

Austin, TX 78731

Contributor's principal occupation (FOR JUDICIAL)

Contributor's employer/law firm (FOR JUDICIAL)

Contributor address; City; State; Zip Code

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Contributor address; City; State; Zip Code

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Full name of contributor

Hernandez, Laura

Austin, TX 78731

Contributor's principal occupation (FOR JUDICIAL)

Contributor's employer/law firm (FOR JUDICIAL)

contribution (\$)

Employer (FOR NON-JUDICIAL)

Employer (FOR NON-JUDICIAL)

Contributor's job title (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

Amount of

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

contribution (\$)

Director

description

\$54.51 food for meeting

Check if travel outside of Texas. Complete Schedule T.

(See instructions)

In-kind contribution

description

Check if travel outside of Texas. Complete Schedule T.

(See instructions)

(See instructions)

\$61.98 | food for meeting

(See instructions)

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 8/41 3 Filer ID (Ethics Commission Filers) FILER NAME CTX Votes 00087844 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 01/01/2024 Travis County Democratic Party \$500.00 i office space 7 Contributor address; City; State; Zip Code Austin, TX 78702 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) description 02/01/2024 Travis County Democratic Party \$500.00 loffice space Contributor address; City; State; Zip Code Austin, TX 78702 Check if travel outside of Texas. Complete Schedule T. (See instructions) Employer (FOR NON-JUDICIAL) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Date Full name of contributor Amount of out-of-state PAC (ID#: contribution (\$) description 03/01/2024 Travis County Democratic Party \$500.00 office space Contributor address; City; State; Zip Code Austin, TX 78702 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's employer/law firm (FOR JUDICIAL)

(See instructions)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment		The Ins	struction Guide e	xplains how to co	mple	ete this form.		
1	Total pages Schedule F1:	2 FILE	ER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 1/32 Rpt: 9/41	CT	X Votes					00087844	
4	Date	5 Pay	ree name				•		
	06/30/2024		dwell County D	Democratic Pa	rty				
6	Amount (\$)	7 Pay	ee address;	City;	State; Zip Co	de			
	\$500.00	РО	Box 1011						
	Expenditure from corporate funds	Loc	khart, TX 7864	14					
8	PURPOSE	(a) Cate	egory (See Catego	ories listed at the ton o	of this schedule)	(b)	Description		
	OF EXPENDITURE		ntributions/Don				Check if travel outside	de of Texas. Com	plete Schedule T.
	EXPENDITORE	Car	ndidate/Officeh	older/Political	Committee		Check if Austin, TX,	officeholder living	g expense
							donation		
_	Complete ONII V if allow	0	lidata (Office le chi		0#:	aule 4		Office	a lad
9	Complete ONLY if direct expenditure to benefit C/O		lidate/Officeholde	er name	Office sou	ignt		Office he	elu
	Date	•	ree name						
	01/12/2024		tina, Charles						
	Amount (\$)		ree address;	City;	State; Zip Co	ode			
	\$1,367.67	106	6 Lakeview Ct						
_	T Expenditure from								
L	corporate funds	Kyl	e, TX 78640						
	PURPOSE	(a) Cate	egory (See Catego	ories listed at the top	of this schedule)	(b)	Description		
	OF EXPENDITURE		aries/Wages/C				Check if travel outsid		
							Check if Austin, TX, salary	onicenoider living	g expense
							Saidiy		
	Complete ONLY if direct	Cand	lidate/Officeholde	er name	Office sou	l aht		Office he	eld
	expenditure to benefit C/OI					9			
	Date	Dav	ree name						
	01/30/2024		tina, Charles						
				City:	State: 7in Ca	nd o			
	Amount (\$) \$1,774.94		vee address; S Lakeview Ct	City;	State; Zip Co	ue			
	Ф1,114.94	100	Lakeview Cl						
Г	Expenditure from	17. 1	o TV 70040						
<u> </u>	corporate funds		e, TX 78640						
	PURPOSE OF		egory (See Catego		of this schedule)	(b)	Description	to of Toyon Com	unlota Schadula T
	EXPENDITURE	Sal	aries/Wages/C	ontract Labor			Check if travel outsion Check if Austin, TX,		•
							salary		,
							-		
	Complete ONLY if direct	Cand	lidate/Officeholde	er name	Office sou	ght		Office he	eld
	expenditure to benefit C/O	ł				-			

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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/32 Rpt: 10/41	CTX Votes 00087844
301. 2/32 Kpt. 10/41	l.
4 Date	5 Payee name
02/15/2024	Cetina, Charles
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,529.41	106 Lakeview Ct
Ψ1,020.12	100 Landvion of
Expenditure from	
corporate funds	Kyle, TX 78640
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	salary
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	-l
5 .	
Date	Payee name
02/29/2024	Cetina, Charles
Amount (\$)	Payee address; City; State; Zip Code
\$1,855.29	106 Lakeview Ct
, ,	
Expenditure from	// L = 7/ = 20 / 2
corporate funds	Kyle, TX 78640
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	salary
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Davies same
	Payee name
03/15/2024	Cetina, Charles
Amount (\$)	Payee address; City; State; Zip Code
\$1,730.29	106 Lakeview Ct
Expenditure from corporate funds	Kyle, TX 78640
-	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense salary
	Salary
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	ll Committee L	egal Services	Salaries/W	ages/Co	ntract Labor		OTHER (enter	a category not liste	d above)
Great Gard F dyment		The Instruction Guide exp	plains how to co	mplete	this form.				
1 Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Comn	nission Filers)
Sch: 3/32 Rpt: 11/41	CTX Votes						00087844		
4 Date	5 Payee name								
03/29/2024	Cetina, Char	les							
6 Amount (\$)	7 Payee addres	s; City;	State; Zip Co	de					
\$2,015.99	106 Lakevie		•						
Expenditure from corporate funds	Kyle, TX 786	40							
				(1-) -					
8 PURPOSE OF		Categories listed at the top of	this schedule)	(0) D	escription	outci	do of Toyas Cor	nplete Schedule T.	
EXPENDITURE	Salaries/wa	ges/Contract Labor		F	₫		officeholder livin		
				Sã	alary				
					•				
9 Complete ONLY if direct	L Candidate/Offic	eholder name	Office sou	aht			Office h	eld	
expenditure to benefit C/OI				5					
Date	Davisa nama								
	Payee name	loc							
04/15/2024	Cetina, Char								
Amount (\$)	Payee addres	•	State; Zip Co	de					
\$623.36	106 Lakevie	v Ct							
Expenditure from									
corporate funds	Kyle, TX 786	40							
PURPOSE	(a) Category (See	Categories listed at the top of	this schedule)	(b) D	escription				
OF EXPENDITURE		jes/Contract Labor			₫			nplete Schedule T.	
EXI ENDITORE				L	4	1, TX,	officeholder livin	g expense	
				Sa	alary				
				_					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Offic	eholder name	Office sou	ght			Office h	eld	
experience to benefit ever									
Date	Payee name								
01/29/2024	Costco								
Amount (\$)	Payee addres	s; City;	State; Zip Co	de					
\$148.97	10401 Resea	arch Blvd							
Expenditure from corporate funds	Austin, TX 7	3759							
PURPOSE				(h) D	escription				
OF		Categories listed at the top of ead/Rental Expense	this schedule)	(b)		outsi	de of Texas. Cor	nplete Schedule T.	
EXPENDITURE	Onice Overn	cau/Nemai Expense		F	₫		officeholder livin		
				SI	upplies				
Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ght			Office h	eld	
expenditure to benefit C/OI	expenditure to benefit C/OH								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/32 Rpt: 12/41	CTX Votes 00087844
4 Date	5 Payee name
01/11/2024	Democracy Engine
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$10.46	237 Florida Avenue NW
— Foresedit we from	
Expenditure from corporate funds	Washington, DC 20001
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense credit card processing fee
	Great card processing ree
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Dougo nama
01/25/2024	Payee name
	Democracy Engine
Amount (\$)	Payee address; City; State; Zip Code
\$10.46	237 Florida Avenue NW
Expenditure from	
corporate funds	Washington, DC 20001
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	credit card processing fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
<u> </u>	
Date	Payee name
02/08/2024	Democracy Engine
Amount (\$)	Payee address; City; State; Zip Code
\$4.60	237 Florida Avenue NW
Expenditure from	
corporate funds	Washington, DC 20001
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense credit card processing fee
	credit card processing ree
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 Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

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: 5/32 Rpt: 13/41	CTX Votes 00087844
4 Date	5 Payee name
06/28/2024	Frost Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5.00	5800 N Mopac Expy
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
5.	
Date	Payee name
05/31/2024	Frost Bank
Amount (\$)	Payee address; City; State; Zip Code
\$5.00	5800 N Mopac Expy
— Forestitus from	
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
_/	Check if Austin, TX, officeholder living expense
	fee fee
2 1 2 2 1 1 2 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
p = 1 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2	
Date	Payee name
04/30/2024	Frost Bank
Amount (\$)	Payee address; City; State; Zip Code
\$5.00	5800 N Mopac Expy
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EAPENDITURE	Check if Austin, TX, officeholder living expense
	fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
CAPCHARLINE TO DETICITE C/OI	•

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

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission	Filers)
Sch: 6/32 Rpt: 14/41	CTX Votes 00087844	
4 Date	5 Payee name	
03/29/2024	Frost Bank	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$5.00	5800 N Mopac Expy	
Expenditure from		
corporate funds	Austin, TX 78731	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	fee	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	DH .	
Date	Payee name	
02/29/2024	Frost Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$5.00	5800 N Mopac Expy	
Expenditure from		
corporate funds	Austin, TX 78731	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	fee	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	DH .	
Date	Payee name	
02/28/2024	Frost Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$15.00	5800 N Mopac Expy	
Expenditure from		
corporate funds	Austin, TX 78731	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	fee	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI)H	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
TTHER (order a cotogony pet listed above)

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: 7/32 Rpt: 15/41	CTX Votes 00087844
4 Date	5 Payee name
01/31/2024	Frost Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5.00	5800 N Mopac Expy
Expenditure from corporate funds	Austin, TX 78731
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense fee
	iee iee
Complete CNII V if direct	Candidate/Officeholder name Office cought Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/12/2024	Gibson, Stephen
Amount (\$)	Payee address; City; State; Zip Code
\$138.52	2721 Creeks Edge Pkwy
— F	
Expenditure from corporate funds	Austin, TX 78733
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITORE	Check if Austin, TX, officeholder living expense
	salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ever	
Date	Payee name
01/30/2024	Gibson, Stephen
Amount (\$)	Payee address; City; State; Zip Code
\$1,548.96	2721 Creeks Edge Pkwy
Expenditure from corporate funds	Austin, TX 78733
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/OI	1

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 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: 8/32 Rpt: 16/41	CTX Votes 00087844
4 Date	5 Payee name
02/15/2024	Gibson, Stephen
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,408.85	2721 Creeks Edge Pkwy
Expenditure from corporate funds	Austin, TX 78733
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense salary
	Salaty
O Complete ONLY if alice -	Candidate/Officeholder name Office acusht
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
·	
Date	Payee name
02/29/2024	Gibson, Stephen
Amount (\$)	Payee address; City; State; Zip Code
\$1,533.85	2721 Creeks Edge Pkwy
Expenditure from corporate funds	Austin, TX 78733
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	salary
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	-
Date	Payee name
03/15/2024	Gibson, Stephen
Amount (\$)	Payee address; City; State; Zip Code
\$1,559.55	2721 Creeks Edge Pkwy
, _,ccc.oo	,
Expenditure from corporate funds	Austin, TX 78733
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Mages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	salary
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

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

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

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

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

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

Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 9/32 Rpt: 17/41	CTX Votes	00087844
4 Date	5 Payee name	<u>'</u>
03/29/2024	Gibson, Stephen	
6 Amount (\$)	7 Payee address; City; State; Zip Cod	le
\$1,694.59	2721 Creeks Edge Pkwy	
Expenditure from corporate funds	Austin, TX 78733	
8 PURPOSE		(b) Description
OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		salary
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht Office held
experientare to benefit ever		
Date	Payee name	
04/15/2024	Gibson, Stephen	
Amount (\$)	Payee address; City; State; Zip Cod	e
\$852.99	2721 Creeks Edge Pkwy	
Funanditura from		
Expenditure from corporate funds	Austin, TX 78733	
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.
		Check if Austin, TX, officeholder living expense
		salary
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/OI	•	Till Office Held
D-4-		
Date	Payee name	
06/03/2024	Google	
Amount (\$)	Payee address; City; State; Zip Cod	e
\$51.17	1600 Amphitheatre Parkway	
Expenditure from		
corporate funds	Mountain View, CA 94043	
PURPOSE OF	, ((b) Description
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		domain
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/OI		

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 10/32 Rpt: 18/41	CTX Votes 00087844
·	l .
4 Date	5 Payee name
05/01/2024	Google
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$51.17	1600 Amphitheatre Parkway
Expenditure from	Mountain View, CA 94043
corporate funds	
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
	domain
	dontain
O Complete ONLY if divert	Condidate/Office helder name Office accepts
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/01/2024	Google
Amount (\$)	Payee address; City; State; Zip Code
\$51.17	1600 Amphitheatre Parkway
402.2.	2000 / 111 / 11111000000 / 1111110000
Expenditure from	M
corporate funds	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 outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense domain
	domain
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experientare to beliefit 6/6	'
Date	Payee name
03/01/2024	Google
Amount (\$)	Payee address; City; State; Zip Code
\$51.17	1600 Amphitheatre Parkway
Ψ01.11	
Expenditure from	Mauratain Vienus CA 04040
corporate funds	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
	domain
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experialitie to belieff C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Printing Expense Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 11/32 Rpt: 19/41 CTX Votes 00087844 4 Date Payee name 02/01/2024 Google 6 Amount (\$) Payee address; City; State; Zip Code \$47.05 1600 Amphitheatre Parkway Expenditure from Mountain View, CA 94043 corporate funds **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense domain Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/02/2024 Google Amount (\$) Payee address; City; State; Zip Code \$38.38 1600 Amphitheatre Parkway Expenditure from Mountain View, CA 94043 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense domain Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/29/2024 **HEB** Amount (\$) Payee address: City: State; Zip Code \$16.72 7015 Village Center Drive Expenditure from corporate funds Austin, TX 78731 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 12/32 Rpt: 20/41	CTX Votes 00087844
4 Date	5 Payee name
01/04/2024	HEB
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$38.68	7015 Village Center Drive
, , , , ,	
Expenditure from	Augtin TV 70701
corporate funds	Austin, TX 78731
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Supplies
	Зирріїсэ
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
onponentare to benefit 6/01	
Date	Payee name
03/27/2024	HISCOX INC
Amount (\$)	Payee address; City; State; Zip Code
\$49.56	14643 Dallas Pkwy
+ .3.00	#450
Expenditure from	
corporate funds	Dallas, TX 75254
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
	insurance
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	•
Date	Payee name
02/27/2024	HISCOX INC
Amount (\$)	Payee address; City; State; Zip Code
\$99.40	14643 Dallas Pkwy
400.40	#450
Expenditure from	
corporate funds	Dallas, TX 75254
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
	insurance
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialities to beliefft G/O	•

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	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: 13/32 Rpt: 21/41	CTX Votes 00087844
4 Date	5 Payee name
01/12/2024	Hernandez, Laura
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4,536.90	6000 Lonesome Valley Trail
Expenditure from corporate funds	Austin, TX 78731
8 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.
	Check if Austin, TX, officeholder living expense salary
	Salary
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
01/30/2024	Hernandez, Laura
Amount (\$)	Payee address; City; State; Zip Code
\$4,536.90	6000 Lonesome Valley Trail
Evnanditura from	
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	salary
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
'	
Date	Payee name
02/15/2024	Hernandez, Laura
Amount (\$)	Payee address; City; State; Zip Code
\$4,536.90	6000 Lonesome Valley Trail
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	salary
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete ONLY if direct expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

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

Credit Card Payment	The Instruction Guide explains how to con	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 14/32 Rpt: 22/41	CTX Votes	00087844
4 Date	5 Payee name	•
02/29/2024	Hernandez, Laura	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	le
\$4,536.90	6000 Lonesome Valley Trail	
Expenditure from corporate funds	Austin, TX 78731	
8 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.
LA LINDITORIL		Check if Austin, TX, officeholder living expense
		salary
9 Complete ONLY if direct	Candidate/Officeholder name Office souc	ht Office held
expenditure to benefit C/O		office Hold
Date	Payee name	
03/29/2024	Hernandez, Laura	
Amount (\$)	Payee address; City; State; Zip Cod	do
\$4,536.90	6000 Lonesome Valley Trail	ic .
φ4,330.90	0000 Lonesome valley mail	
Expenditure from corporate funds	Austin, TX 78731	
<u> </u>		(h) a
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	Salaties/ wages/Contract Labor	Check if Austin, TX, officeholder living expense
		salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht Office held
experience to belief even	·	
Date	Payee name	
04/17/2024	JTX Strategies Inc.	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$6,000.00	1912 Miles Ave	
Expenditure from		
corporate funds	Austin, TX 78745	
PURPOSE	,	(b) Description
OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		consulting
		- 3
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht 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

Candidate/Officeholder/Politica Credit Card Payment		Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 15/32 Rpt: 23/41	CTX Votes		00087844
4 Date	Payee name		
02/29/2024	JTX Strategies Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
\$6,000.00	1912 Miles Ave		
Expenditure from corporate funds	Austin, TX 78745		
8 PURPOSE	(See Categories listed at the top of	this schedule) (b) Description	
OF EXPENDITURE	Consulting Expense		outside of Texas. Complete Schedule T.
		-	ı, TX, officeholder living expense
		consulting	
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
02/08/2024	JTX Strategies Inc.		
Amount (\$)	Payee address; City;	State; Zip Code	
\$6,000.00	1912 Miles Ave	•	
40,000.00	2022007.000		
Expenditure from corporate funds	Austin, TX 78745		
PURPOSE	a) Category (See Categories listed at the top of	this schedule) (b) Description	
OF EXPENDITURE	Consulting Expense	-	outside of Texas. Complete Schedule T.
-			ı, TX, officeholder living expense
		consulting	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/OI			
Date	Payee name		
01/16/2024	JTX Strategies Inc.		
Amount (\$)	Payee address; City;	State; Zip Code	
\$6,000.00	1912 Miles Ave	•	
+3,233,00			
Expenditure from corporate funds	Austin, TX 78745		
PURPOSE	(a) Category (See Categories listed at the top of	this schedule) (b) Description	
OF EXPENDITURE	Consulting Expense		outside of Texas. Complete Schedule T.
EXPENDITORE		—	ı, TX, officeholder living expense
		consulting	
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/OI			

SCHEDULE F1

The straining Expense Event Expense Event Expense Loan Repayment/Reimbur Community Com

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

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: 16/32 Rpt: 24/41	CTX Votes 00087844
4 Date	5 Payee name
04/19/2024	Laura Hernandez Consulting LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,000.00	6000 Lonesome Valley Trail
- Funanditura from	
Expenditure from corporate funds	Austin, TX 78731
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.
	Check if Austin, TX, officeholder living expense Staff
	Stail
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
03/15/2024	Laura Hernandez Consulting LLC
Amount (\$)	Payee address; City; State; Zip Code
\$4,000.00	6000 Lonesome Valley Trail
Ψ+,000.00	Cook Lonesome valley ITali
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense
	Check if Austin, TX, officeholder living expense Staff
	Stall
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Davisa nama
06/30/2024	Payee name Laura Hernandez Consulting LLC
	<u> </u>
Amount (\$)	Payee address; City; State; Zip Code
\$3,967.07	6000 Lonesome Valley Trail
Expenditure from	
corporate funds	Austin, TX 78731
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
	consulting
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 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 (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outer a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 17/32 Rpt: 25/41	CTX Votes	00087844
4 Date	5 Payee name	·
01/12/2024	Medina, Israel	
6 Amount (\$)	7 Payee address; City; State; Zip	Code
\$997.10	2401 Leon Street Apt 307	
Expenditure from corporate funds	Austin, TX 78705	
8 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.
		Check if Austin, TX, officeholder living expense Salary
		Salaty
O Complete CNU V if all	Condidate (Office helder 17 - 17 - 27	Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office s	sought Office held
Date	Payee name	
01/30/2024	Medina, Israel	
Amount (\$)	Payee address; City; State; Zip	Code
\$1,875.38	2401 Leon Street Apt 307	
	·	
Expenditure from corporate funds	Austin, TX 78705	
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.
		Check if Austin, TX, officeholder living expense
		salary
2 1 2 2 1 1 2 1 1		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office s	sought Office held
oxportantaro to sorione or o		
Date	Payee name	
02/15/2024	Medina, Israel	
Amount (\$)	Payee address; City; State; Zip	Code
\$1,730.29	2401 Leon Street Apt 307	
	·	
Expenditure from corporate funds	Austin, TX 78705	
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.
EXPENDITURE	-	Check if Austin, TX, officeholder living expense
		salary
Complete ONLY if direct	Candidate/Officeholder name Office s	sought Office held
expenditure to benefit C/O	1	

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 18/32 Rpt: 26/41	CTX Votes 00087844
4 Date	5 Payee name
02/29/2024	Medina, Israel
6 Amount (t)	
6 Amount (\$)	
\$1,533.85	2401 Leon Street Apt 307
- Cynonditure from	
Expenditure from corporate funds	Austin, TX 78705
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	/ / / · · · · · · · · · · · · · · · · ·
EXPENDITURE	Salaries/Wages/Contract Labor
	salary
	,
• • • • • • • • • • • • • • • • • • • •	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit 6/01	'
Date	Payee name
03/15/2024	Medina, Israel
Amount (¢)	
Amount (\$)	Payee address; City; State; Zip Code
\$1,720.25	2401 Leon Street Apt 307
- Cynanditura fram	
Expenditure from corporate funds	Austin, TX 78705
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. Check if Austin, TX, officeholder living expense
	salary
	Suidiy
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to beliefit C/O	
Date	Payee name
03/29/2024	Medina, Israel
Amount (\$)	Payee address; City; State; Zip Code
\$1,955.73	2401 Leon Street Apt 307
- Forest diture (co. co.	
Expenditure from corporate funds	Austin, TX 78705
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Salarias/Magas/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	salary
	Salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to beliefft 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	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: 27/41	CTX Votes 00087844
4 Date	5 Payee name
04/15/2024	Medina, Israel
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$230.88	2401 Leon Street Apt 307
Expenditure from corporate funds	Austin, TX 78705
8 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.
	Check if Austin, TX, officeholder living expense salary
	Suldiy
Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/26/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$39.03	2620 W Anderson Ln
Expenditure from corporate funds	Austin, TX 78757
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
	supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	4
Date	Payee name
01/29/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$8.65	2620 W Anderson Ln
Expenditure from	Austin, TX 78757
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	supplies
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 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		Vages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 20/32 Rpt: 28/41	CTX Votes	00087844
4 Date	5 Payee name	
01/29/2024	Office Depot	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$27.35	2620 W Anderson Ln	
Expenditure from corporate funds	Austin, TX 78757	
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
		supplies
Complete ONLY if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sou 	ght Office held
Date	Payee name	
01/25/2024	Office Depot	
Amount (\$)	Payee address; City; State; Zip Co	nde
\$58.54	2620 W Anderson Ln	
Ψ00.0-1	2020 W / WiderSoff Eff	
Expenditure from corporate funds	Austin, TX 78757	
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
		supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ght Office held
Date	Payee name	
06/13/2024	Payroll Data Processing	
Amount (\$)	Payee address; City; State; Zip Co	de
\$78.86	5005 W Laurel St	
	Ste 212	
Expenditure from corporate funds	Tampa, FL 33607	
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.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
experialities to beliefft C/Of		
<u></u>		

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 21/32 Rpt: 29/41	CTX Votes 00087844
•	L
4 Date	5 Payee name
04/30/2024	Payroll Data Processing
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$15.00	5005 W Laurel St
	Ste 212
Expenditure from corporate funds	Tampa, FL 33607
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	payroll
	F-2 -
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
01/24/2024	Payroll Data Processing
Amount (\$)	Payee address; City; State; Zip Code
\$48.86	5005 W Laurel St
	Ste 212
Expenditure from corporate funds	Tampa, FL 33607
•	
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
	payroll
	h-2-2
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
·	
Date	Payee name
01/11/2024	Payroll Data Processing
Amount (\$)	Payee address; City; State; Zip Code
\$5,214.17	5005 W Laurel St
	Ste 212
Expenditure from corporate funds	Tampa, FL 33607
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	payroll taxes
	F-A
Complete <u>ONLY</u> 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 Committee

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

Printing Expense Salaries/Wages/Contract Labor

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

Credit Card Payment	The Instruction Guide explains how to co	mple	te this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 F	iler ID	(Ethics Commission Filers)
Sch: 22/32 Rpt: 30/41	CTX Votes			00087844	
4 Date	5 Payee name		•		
01/30/2024	Payroll Data Processing				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$5,744.61	5005 W Laurel St				
Expenditure from	Ste 212				
corporate funds	Tampa, FL 33607				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside		
			Check if Austin, TX, of payroll taxes	fficeholder living	expense
			payron taxes		
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ıaht		Office he	ald
expenditure to benefit C/O		igiit		Office fic	Siu -
Date	Doving name				
02/15/2024	Payee name Payroll Data Processing				
	, ,	ndo			
Amount (\$) \$5,664.21	Payee address; City; State; Zip Co 5005 W Laurel St	oue			
\$5,004.21					
Expenditure from	Ste 212				
corporate funds	Tampa, FL 33607				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description	o of Toyon Com	plata Cabadula T
EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside Check if Austin, TX, o		
			payroll taxes		
Complete ONLY if direct	Candidate/Officeholder name Office sou	ight		Office he	eld
expenditure to benefit C/OI	1				
Date	Payee name				
02/28/2024	Payroll Data Processing				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$5,390.65	5005 W Laurel St				
- "	Ste 212				
Expenditure from corporate funds	Tampa, FL 33607				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside		•
EXI ENDITORE			Check if Austin, TX, o	fficeholder living	expense
			payroll taxes		
Complete ONLY if direct	Candidate/Officeholder name Office sou	laht		Office he	ald
expenditure to benefit C/O		igill		Office He	สน

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

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

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/32 Rpt: 31/41	CTX Votes 00087844
4	Date	5 Payee name
	03/15/2024	Payroll Data Processing
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,788.65	5005 W Laurel St
		Ste 212
╓	Expenditure from corporate funds	Tampa, FL 33607
٦	·	T
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel systems of Tayon Complete Schedule T
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		payroll taxes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Ľ	expenditure to benefit C/OI	H
	Date	Payee name
	03/29/2024	Payroll Data Processing
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$5,665.08	5005 W Laurel St
		Ste 212
╓	Expenditure from corporate funds	Tampa, FL 33607
Ľ		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		payroll taxes
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨	Data	Para area
	Date	Payee name
L	04/15/2024	Payroll Data Processing
	Amount (\$)	Payee address; City; State; Zip Code
	\$390.82	5005 W Laurel St
<u> _</u>	T Expenditure from	Ste 212
┞	corporate funds	Tampa, FL 33607
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		payroll taxes
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Candidate/Officeholder/Politica Credit Card Payment		gal Services	Salaries/W		contract Labor		OTHER (enter a	category not listed above)	
Credit Card Payment	TI	ne Instruction Guide expla	ins how to con	mple	te this form.				
1 Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)	
Sch: 24/32 Rpt: 32/41	CTX Votes						00087844		
4 Date	5 Payee name								
01/12/2024	Robertson, Je	ssica							
6 Amount (\$)	7 Payee address;	City; St	ate; Zip Coo	de					\neg
\$2,533.79	2425 Ashdale		·						
		·							
Expenditure from corporate funds	Austin, TX 78	757							
8 PURPOSE				(h)	Description				_
OF		Categories listed at the top of this es/Contract Labor	s schedule)	(D)	Description Check if travel of	outsi	de of Texas. Com	plete Schedule T.	
EXPENDITURE	Jaianes/ wag	55/Contract Labor			=		officeholder living	•	
					salary				
9 Complete ONLY if direct	Candidate/Office	holder name	Office soug	ght			Office he	eld	
expenditure to benefit C/OI	1								
Date	Payee name								_
01/30/2024	Robertson, Je	essica							
Amount (\$)	Payee address;	City; St	ate; Zip Cod	de					_
\$2,796.05	2425 Ashdale	•							
 ,. ••	2 120 1 15115	D17.pc 10							
Expenditure from	Austin, TX 78	757							
corporate funds				<i>.</i>					_
PURPOSE OF		Categories listed at the top of this	s schedule)	(b)	Description Check if travel of	outsi	de of Texas. Com	nlota Schadula T	
EXPENDITURE	Salaries/waye	es/Contract Labor			<u> </u>		officeholder living		
					ш salary			,	
					-				
Complete ONLY if direct	Candidate/Office	holder name	Office soug	ght			Office he	eld	
expenditure to benefit C/OI	4			_					
Date	Payee name								_
02/15/2024	Robertson, Je	essica							
Amount (\$)	Payee address;		ate; Zip Coo	40					
\$2,533.79	2425 Ashdale	-	idle, zip cod	ue					
φ ∠ ,υοο. <i>ι σ</i>	2420 Asiluaic	DI Αμι / ວ							
Expenditure from									
corporate funds	Austin, TX 78	757 							
PURPOSE OF		Categories listed at the top of this	s schedule)	(b)	Description			=	
EXPENDITURE	Salaries/Wage	es/Contract Labor			=		de of Texas. Com officeholder living		
					salary	, 17,	officeriolder living	у схрепас	
Complete ONLY if direct	Candidate/Office	holder name	Office soug	aht			Office he	əld	_
expenditure to benefit C/OI		noidel Hame	Omoo ooug	9110			Omoo ne	Sid	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Ivertising Expense Event Expense Loan Repayment/Reimbu

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

Event Expense Luair K Fees Office (Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printing Legal Services Salarie

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

Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 25/32 Rpt: 33/41	CTX Votes	00087844
4 Date	5 Payee name	·
02/29/2024	Robertson, Jessica	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$2,663.10	2425 Ashdale Dr Apt 75	
Expenditure from		
corporate funds	Austin, TX 78757	
8 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.
		Check if Austin, TX, officeholder living expense Salary
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	4	
Date	Payee name	
03/15/2024	Robertson, Jessica	
Amount (\$)	Payee address; City; State; Zip Code	
\$2,533.79	2425 Ashdale Dr Apt 75	
Expenditure from corporate funds	Austin, TX 78757	
PURPOSE OF	, (************************************	Description
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		salary
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	1	
Date	Payee name	
03/29/2024	Robertson, Jessica	
Amount (\$)	Payee address; City; State; Zip Code	
\$2,658.79	2425 Ashdale Dr Apt 75	
Expenditure from		
corporate funds	Austin, TX 78757	
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.
		Check if Austin, TX, officeholder living expense Salary
		calary
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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 26/32 Rpt: 34/41	CTX Votes 00087844
4 Date	5 Payee name
01/16/2024	SQUARESPACE INC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$12.00	225 Varick St
Expenditure from	12th floor
corporate funds	New York, NY 10014
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
	website
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
04/11/2024	Sandler Reiff
Amount (\$)	Payee address; City; State; Zip Code
\$195.00	1090 Vermont Ave NW
— Constantitude forms	#250
Expenditure from corporate funds	Washington, DC 20005
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	legal
	logu.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
03/14/2024	Sandler Reiff
Amount (\$)	Payee address; City; State; Zip Code
\$2,930.00	1090 Vermont Ave NW
	#250
Expenditure from corporate funds	Washington, DC 20005
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense legal
	icyai
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	-

SCHEDULE F1

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

Event Expense 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: 27/32 Rpt: 35/41	CTX Votes 00087844
4 Date	5 Payee name
01/31/2024	Sandler Reiff
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$390.00	1090 Vermont Ave NW
	#250
Expenditure from corporate funds	Washington, DC 20005
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense legal
	iegai
Complete ONLY if direct	Candidate/Officeholder name Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/26/2024	Sandler Reiff
Amount (\$)	Payee address; City; State; Zip Code
\$480.00	1090 Vermont Ave NW
	#250
Expenditure from corporate funds	Washington, DC 20005
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	legal
Operation ONE Wife discont	On did to 10 ff as hald a grant Off as south
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
·	
Date	Payee name
01/12/2024	Vaneron, Natalia
Amount (\$)	Payee address; City; State; Zip Code
\$1,398.56	4608 Bennett Ave Apt 104
Expenditure from corporate funds	Austin, TX 78751
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	salary
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 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 Filers)
Sch: 28/32 Rpt: 36/41	CTX Votes 00087844
·	l .
4 Date	5 Payee name
01/30/2024	Vaneron, Natalia
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,348.56	4608 Bennett Ave Apt 104
Expenditure from	Auctin TV 707E1
corporate funds	Austin, TX 78751
8 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
	salary
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
02/15/2024	Vaneron, Natalia
Amount (\$)	Payee address; City; State; Zip Code
` '	
\$1,665.01	4608 Bennett Ave Apt 104
Expenditure from	
corporate funds	Austin, TX 78751
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	salary
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Data	Davis asses
Date	Payee name
02/29/2024	Vaneron, Natalia
Amount (\$)	Payee address; City; State; Zip Code
\$1,533.85	4608 Bennett Ave Apt 104
Expenditure from corporate funds	Austin, TX 78751
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	salary
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
,	
L	

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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

	Т	The Instruction Guide explains how to complete this form.
2	FILER NAME	

EXPENDITURE CATEGORIES FOR BOX 8(a)

1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)							
Sch: 29/32 Rpt: 37/41	CTX Votes	00087844							
4 Date 03/15/2024	Payee name								
	Vaneron, Natalia								
6 Amount (\$)	7 Payee address; City; State; Zip Co	de							
\$1,890.99	4608 Bennett Ave Apt 104								
Expenditure from									
corporate funds	Austin, TX 78751								
8 PURPOSE OF	, , ,	(b) Description							
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		salary							
		·							
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	yht Office held							
expenditure to benefit C/OI									
Date	Payee name								
03/29/2024	Vaneron, Natalia								
Amount (\$)	Payee address; City; State; Zip Co	de							
\$2,015.99	4608 Bennett Ave Apt 104								
Expenditure from corporate funds	Austin, TX 78751								
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.							
EXI ENDITORE		Check if Austin, TX, officeholder living expense							
		salary							
Complete ONLY if direct	Condidate/Officeholder name Office service	aht Office held							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	gnt Office field							
Data									
Date 04/15/2024	Payee name Vaneron, Natalia								
		4-							
Amount (\$)	Payee address; City; State; Zip Co	de .							
\$323.22	4608 Bennett Ave Apt 104								
Expenditure from	A								
corporate funds	Austin, TX 78751								
PURPOSE OF	,	(b) Description Check if travel outside of Texas. Complete Schedule T.							
EXPENDITURE	Salaries/Wages/Contract Labor	Check if Austin, TX, officeholder living expense							
		salary							
Complete ONLY if direct	Candidate/Officeholder name Office sou	pht Office held							
expenditure to benefit C/OI	1								
I									

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 30/32 Rpt: 38/41	CTX Votes 00087844
4 Date	5 Payee name
01/12/2024	Vasquez, Alberto
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3,153.96	4600 Elmont Drive Apt 1812
Ψ3,133.30	4000 Ellion Brive Apt 1012
Expenditure from	
corporate funds	Austin, TX 78741
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITORE	Check if Austin, TX, officeholder living expense
	salary
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
01/30/2024	Vasquez, Alberto
Amount (\$)	Payee address; City; State; Zip Code
\$3,278.96	4600 Elmont Drive Apt 1812
Expenditure from corporate funds	Austin, TX 78741
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Mages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	salary
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
-	
Date	Payee name
02/15/2024	Vasquez, Alberto
Amount (\$)	Payee address; City; State; Zip Code
\$3,153.96	4600 Elmont Drive Apt 1812
+ 5,= 53.00	- 10° - 1
Expenditure from	Aughin TV 70744
corporate funds	Austin, TX 78741
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	salary
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) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Food/Beverage Expense Gift/Awards/Memorials Exper Legal Services The Instruction Guide			xpens Vages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 31/32 Rpt: 39/41		CTX Votes							00087844	
4	Date	5	Payee name								
	02/29/2024		Vasquez, A	lberto							
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode				
	\$3,411.96		4600 Elmor	nt Drive Apt 1812							
Ц	Expenditure from corporate funds		Austin, TX	78741							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the top	of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Salaries/Wa	ages/Contract Labor	r			므		de of Texas. Com	
	ZAI ZIADITORZ							_	, TX,	officeholder living	expense
								salary			
9	Complete ONLY if direct	<u> </u>	Pandidate/Offi	ceholder name	Of	ffice sou	labt			Office he	ald
,	expenditure to benefit C/O		Zandidate/Om	cenduel name			igiit			Office fie	siu .
	Date		Payee name								
	03/15/2024		Vasquez, A	lberto							
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	ode				
	\$3,153.96		4600 Elmor	nt Drive Apt 1812							
	Expenditure from corporate funds		Austin, TX	78741							
	PURPOSE	(a)	Category (Se	ee Categories listed at the top	of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Salaries/Wa	ages/Contract Labor	r			-		de of Texas. Com	
									, TX,	officeholder living	expense
								salary			
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	Of	ffice sou	<u>l</u> ıght			Office he	eld
	Date		Payee name	lla a urta							
	03/29/2024		Vasquez, A								
	Amount (\$)		Payee addre		State;	Zip Co	ode				
	\$3,278.96		4600 Elmor	nt Drive Apt 1812							
	Expenditure from corporate funds		Austin, TX	78741							
	PURPOSE	(a)	Category (Se	ee Categories listed at the top	of this schee	dule)	(b)	Description			
	OF EXPENDITURE			ages/Contract Labor				브		de of Texas. Com	
									, TX,	officeholder living	expense
								salary			
	Complete ONLY if direct	Ц,	Candidate/Offi	ceholder name	<u></u>	ffice sou	lapt			Office he	ald.
	expenditure to benefit C/O		Janaidale/OIII	ocholaci Hame	Oi	300	agrit			Onice He	JIQ.

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer	s)
Sch: 32/32 Rpt: 40/41	CTX Votes 00087844	
4 Date	5 Payee name	
01/26/2024	Vonlane	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$240.00	3800 Maple Ave	
Expenditure from	Ste 265	
corporate funds	Dallas, TX 75219	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Transportation Equipment And Related	
	Expense Check if Austin, TX, officeholder living expense travel	
	uavei	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/Oh		
Date	Payee name	
01/19/2024	Vonlane	
Amount (\$)	Payee address; City; State; Zip Code	
\$240.00	3800 Maple Ave	
— F	Ste 265	
Expenditure from corporate funds	Dallas, TX 75219	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Transportation Equipment And Related	
EXI ENDITORE	Expense Check if Austin, TX, officeholder living expense	
	travel	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/Oh		
Date	Payee name	
01/29/2024	Wal-Mart	
Amount (\$)	Payee address; City; State; Zip Code	
\$30.92	2525 W Anderson Ln	
Expenditure from corporate funds	Austin, TX 78757	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Supplies	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		

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: 1/1 Rpt: 41/41 2 FILER NAME 3 Filer ID (Ethics Commission Filers) CTX Votes 00087844 4 Date 8 Amount (\$) 5 Name of person from whom amount is received 04/22/2024 \$70.96 Hiscox Inc. 6 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75254 Purpose for which amount is received Check if political contribution returned to filer insurance refund